



TRAFFORD
COUNCIL

**AGENDA PAPERS FOR
SPECIAL EXECUTIVE MEETING**

Date: Wednesday, 25 March 2015

Time: 6.00 pm

Place: Council Chamber, Trafford Town Hall, Talbot Road, Stretford M32 0TH

| 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. | MATTERS FROM COUNCIL OR OVERVIEW AND SCRUTINY COMMITTEES (IF ANY) | |
| | To consider any matters referred by the Council or by the Overview and Scrutiny Committees: Feedback on Scrutiny Review of Joint Venture proposals is listed under Item 4 below. | |
| 4. | RESHAPING TRAFFORD: ECONOMIC GROWTH AND ENVIRONMENT INFRASTRUCTURE | 1 - 36 |
| | To consider a report of the Executive Members for Environment and Operations and for Economic Growth and Prosperity. | |
| | Feedback from the Scrutiny review of the proposals is also appended for the Executive's consideration. | |
| | (Note: a related report is to be considered in Part II of this agenda – Item 12 refers.) | |

Executive - Wednesday, 25 March 2015

5. **OUTCOME OF THE LIBRARIES BUDGET CONSULTATION FOR 2015/16 AND RECOMMENDATIONS** 37 - 156
- To consider a report of the Executive Member for Transformation and Resources.
6. **ESTABLISHMENT OF "FAIR PRICE FOR CARE" IN RELATION TO ADULT SOCIAL CARE COMMISSIONED SERVICES FOR THE 2015-16 FINANCIAL YEAR**
- To consider reports of the Executive Member for Adult Social Services and Community Wellbeing:
- (a) Residential and Nursing Care (with Appendix) 157 - 170
- (b) Homecare 171 - 178
7. **GREATER MANCHESTER SPATIAL FRAMEWORK JOINT DEVELOPMENT PLAN DOCUMENT** 179 - 186
- To consider a report of the Executive Member for Economic Growth and Planning.
8. **GM DEVOLUTION - MEMORANDUM OF UNDERSTANDING** 187 - 224
- To consider a report of the Leader of the Council and Chief Executive.
9. **OLD TRAFFORD LODGE HOTEL REDEVELOPMENT ASSISTANCE** 225 - 236
- To consider a report of the Executive Member for Finance and Director of Finance.
10. **URGENT BUSINESS (IF ANY)**
- Any other item or items which by reason of:-
- (a) Regulation 11 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the Chairman of the meeting, with the agreement of the relevant Overview and Scrutiny Committee Chairman, is of the opinion should be considered at this meeting as a matter of urgency as it relates to a key decision; or
- (b) 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**

Executive - Wednesday, 25 March 2015

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.

PART II

12. **RESHAPING TRAFFORD: ECONOMIC GROWTH AND ENVIRONMENT INFRASTRUCTURE** 237 - 370

To consider a report of the Executive Members for Environment and Operations and for Economic Growth and Prosperity. (Note: a related report is to be considered in Part I of this agenda – Item 4 refers.)

13. **GREATER MANCHESTER DEVOLUTION: HOUSING INVESTMENT FUND** 371 - 396

To consider a report of the Leader of the Council and Chief Executive.

THERESA GRANT
Chief Executive

COUNCILLOR SEAN ANSTEE
Leader of the Council

Membership of the Committee

Councillors S. Anstee (Chairman), M. Cornes, M. Hyman, J. Lamb, P. Myers, J.R. Reilly, A. Williams and M. Young (Vice-Chairman)

Further Information

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

Jo Maloney, 0161 912 4298
Email: joseph.maloney@trafford.gov.uk

This agenda was issued on Tuesday 17th March by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall, Talbot Road, Stretford M32 0TH.

Any person wishing to photograph, film or audio-record a public meeting are requested to inform Democratic Services in order that necessary arrangements can be made for the meeting.

Please contact the Democratic Services Officer 48 hours in advance of the meeting if you intend to do this or have any queries.

This page is intentionally left blank

TRAFFORD COUNCIL

Report to: Executive
Date: 25th March 2015
Report for: Decision
Report of: Executive Member for Economic Growth and Planning
and Executive Member for Environment and Operations

Report Title

RESHAPING TRAFFORD: Economic Growth, Environment and Infrastructure

Summary

The report provides an update on progress on the procurement of a Service Provider to deliver a range of Highways, Environmental, Professional, Technical and Infrastructure services. The report sets out the results of the evaluation of tenders received and makes recommendations with regard to the award of the contract and the replacement of existing street lighting luminaires with LED luminaires.

Recommendation(s)

It is recommended that:

- 1) Approval is granted to proceed to the contract award stage for the procurement of Environmental, Highways, Professional, Technical and Infrastructure Services;
- 2) Approval is granted:
 - a. To proceed to the contract award stage for street lighting maintenance including the replacement of existing street lighting luminaires with LED luminaires;
 - b. That “neutral” and “warm” LED luminaires be used for the street lights, as set out in paragraph 6.1.11 of the Part II report;
 - c. That a Central Management System is installed as part of the replacement programme.
- 3) That authority be delegated to the Deputy Chief Executive in consultation with the Director of Legal and Democratic Services to finalise contract terms and enter into the contract with the preferred bidder(s) for each Lot as identified in paragraph 5.6 in the Part II report.

Contact persons for access to background papers and further information:
 Richard Roe, Director of Growth and Regulatory Services and Dianne Geary, Senior Business Change Manager.
 Extensions: x4265 and x1821

Background Papers: Trafford LED Street Lighting HIA Update Report
 Equality Impact Assessments

This report supports the following Corporate priorities;

| | |
|---|---|
| Relationship to Policy Framework/Corporate Priorities | <ul style="list-style-type: none"> • Low Council Tax and Value for Money • Reshaping Trafford Council |
| Financial implications: | <p>The Council at its meeting on 18th February 2015 approved budget proposals for 2015/16, which included a saving of £2.25m from this procurement exercise. The award of this contract will result in these savings being achieved in full. The total cost of the recommended contract award across all lots is included in the Council's approved budget for 2015/16. This excludes any potential savings from energy or maintenance costs from the replacement of street lights with LED luminaires. As part of the contract award, the provider will commission and undertake capital schemes in respect of Highways, Street Lighting Greenspace and Property. The annual value of this work will vary according to the provision included in the annual capital programme. The total cost of the LED street lighting programme is £8.0m, and provision exists in the recently approved capital programme. The Council will also be responsible for the condition of street lighting columns, which is no change to the existing position. A provision of £1.3m is included in the capital programme for street lighting columns to support the installation of LED luminaires where required. The project management and procurement costs are expected to be £450,000, as reported at the Executive in September 2014.</p> |
| Legal Implications: | <p>The procurement exercise has been handled in accordance with statutory requirements, EU regulations and Trafford's Contract Procedure Rules.</p> |

| | |
|---|---|
| | Robust governance arrangements have been established to ensure effective Contract Management. These arrangements include appropriate roles for members in future governance |
| Equality/Diversity Implications | Equality Impact Assessments have been carried out and have identified no impact. These continue to be reviewed and updated and a copy of the latest assessment is available on the Council website. |
| Sustainability Implications | All bidders have submitted bids which provide sustainable solutions. |
| Staffing/E-Government/Asset Management Implications | There are significant staffing implications associated with this report as set out in section 12. The Lot 3 provider will be responsible for management of the Council's property portfolio including the commissioning and delivery of revenue and capital works. Carrington Depot will be managed and operated by the successful Lot 1 provider. |
| Risk Management Implications | A risk management log has developed as part of the overall governance for the Reshaping Trafford project, and is reviewed and updated on a regular basis. Any project of this scale carries risks in terms of achieving key deliverables, specifically savings aspirations and timing. These risks need to be set in the context of the overall financial challenge facing Trafford. Bidders have included Risk Management Plans as part of their final tenders. |
| Health & Wellbeing Implications | These will be identified and addressed as part of the mobilisation project plan. All proposals for LED have been accompanied by health and safety assessments and are compatible with Trafford Health Impact Assessment and the follow up Health Impact Assessment |
| Health and Safety Implications | All bidders have addressed how they will manage Health and Safety of staff delivering services as part of their final tenders. There are no additional Health and Safety implications associated with this report. |

1. BACKGROUND

- 1.1 Trafford faces substantial financial pressures and the budgets for 2015 to 2018 require innovative savings provisions to be considered. This has involved a number of different approaches including reducing contract costs through improved procurement, commissioning of services, managing demand and partnership working.
- 1.2 Trafford is taking these different approaches forward through its 'Reshaping Trafford' programme and is identifying potential alternative delivery models, opportunities for increasing income and efficiencies across the full range of our services.
- 1.3 A range of services across the Economic Growth, Environment and Infrastructure directorate were identified as being appropriate for delivery through an alternative model. This built on the experience of contracting out the delivery of the domestic and commercial waste services. The services being considered under this exercise are Trafford's Environmental Services, including Commercial Waste, Domestic Waste, Street Cleaning and Grounds Maintenance; plus Highways Services, including Winter Maintenance, Bridges, Traffic and Transportation, Road Safety, Street Lighting and Furniture; Drainage; Greenspace Strategy; the Let Estate; Corporate Landlord; and Major Projects teams. Contracts will be required to be in place from July 2015.
- 1.4 In addition, to deliver efficiencies in procurement, Manchester City Council's environmental services, including Domestic Waste and Street Cleaning, have been included as a specific sub-Lot. The budgeted value for the Manchester services in 2014/15 is £20m. Trafford Council are the overall procurement lead, but evaluation of bids has been carried out independently by officers from Trafford and Manchester for relevant services.
- 1.5 The Executive set four high level desired outcomes to be delivered through this procurement exercise, specifically:
 - **To deliver a minimum of 20% savings against the net budget from contract commencement.** In cash terms, 20% savings means that we are looking for an initial minimum saving in the region of £2.25M for 2015/16 (part year) along with on-going efficiency savings throughout the life of the contract;
 - **To deliver further, future efficiency savings through continuous improvement and innovation in service provision through the contract life.** Although the day to day operations would be managed by a third party Service Provider who would also look to grow and invest in the service, the Council would have a continuing strategic role and responsibility to ensure the partnership continues to deliver efficiencies and savings;
 - **To have flexibility, recognising the challenging financial climate facing local authorities at the moment.** Trafford Council is undergoing change and this process includes exploring alternative options to see how the Council can

operate in the changing financial climate. The successful Service Provider(s) should bring additional expertise and resources to work in collaboration with the Council and respond to the on-going budget pressures; and

- **Protect jobs and maintain service standards in so far as practicable.** Since austerity began the Council has already saved circa £75m, however we still have significant savings to make. Our priority remains to make sure we can identify sustainable levels of service delivery to the Trafford community and also protect jobs. This will potentially open up different opportunities for staff and further encourage and support the involvement of community groups in service delivery.

1.6 In the last three years the Council has delivered nearly £4m in savings and additional income, for the services in scope, as set out in the table below:

| Services | Savings/income 2012/13 to 2014/15 (£m) |
|--------------------------|---|
| Environmental Services | 1.6 |
| Highways | 1.5 |
| Property and Development | 0.7 |
| Total | 3.8 |

- 1.7 Trafford is recognised for lean and efficient services and has the foundations in place to build and develop for the future. The ‘Reshaping Trafford’ approach which has been adopted provides exciting opportunities to work with market leader(s) in the industry to build innovation and resilience for the years to come.
- 1.8 The Executive in March 2014 approved the publication of an Official Journal of the European Union (OJEU) notice for specified services, authorised the Corporate Director of Economic Growth, Environment and Infrastructure to extend the current Veolia waste contract by up to 12 months and provided delegated authority to approve the final service specifications, tenderer selection and evaluation criteria to be published with the OJEU notice, including moving services between Lots.
- 1.9 The Executive in September 2014 approved the next stage of the procurement process for the shortlisted bidders, the Invitation to Submit Detailed Solutions.
- 1.10 A briefing was delivered to Scrutiny Committee on 29th October 2014, explaining the desired outcomes, procurement process to date, next steps and key issues, followed by an explanation of the detailed solutions evaluation criteria.
- 1.11 The Executive in December 2014 received a report on progress to date following competitive dialogue in achieving the desired outcomes of the procurement exercise, before the Invitation to Submit Final Tender was issued on 23rd January 2015.

- 1.12 A report and presentation was delivered to Scrutiny Committee on 26th February 2015 to provide an update on the procurement process prior to the report being issued to Executive. A report from Scrutiny Committee is an agenda item for Executive on 16th March 2015.

2. SERVICES IN SCOPE

- 2.1 This new arrangement has combined a number of environmental and technical services within one procurement exercise with the aim of achieving better value for money and providing alternative sustainable delivery options for those services.
- 2.2 The contracts have been procured through a single procurement exercise, based upon competitive market dialogue, with services being offered in three Lots, including two sub-Lots. Potential Service Providers have been able to tender for any combination of Lots (and sub-Lots), being:

Lot 1: Environmental Services:

Lot 1a: Trafford Environmental Services

Domestic waste;
Commercial waste;
Grounds maintenance; and
Street cleansing.

Lot 1b: Manchester Environmental Services

Domestic waste; and
Street cleansing.

Lot 2: Highways & Street Lighting (operational):

Lot 2a: Highways:

Highways;
Winter maintenance; and
Gully cleansing.

Lot 2b: Street Lighting

Street lighting infrastructure;
LED street lighting project; and
Street furniture.

Lot 3: Technical Services:

Highways and Bridges (engineering etc.);
Professional Services including Engineering Design; Asset, Project and Contract Management; and Developers Interface;

Building Professional Services including Major Building Projects; Structural Engineering; Mechanical and Electrical Engineering; Landscape Architects; Operational Estate/Asset Management for the Corporate Estate and Schools; Property Development; and Land Sales; Management of Trafford's Investment Estate; Major Projects Team (Capital Build Team); and Capital Development Team.

- 2.3 The annual current value of direct costs incurred in relation to these Trafford services in 2014/15 is £15.5m plus c£10m capital expenditure (excluding schools), which is variable dependent on Council activity. The breakdown of this total budget by Trafford lot is as follows:

| Lot: Description | Revenue Budget 2014/15 (£m) |
|---|------------------------------------|
| Lot 1a: Trafford Environmental Services | 9.6 |
| Lot 2a: Highways | 2.4 |
| Lot 2b: Street Lighting | 0.6 |
| Lot 3: Technical Services | 2.9 |
| Total | 15.5 |

- 2.4 A further c£9.3m of capital (over the two years 2015/16 and 2016/17) has been identified to support the potential rollout of LED street lighting, subject to Executive approval based on a positive business case, demonstrated through the procurement process and acceptable mitigation of any potential impacts.
- 2.5 The Council has a successful record of delivering services in partnership. The domestic and trade waste elements of Lot 1a have been delivered through a private sector provider since 1992, and the budget for the current financial year for these services is £4.9m. The service has developed and improved over the period of the contract as demonstrated by the increase in recycling rates from 48% March 2013 to 58% March 2014. The average for Greater Manchester for 2013/2014 is 44.5% so Trafford is already a leader in this area. Trafford waste contract accounts for around a third of the total value of the three Lots.
- 2.6 The Council will continue to provide strategic oversight and retain responsibility for setting strategy, policy and agreeing service standards, supported by robust contract management throughout the life of the contract.

3. PROGRESS TO DATE

- 3.1 The OJEU notice for Trafford was issued on 10th April 2014 (in collaboration with Manchester City Council), followed by the release of the Pre-Qualification Questionnaire (PQQ) on 1st May 2014 to all organisations who had expressed an interest.
- 3.2 Sixteen Pre-Qualifying Questionnaires were received on 2nd June 2014 and were evaluated by Council officers and a shortlist of ten bidders across the Lots was selected to proceed to the next stage.
- 3.3 The shortlist to the Invitation to Participate in Dialogue/Invitation to Submit Outline Solutions (ITPD/ISOS) was released on 27th June 2014, followed by competitive dialogue meetings during July. One bidder withdrew from the process during the competitive dialogue phase. Outline solutions were submitted on 28th July 2014 and evaluated by Council officers.
- 3.4 Following approval at Executive on 1st September 2014, the shortlist to the Invitation to Submit Detailed Solutions (ISDS) was released on 9th September 2014. Further competitive dialogue ensued during September and October. Three bidders withdrew from the process during the competitive dialogue phase. The remaining bidders submitted Detailed Solutions for a range of Lots on 31st October 2014.
- 3.5 The shortlist for Invitation to Pursue Further Competitive Dialogue (IPFCD) was released on 13th November 2014. Further dialogue commenced 24th November 2014 and was closed on 22nd January 2015.
- 3.6 The Invitation to Submit Final Tender (ISFT) was released on 23rd January 2015. The Invitation to Submit Final Tender (ISFT) marks the final stage of the OJEU bidding process for procuring services under the competitive dialogue procedure.
- 3.7 The purpose of the ISFT was to invite Bidders to submit their Final Tender incorporating the detailed feedback that has been provided during the competitive dialogue stages. Once submitted, bidders cannot make any further changes to their Final Tender other than in response to a formal request by the Authority to clarify some aspect of their Final Tender submissions.
- 3.8 This ISFT sets out an explanation of the process and the conditions applying to the submission of Final Tenders and conclusion of the tender process.
- 3.9 The ISFT submissions were received on 2nd February 2015. The names of the bidders who submitted a final tender are below:

Lot 1a:

- Amey LG
- Veolia ES (UK) Ltd

Lot 2a:

- Amey LG
- Balfour Beatty Living Places
- Kier MG Ltd

Lot 2b (incl. potential LED project):

- Amey LG
- Balfour Beatty Living Places
- Kier MG Ltd

Lot 3:

- Amey LG
- Kier MG Ltd

3.10 In the remainder of this report, and in the related Part II report, the names of the bidders have been anonymised. This includes summaries of bidders' tenders and prices and the results of the evaluation of bids. This is to ensure that the decision as to whether to accept the recommendation to award the contract is based on the results of the evaluation, and that all bidders are advised on the final decision through the appropriate procurement channels.

4. DOCUMENTATION

4.1 During the procurement exercise bidders have received a number of key documents, generic and Lot specific, to review and comment.

4.2 Generic Documents include:

- **Partnership Agreement:** the contract to be entered between Trafford and the preferred bidder(s) containing terms, conditions and schedules. This is now in a form which has been considered by all bidders such that the principal terms are agreed, but will require some further limited amendment before finalisation.
- **Invitation to Submit Final Tender (ISFT):** tender document issued to the bidders in accordance with the competitive dialogue procedure and containing the questions, evaluation criteria and scoring mechanism for the final procurement stage.
- **Performance Payment Mechanism:** sets out how the payment shall be calculated and adjusted in the event of changes in the volume and performance delivered by the preferred bidders) and details the fee at risk in relation to under-performance.
- **Position Papers:** sets out the Council's current position on specific functions and the available options for bidders.

4.3 Lot Specific Documents include:

- **Specifications:** sets out the description of the minimum requirements, output based, required by Trafford for each service area.
- **Special Conditions:** details the individual obligations for each Lot in addition to the specifications.
- **Key Performance Indicators (KPIs):** Service standards and performance targets which will have to be met by the service provider.
- **Financial Submission and Evaluation Templates:** details costs and assumptions of each bidder relating to their financial data included as part of the final tender.
- **Cost Quality Matrices:** details Trafford's costs and KPIs in delivering the existing service.
- **Commentary Tables:** sets out the specific clauses, bidder specific, that were discussed during the competitive dialogue phases which will be incorporated in the partnership agreement.

4.4 Throughout the competitive dialogue phases a document library containing background information including volumetrics, policies and procedures, was updated regularly and information supplied to bidders.

5. EVALUATION CRITERIA AND OUTCOME

5.1 The ISFT contains the questions, evaluation criteria and scoring methodology for the final procurement stage. Completion of the scoring and evaluation determines the preferred bidder. The seven evaluation criteria are governance and contract management, contract delivery, social value, savings and income, growth and commercialisation, performance payment mechanism and contract delivery.

5.2 The Council indicated that it would reject (Fail) any Final Tender which was evaluated such as to receive a "Deficient" score to any of the individual quality related criteria or where the aggregate score for the quality related criteria was less than 50% of the total score available for those specified elements.

5.3 A summary of the criteria and scoring principles are below:

| Reference | Criterion | Trafford Points (Weightings) |
|--|---|------------------------------|
| Group 1: Criteria in common | | |
| C1 (Quality) | Governance and contract management | 100 (10%) |
| C2 (Quality) | Contract delivery: Common to all Lots | 100 (10%) |
| C3 (Quality) | Social value | 50 (5%) |
| Group 2: Criteria specific to individual Lots | | |
| C4 (Price) | Savings and existing income to be transferred | 350 (35%) |
| C5 (Price) | Growth and commercialisation | 100 (10%) |
| C6 (Price) | Price Performance Mechanism | 50 (5%) |
| C7 (Quality) | Contract Delivery: Lot specific | 250 (25%) |

5.4 The commercially sensitive aspects for each Bidder have been advised as part of the ISFT. As a result all final tender responses (financial and quality criteria) are deemed commercially sensitive and covered in Part II of this report. However, a summary of the general proposals for questions 1, 2 and 3 are outlined below.

5.5 The identities of the bidders will not be released at this time due to the commercially sensitive nature of this information at this stage in the procurement process. Subject to Executive approval, the identities of the bidders will be released once the bidders themselves have been notified the outcomes of the tender evaluation process and the procurement process completed.

5.6 For question1, Governance, bidders were asked to provide their proposals with regard to the recommended governance arrangements. Responses have included:

- Tiered governance structures led by Strategic Partnership/Strategy Boards meeting on either a quarterly or six month cycle; and
- Operational Boards and a variety of supporting groups and forums to underpin the work of the main governing boards.

5.7 For question 2, Contract Delivery, bidders were asked to detail their proposals with regard to managing the transition, managing risk and business continuity. Responses have included:

- Mobilisation – the period from award of contract to contract commencement. Detailed mobilisation plans from all bidders; covering issues, such as staffing, plant/vehicles, ICT, depots and communications.

- Transition – the first 100 days from contract commencement. Detailed transition plans received for transition covering service transformation;
- Proposals with regard to risk management and business continuity; and

5.8 For question 3, Social Value, bidders were asked to provide details on generating employment and training opportunities for young people and unemployed, commitment to disadvantaged communities, promoting supply chain opportunities and increasing benefits to the economy. Responses have included:

- Commitments to local employment and training opportunities, including Apprenticeships, work placements and programmes for NEETs
 - Evidence of joint working with local partners (e.g. Trafford College / JCP / Thrive / Trafford Leisure Trust) to deliver local outcomes (e.g. local job creation, support to third sector, etc.)
 - Commitment to staff volunteering time in support of local community projects
- A range of innovative projects in relation to increasing benefits for the economy, fuel poverty and support to local charities

5.9 Bids have also been considered in relation to the four high level outcomes set by the Executive, and responses are summarised below:

| Desired Outcomes | Bidders Summary |
|---|--|
| <p>To deliver a minimum of 20% savings against the net budget from contract commencement.</p> <p>(Covered in Questions C4 and C5)</p> | <p>In cash terms, 20% equates to a £2.25m saving for year 1 (July 2015 to March 2016) along with on-going efficiency savings throughout the life of the contract.</p> <p>The 20% savings against the net budget for all services covered by this procurement would be achieved in year 1 with further efficiencies and income guaranteed from year 2 and over the life of the contract. In addition, proposals have been received to deliver future savings and income growth. The Council would also work with the provider to explore new opportunities for savings and income in line with the Council's funding and service delivery requirements.</p> <p>For Lot 3, significant investment is required in technology and staff to maintain and improve the service and therefore the savings profile for this particular Lot is different to that for Lots 1a, 2a and 2b.</p> |

| | |
|--|--|
| <p>To deliver further, future efficiency savings through continuous improvement and innovation in service provision through the contract life.</p> <p>(Covered in Questions C5, C6 and C7)</p> | <p>A range of potential opportunities to generate further efficiency savings have been identified in bids.</p> <p>Through the governance proposals the Council would continue to have a strategic role and responsibility to ensure the partnership continues to deliver efficiencies and savings.</p> <p>Evidence has been provided in bids to demonstrate that a variety of supporting groups and forums would underpin the work of the main governing boards.</p> |
| <p>To have flexibility, recognising the challenging financial climate facing local authorities at the moment.</p> <p>(Covered in questions C1 and C4)</p> | <p>The bidders have demonstrated that additional expertise and resources would be available to work in collaboration with the Council and respond to the on-going budget pressures.</p> <p>The service providers would be required to work with the Council in developing annual budget proposals in line with the Council's budget setting and consultation processes.</p> |
| <p>Protect jobs and maintain service standards in so far as practicable.</p> <p>(Covered in questions C4 and C7)</p> | <p>Three of the bidders confirmed that there would be no redundancies and that new opportunities would potentially be available to the staff.</p> <p>Service standards have been maintained in line with current levels, with service improvements identified in a number of service areas.</p> |

6. TRAFFORD'S STREET LIGHTING and LED APPROACH

- 6.1 Trafford have a Street Lighting Strategy and Maintenance Policy. The vision of the Street Lighting Strategy is to provide appropriate street lighting in an efficient and cost effective way that seeks to minimise any adverse impact on the built and natural environment, taking advantage of any opportunities to deliver improved street lighting design, and ensuring safety for road users, pedestrians and communities.
- 6.2 The objectives of the strategy are focussed on the quality and effectiveness of the street lights, the safety for road users, pedestrians and the wider community whilst recognising specific requirements such as conservation areas and providing appropriate lighting to minimise any adverse impacts. Other objectives in the strategy concentrate on efficiency and reducing carbon emissions whilst reducing maintenance and operational costs and giving due consideration to public health issues.
- 6.3 To achieve the vision and objectives of the Strategy, new street lighting and improvement schemes within the Borough are expected to be undertaken in accordance with key guiding principles which consist of safety, prevention of crime/fear of crime, limiting negative environmental impact, conserving energy, delivering value for money, improving and increasing the life expectancy of the assets.
- 6.4 The street lighting strategy is also aligned with Trafford's Environmental Strategy 2014 - 2017, Sustainable Strategy 2013 - 2020 and Community Strategy 2010 which sets out Trafford's vision for 2021 by responding to the challenge of climate change, reducing carbon emissions, supporting a stronger economy and reduction of crime.
- 6.5 In June 2013 the Trafford LED Street Lighting Programme Health Impact Assessment (HIA) report was issued. This report was commissioned by Trafford. A Trafford LED Street Lighting HIA 2014 Follow Up Review Report has also been produced. This report is a review and follow up of the June 2013 Trafford LED Street Lighting Programme HIA report. Both reports are available as background documents to this report.
- 6.6 The aim of the follow up report was to provide an update to the findings of the 2013 HIA report in light of new scientific reviews and/or journal articles as well as any other material that has been identified by Trafford Council since the 2013 HIA report was published. In addition, consideration was given to whether there were any potential health impacts arising out of the ad hoc replacement of standard luminaires with LED luminaires (which had taken place to a limited extent as part of the Council's street lighting maintenance practices) and whether there was any justification for the removal of existing LED luminaires on the grounds of potential human health impacts.
- 6.7 The review concluded that there was no scientific evidence that LED street lighting, including 'cool' white and blue-rich white LED street lighting, has any

additional health and wellbeing effects beyond that found for artificial lighting in indoor or outdoor settings in general.

- 6.8 The review also concluded that any proposed introduction of LED street lighting in Trafford, and ad hoc replacement of existing lighting, has, overall, no (neutral) or a minor positive health and wellbeing impact for the residents, workers and visitors of Trafford compared to the non-LED type of street lighting currently being used.
- 6.9 It further concluded that no recommendations on the specific design, types or levels of LED street lighting would be appropriate given the lack of evidence that LED street lighting has any adverse health impacts.
- 6.10 Both the original HIA and the Review document were made available to Bidders.
- 6.11 Evidence from experience of LED lighting elsewhere suggests a preference for neutral or warm LED luminaires which is perceived to provide a safer and more natural light.
- 6.12 LED luminaires provide a more directional source of light, reducing spillage and light pollution which is a further environmental benefit.
- 6.13 There are a number of different lighting regimes, the main ones currently in use in Trafford being:
- SOX is 'low-pressure' sodium light source introduced in the 1960's. This lantern/light source emits the 'yellow' light at night. Trafford have 8,658 in total across the borough. The SOX luminaires have now ceased being manufactured by the street lighting luminaire suppliers, although the lamps will be provided for the foreseeable future.
 - SON is 'high-pressure' sodium light source introduced in the 1980's. This lantern/light source emits the 'pink' light at night and Trafford has 16,890 across the borough. A similar scenario to the SOX luminaire exists in that the manufacturers are gradually halting manufacture of certain SON luminaires. The lamps will be provided for the foreseeable future, although the price may increase over time.
 - Luminaire/Lantern both have the same meaning; lantern is the older name given to what is now call the luminaire. The luminaire is the name given to any lighting fitting we install on the highway which may contain a lamp or more than one lamp as on some major route schemes. The luminaire is the 'housing' which contains the equipment to allow the emission of the light (flux). It would house the lamp, lamp-holder, ballast, capacitor, wiring, photo-cell base, etc. to allow the luminaire to function. The original, pre LED, better quality luminaires can survive functionally for 15-20 years, but require regular maintenance and cleaning. Currently the luminaire manufacturers are claiming LED luminaires should survive for 20+ years.

7. LED EVALUATION CRITERIA AND OUTCOME

- 7.1 Proposals have been submitted by bidders replace 24,000 conventional SOX and SON luminaires (which are the traditional street lamps currently used in Trafford) with LED luminaires over a two year programme, throughout Trafford. This conversion could provide over 60% saving in electrical energy per luminaire, and a reduction in associated carbon emissions.
- 7.2 As part of their final tender, bidders have submitted street lighting proposals for both the delivery of a current routine maintenance and replacement service (Lot 2b option 1) and for the roll out of a LED replacement programme (Lot 2b option 2) alongside maintenance and replacement. It is noted that savings vary across different types of lighting and all potential impacts have been considered in order to ensure that Trafford are able to achieve the Street Lighting objectives stated above.
- 7.3 In relation to a LED roll out bidders have provided prices for a range of different lighting regimes and separately for the use of a central management system which would allow the control and management of all street lights from a single central point. Final tenders have been assessed against both routine maintenance and replacement programme options and approval for the LED rollout is being sought from Executive.
- 7.4 There are three different types of LED luminaire. These emit either “warm”, “cool” or “neutral” white light. There are also three different forms of control option that could be adopted, defined as:
- Photocell (automatic switch on and off based on light levels) on each column;
 - Photocell on each column which would allow the future implementation of a fixed dimming regime; and
 - Central Management System which would enable future variable dimming.

Consideration has been given to Residential, Traffic Routes, Town Centres and Conservation Areas.

7.5 Bidders have been provided with a combination of options and hybrid options to form baseline scenarios against which to price. The bidders have also submitted a custom scenario where they have proposed their ‘best fit’ option for LED. The options are as follows see Appendix 1 for more detail of the specification for each of these options:

| | Option 1 | Option 2 | Option 3 | Option 4 |
|---------------------------|-----------------|-----------------|-----------------|-----------------|
| Residential | Cool White | Warm White | Neutral White | Neutral White |
| Traffic Routes | Cool White | Warm White | Neutral White | Neutral White |
| Town Centres | Cool White | Warm White | Neutral White | Warm White |
| Conservation Areas | Cool White | Warm White | Neutral White | Warm White |

7.6 Bidders have been asked to consider any potential health or environmental impacts of each option as well as outlining the LED roll out installation duration, the manufacturers to be utilised and detailing the electrical testing and inspection requirements.

7.7 The evaluation has considered the capital cost of installation, maintenance costs, and reduction in utility costs. Details of the bids received and the evaluation are set in in the related Part II report.

7.8 Based on the financial evaluation as set out in the Part II report and having considered potential health impacts and environmental aspects it is concluded that

- The installation of LED luminaires reduces costs to the Council and contributes to meeting sustainability objectives through reduced energy usage; and
- That the use of a combination of neutral and warm LED luminaires best meets the objectives of the Council’s Street Lighting Strategy.

8. CONTRACT MANAGEMENT

8.1 Key Performance Indicators (KPIs) Performance Indicators (PIs) and the Performance Payment Mechanism (PPM) would support the management of the contract.

8.2 There is a suite of KPIs covering the whole range of required service delivery outcomes and the customer care standards. Each KPI has a SMART target and a minimum acceptable level (monitored annually or monthly). Bidders

have agreed to these KPIs and are aware of the current baseline performance that is being achieved. There is also a suite of performance Indicators (PI)s which will be monitored for service management information purposes.

- 8.3 Performance below the SMART target will result in financial penalties to the provider via deductions from the monthly payments. Repeated performance below the SMART targets will result in an increasing rate of penalisation, until the contract default mechanism is triggered i.e. for serious breach of contract. Performance below the minimum acceptable level commences default proceedings.
- 8.4 The PPM sets out how the Payment will be calculated and adjusted in the event of changes in the volume and standard of the Services delivered by the successful bidder(s) whilst also providing a method to share any financial gains from improved performance. The Payment Mechanism is intended to incentivise a successful bidder's delivery of services, to give a transparent view on performance as well as informing the Council's strategic decision making process. The below summarises the total number of KPIs and PIs in each Lot to give an indication of their coverage.

| Lot | KPIs / PIs | Areas covered in the KPIs include |
|------------|-------------------|---|
| 1a | 24 / 50 | The recycling rates, missed collections and the Waste Disposal Authority Levy, street cleaning, parks, graffiti, grass length and fly tipping |
| 2a | 11 / 8 | The safety inspections, defect rectification, emergency incidents, winter maintenance and highway claims |
| 2b | 7 / 8 | Routine and reactive maintenance, emergency incidents and productivity |
| 3 | 16 / 33 | Reactive maintenance, asbestos, legionella and utilities consumption. |

Full copies of the whole range of KPIs are included as an Appendix in Part II of the report.

8.5 During the procurement exercise, the issues below have been subject to dialogue and have been addressed and resolved satisfactorily in the final stages to deliver the desired outcomes:

| Issue | Mitigation | Final Tender Resolution |
|---|--|--|
| <p>There are contractual arrangements which may not be transferrable by agreement to the incoming Service Provider(s) e.g. vehicle and plant contract hire arrangements.</p> | <p>Discussions have been completed with the current vehicle provider to vary the current contract to enable transfer to the new service providers. Further details were shared with bidders prior to the Call for Final Tender.</p> | <p>All existing contractors have been contacted to inform them of potential changes to contractual arrangements.</p> <p>Following analysis, Trafford are satisfied with the position in relation to each contract and as to how service continuity will be assured i.e. novate, terminate, extend.</p> |
| <p>A balance will need to be drawn between the contract savings and the Council's Waste Disposal Levy obligation. The mechanism for setting the Levy means that disposal costs for Trafford could increase if other Greater Manchester authorities increase their recycling rates and Trafford's remains static. However,</p> | <p>During dialogue and financial consequences of increasing the current high recycling rates has been explored. Evaluation has taken account of the net financial effect of proposals, both in terms of direct contract costs and the Waste Disposal Levy.</p> | <p>Bidders have submitted their solutions taking into account Council requirements. Proposals to mitigate this risk include the following:</p> <ul style="list-style-type: none"> • Increases in recycling performance • Additional materials for recycling • Use of incentive schemes, communication and work with third sector to improve recycling performance and re-use • Proposals to increase income through growth of commercial waste service |

| | | |
|---|---|--|
| there could be additional direct costs associated with increasing recycling rates. | | |
| Ensuring the transfer of the management and financial responsibility for insurance claims to ensure a joined up highways solution and mitigate financial risk to the Council. | Various options have been considered during the procurement stages, with the bidders indicating their preference. Options were presented for the Call for Final Tender. | The Payment Performance Mechanism has been drafted to reward contractors for improved claims repudiation and contains penalties if the value of successful claims increases. Trafford will manage the insurance claims. |
| The Service Provider (s) role in enforcement activities needs to be fully developed to support the in-house service and provide additional resilience and sustainability. | This requirement has been set out in documentation provided to bidders during the procurement stages and was included as part of the dialogue. | The requirement for an 'engage and educate' approach has been included in relevant documentation, which bidders have agreed to. Bidders are proposing to utilise front-line staff as the 'eyes and ears' of the Council as well as assisting with engagement, education campaigns to look to modify behaviours of residents and visitors in agreement with the Council. |
| Additional opportunities for savings or new income development | In so far as is possible, risk and investment requirement will be transferred to the partners. | There has been no change to this mitigation. |

| | | |
|---|---|---|
| <p>could be supported through invest to save / invest to grow. This could be delivered with investment funding from prudential borrowings in order to maximise benefits to the Council.</p> | <p>Prudential borrowings will be considered on a case by case basis and only pursued where there is both a clear additional benefit and security of repayment of principal to the Council in so doing. This potential option was included during the procurement stages and was discussed during the financial dialogue meetings.</p> | |
| <p>The Council will need to ensure that there are appropriate mechanisms in place to monitor performance and flex contractual arrangements in response to changing circumstances.</p> | <p>The contract progressed with both internal and external legal support during the detailed dialogue stages and in preparation for the final tender stage. The contract includes robust performance management mechanisms including formal mid-term review(s) to ensure market competitiveness, value for money and demonstrate service delivery quality. It is the intention that these formal reviews will include the ability for the Council</p> | <p>Bidders have submitted their solutions taking into account Council requirements. Proposals to mitigate this risk include the following:</p> <ul style="list-style-type: none"> • Mid-term review proposed • Performance management regime agreed • Annual service planning process • Contract change mechanisms agreed • The Council will retain responsibility for setting strategy and policy • Learning lessons from experience elsewhere |

| | | |
|--|--|--|
| | <p>to terminate the contract in certain circumstances dependent on the outcome. Specific legal sessions were completed during dialogue prior to the call for final tender.</p> | |
|--|--|--|

9. PROCUREMENT PROCESS OVERVIEW

- 9.1 The process has been managed by the STaR, (Stockport, Trafford and Rochdale), Shared Procurement Service. The procurement route was a Competitive Dialogue process that has been undertaken in full compliance with EU, UK and Council procurement guidelines and regulations, supported by both internal and external legal advice where appropriate. This has ensured we can demonstrate both fairness and transparency whilst delivering best value for the Council.

10. SCRUTINY COMMITTEE REPORT FEEDBACK

- 10.1 A report and presentation was delivered to Scrutiny Committee on 26th February 2015 to provide an update on the procurement process prior to the report being issued to Executive. The report received from Scrutiny Committee highlights three areas for consideration, and the response to these areas is set out below:

- Social and Community Engagement:

All bidders have submitted detailed proposals for social and community engagement; including specific proposals for Member engagement. This includes information gathering to gain an overview of the current service and shape any future service and also methods by which to keep customers, residents, community groups and Members abreast of any potential service initiatives.

The proposals for full engagement involve different channels, tailored depending on the audience. Examples of the types of engagement, in no particular order, include:

- A neighbourhood approach to service delivery, with face-to-face engagement;
- Community sessions open to the public;
- Residents tailored communications depending on recipient including different languages; and
- Surveys and feedback from CRM and social media and from contacts with residents on-site being used to drive service improvement.

Bidders have also proposed governance strategies, in which Member engagement is detailed. This includes Executive Member representation at Strategic Board level and compliance with the Council's budget setting requirements through an annual service planning process.

Throughout the Procurement process, the importance of social and community engagement was discussed. The Service Specifications produced for each Lot detailed the requirements for engagement, including Method Statements for specific Lots, which bidders completed as part of their Final

Tender. Examples of the types of requirements for engagement detailed within the Specifications are as follows:

- Where appropriate, the Service Provider shall provide an appropriate managerial member of Personnel to attend meetings with Elected Members to discuss the Services;
- Produce a customer satisfaction survey;
- Liaise with any stakeholders, Council members, members of the public or third party bodies who express a concern in respect of the Highway Network; and
- Consult with and inform Elected Members in relation to certain areas i.e. Street Naming and Numbering applications.

In addition, clause 1.6 of the partnership agreement outlines the approach required from the Service Provider (s) to social value issues which includes social and community engagement.

- Budget Pressure

The savings outlined in the desired outcomes are achievable and will meet the savings target required in the budget for 2015/16. Future efficiency savings are expected through continuous improvement and innovation in service provision through the contract life cycle. In addition to delivering direct budget savings, the award of the contract(s) will also provide cost avoidance, particularly in relation to Lot 3. As set out later in this report, were the Council to retain the services covered by Lot 3. Significant investment would be required in ICT systems and staff in order to effectively manage and maintain the Council's property estate at current service levels. The Council also faces particular challenges in the resilience in some specialist technical service areas, which without mitigation could lead to additional budget pressure to 'buy-in' external expertise.

- Service Provider (s) /Contractor Failure

The Partnership Agreement contains a number of measures to protect the Council's interests in the event of contract failure, either due to the provider(s) delivery of services or should the provider(s) cease trading or otherwise abandon the contract. More information is provided in the related Part II report, but these measures include:

Step-in rights: This provides the Council with the ability to take over delivery of services for a short period of time in the event of specific service failures;

Provision of a Parent Company Guarantee/Bond: Provides the Council with financial protection in the event a subsidiary company ceases to trade or otherwise abandons the contract. The level of financial protection would be sufficient to enable the Council to take over delivery of services in the short

term and procure an alternative provider (if this is deemed the most appropriate route at that time)

11. NEXT STEPS

- 11.1 Subject to Executive approval, the proposed timetable through to contract commencement is as follows:

| Indicative Date | Deliverable |
|------------------------|---|
| March 2015 | Executive report and approval to award the contract |
| March 2015 | Award of contract |
| April 2015 onwards | Contract mobilisation |
| July 2015 | Contract commencement |

- 11.2 Bidders have been asked during the competitive dialogue phases to submit mobilisation plans for the period following contract award until end of June 2015. Mobilisation plans have been included in the final tender process to allow Trafford the opportunity to ensure sufficient planning and continued service delivery would be in place during the transitional period.

12. STAFFING

- 12.1 The majority of staff directly employed by the Council in the services outlined in this report (c 250), plus those employed by Veolia on the current Trafford waste contract (c 100), would transfer to the relevant new Service Provider (s), with their length of service and terms and conditions protected under the Transfer of Undertakings (Protection of Employment) (TUPE) Regulations. In relation to pensions, the Council will support an application for admitted body status to the Greater Manchester Pension Scheme for the duration of the contract scheme.
- 12.2 Trafford's preferred solution is for Service Provider (s) to become an Admitted Body for Greater Manchester Pension Scheme (GMPS). The scheme would be a closed admission scheme, meaning any new staff employed by the Service Provider (s) in future would not be able to join the GMPS (instead they would be required to be offered membership of the Partners standard pension scheme). From the date of transfer, subject to obtaining Admitted Body Status, the Service Provider (s) would assume all the responsibilities of a scheme employer provided for in the regulations.
- 12.3 The staff that would transfer to the relevant new Service Provider (s) would benefit from developing their existing as well as acquiring new skill sets and receive the necessary training and development to enhance their continued learning and development. Operational teams requiring investment in technology would utilise the new Service Provider (s) systems to enhance operational efficiency. New Service Provider (s) would also be able to offer

career opportunities to potentially broaden the type of work and knowledge to develop long term sustainable employment.

13. ALTERNATIVE OPTIONS CONSIDERED

- 13.1 The alternative options were originally set out in the March 2014 Executive report and further information as detailed below.

Do Nothing:

The current waste contract ends September 2015. As this service is a statutory requirement, it would be necessary to procure the future delivery of this service independently. This would not allow the Council to maximise the potential benefits from procuring the waste collection as part of a wider procurement.

For other services in the Economic Growth, Environment and Infrastructure directorate savings targets have been consistently met over recent years. However, given the need for forward thinking, medium term practical solutions and for continuous service provision together with the need to provide significant future savings, to do nothing would mean that it would be difficult to continue to deliver services and the range of services which could be delivered and the quality of those services would be affected.

Without significant investment the services will not be sustainable nor be able to deliver future efficiencies over the medium and longer term.

Economic growth requires change and to do nothing by remaining static will prevent Trafford from achieving its long term ambitions and the Trafford Vision 2021. Investment and development of the services involved in the procurement is a key part of growth and regeneration and working in collaboration with Service Provider (s) to deliver services to Trafford residents requires change to existing delivery models.

Significant investment for services in Lot 3 would be required should the contract(s) not be awarded.

The Property Service's systems need completely updating in order to improve operational delivery, ensure the linkages with Planning and Regeneration priorities are in place and to ensure that opportunities for income generation from the investment estate are maximised. This would require significant investment in terms of systems, software and resources.

In addition, investment would need to be made in staff capacity and development to meet the future needs of the services. The ability to access key specialist advice is now limited and this specialist technical advice would have to be bought in on an ad-hoc basis which would be a costly and an inefficient approach. Sustainability is required by utilising the wider pool of people that Service Provider(s) would offer.

Bring in house:

For the waste contract, to bring this in house is not a financially viable option due to the capital spend which would be required. This was considered in the original Waste procurement business case and discounted.

Collaboration with other Local Authorities:

There are different time and financial pressures facing other AGMA authorities and partners. Trafford needs to address its own challenges in the next 12 months. However, the procurement route other authorities would be able to join the contract at a later date.

With due consideration of the above options and the need to deliver of the desired outcomes, the approach recommended is still considered to represent the best option.

14. CONSULTATION

- 14.1 Meetings were held earlier in the year with the Trade Unions and as part of the staff budget consultation. Further consultation will take place with affected staff and their union representatives during the latter stages of the procurement process i.e. post contract award. This has been incorporated at appropriate stages in a comprehensive communications strategy.
- 14.2 Bidders met with the Trade Unions in February 2015 to provide an overview of their organisation, experience of staff transfers, involvement with Trade Unions, experience of mobilisation and supporting their staff, tripartite arrangement and facilities agreement.
- 14.3 A separate meet and greet session with the bidders and staff took place at Trafford Town Hall and Carrington Depot in February 2015 to allow staff, prior to contract award, to have the opportunity to meet informally with the prospective Service Provider (s).
- 14.4 Further engagement with staff, and the successful Service Provider (s), will also take place once the contract is awarded.
- 14.5 Two meetings have been held with the friends of parks groups to discuss proposals particularly in relation to the maintenance of parks. Where appropriate or required to meet Trafford's duties in this regard, there will be further consultation with residents, community groups and stakeholders.

15. REASONS FOR RECOMMENDATION

- 15.1 Bids received have demonstrated the ability of the preferred bidder to meet the high level outcomes set by the Executive. The recommendation will enable officers to proceed to award the contract for the delivery of services is set out in paragraph 2.2.
- 15.2 The replacement of street lights with LED luminaires will provide significant financial savings to the authority through reduced energy costs, and will reduce CO2 emissions. The proposed use of neutral and warm light luminaires meets the objectives set in the Council's Street Lighting Strategy, and provides the best mix of light type and energy reduction.
- 15.3 Therefore, approval is sought to proceed to the contract award stage for the procurement of Highways, Environmental, Professional, Technical and Infrastructure services.

Key Decision: Yes

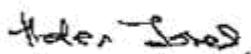
If Key Decision, has 28-day notice been given? Yes

Finance Officer Clearance ID

Legal Officer Clearance JLF

DEPUTY CHIEF EXECUTIVE'S SIGNATURE

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.



APPENDIX 1

PROJECT SPECIFIC LUMINAIRE REQUIREMENTS

[Note: one option to be chosen by Council prior to appointment of preferred bidder]

All LED Luminaires Installed must comply with the requirements of this Appendix 1.

Option 1

| Apparatus | Requirements |
|---|---|
| LED Luminaires - | |
| Colour Rendering Index (CRI) | > 60 |
| Correlated Colour Temperature (CCT) | Residential areas – Max 5700K (Cool White) Traffic Routes – Max 5700K (Cool White) Town Centres – Max 5700K (Cool White) Conservation Areas – Max 5700K (Cool White) |
| Lumen Maintenance (minimum) | L70 at 80,000 hours |
| Luminous Intensity Class (minimum) | Residential areas – G2 Traffic Route / Conflict Areas – G3 Town Centres – G2 |
| Ingress Protection | IP66 minimum |
| Mounting Arrangement | The luminaire must be capable of allowing either Side Entry and Post Top mounting within the same body. Varying tilt up to $\pm 10^\circ$ Side Entry Spigot diameters: 34, 42, 60mm Post Top Spigot diameters: 60, 76mm |
| Construction | Modular – to facilitate future upgrades in LED arrays Various colour options |
| Control (The Council reserves the right to select the method of control.) | Option A – Luminaires shall operate with photocell / mini cell control; or Option B – Luminaires shall operate with photocell / mini cell control and control gear capable of delivering a fixed dimming regime; or Option C - Luminaires shall incorporate a node / CMS communication device with Constant Light Output functionality. |
| Warranty | Each luminaire should be covered by a warranty providing a minimum 20 year operating life, details of which are to be provided by the Service Provider and novated to the Council on the completion of the LED Replacement Programme |

Option 2

| Apparatus | Requirements |
|---|---|
| LED Luminaires - | |
| Colour Rendering Index (CRI) | > 60 |
| Correlated Colour Temperature (CCT) | Residential areas – 3000K (Warm White) Traffic Routes - 3000K (Warm White) Town Centres - 3000K (Warm White) Conservation Areas – 3000K (Warm White) *3000K or thereabouts to warrant the description warm |
| Lumen Maintenance (minimum) | L70 at 80,000 hours |
| Luminous Intensity Class (minimum) | Residential areas – G2 Traffic Route / Conflict Areas – G3 Town Centres – G2 |
| Ingress Protection | IP66 minimum |
| Mounting Arrangement | The luminaire must be capable of allowing either Side Entry and Post Top mounting within the same body. Varying tilt up to $\pm 10^\circ$. Side Entry Spigot diameters: 34, 42, 60mm Post Top Spigot diameters: 60, 76mm |
| Construction | Modular – to facilitate future upgrades in LED arrays Various colour options |
| Control (The Council reserves the right to select the method of control.) | Option A – Luminaires shall operate with photocell / mini cell control; or Option B – Luminaires shall operate with photocell / mini cell control and control gear capable of delivering a fixed dimming regime; or Option C - Luminaires shall incorporate a node / CMS communication device with Constant Light Output functionality. |
| Warranty | Each luminaire should be covered by a warranty providing a minimum 20 year operating life, details of which are to be provided by the Service Provider and novated to the Council on the completion of the LED Replacement Programme |

Option 3

| Apparatus | Requirements |
|---|---|
| LED Luminaires - | |
| Colour Rendering Index (CRI) | > 60 |
| Correlated Colour Temperature (CCT) | Residential areas – 4000K (Neutral White) Traffic Routes – 4000K (Neutral White) Town Centres - 4000K (Neutral White) Conservation Areas – 4000K (Neutral White) *4000K or thereabouts to warrant the description neutral |
| Lumen Maintenance (minimum) | L70 at 80,000 hours |
| Luminous Intensity Class (minimum) | Residential areas – G2 Traffic Route / Conflict Areas – G3 Town Centres – G2 |
| Ingress Protection | IP66 minimum |
| Mounting Arrangement | The luminaire must be capable of allowing either Side Entry and Post Top mounting within the same body. Varying tilt up to $\pm 10^\circ$ Side Entry Spigot diameters: 34, 42, 60mm Post Top Spigot diameters: 60, 76mm |
| Construction | Modular – to facilitate future upgrades in LED arrays Various colour options |
| Control (The Council reserves the right to select the method of control.) | Option A – Luminaires shall operate with photocell / mini cell control; or Option B – Luminaires shall operate with photocell / mini cell control and control gear capable of delivering a fixed dimming regime; or Option C - Luminaires shall incorporate a node / CMS communication device with Constant Light Output functionality. |
| Warranty | Each luminaire should be covered by a warranty providing a minimum 20 year operating life, details of which are to be provided by the Service Provider and novated to the Council on the completion of the LED Replacement Programme |

Option 4

| Apparatus | Requirements |
|---|---|
| LED Luminaires - | |
| Colour Rendering Index (CRI) | > 60 |
| Correlated Colour Temperature (CCT) | Residential areas – 4000K (Neutral White) Traffic Routes – 4000K (Neutral White) Town Centres - 3000K (Warm White) Conservation Areas – 3000K (Warm White) *3000K/4000k or thereabouts to warrant the description warm/neutral |
| Lumen Maintenance (minimum) | L70 at 80,000 hours |
| Luminous Intensity Class (minimum) | Residential areas – G2 Traffic Route / Conflict Areas – G3 Town Centres – G2 |
| Ingress Protection | IP66 minimum |
| Mounting Arrangement | The luminaire must be capable of allowing either Side Entry and Post Top mounting within the same body. Varying tilt up to $\pm 10^\circ$ Side Entry Spigot diameters: 34, 42, 60mm Post Top Spigot diameters: 60, 76mm |
| Construction | Modular – to facilitate future upgrades in LED arrays Various colour options |
| Control (The Council reserves the right to select the method of control.) | Option A – Luminaires shall operate with photocell / mini cell control; or Option B – Luminaires shall operate with photocell / mini cell control and control gear capable of delivering a fixed dimming regime; or Option C - Luminaires shall incorporate a node / CMS communication device with Constant Light Output functionality. |
| Warranty | Each luminaire should be covered by a warranty providing a minimum 20 year operating life, details of which are to be provided by the Service Provider and novated to the Council on the completion of the LED Replacement Programme |

Option 5 (Contractors Own Option)

| Apparatus | Requirements |
|---|---|
| LED Luminaires - | |
| Colour Rendering Index (CRI) | > 60 |
| Correlated Colour Temperature (CCT) | Residential areas – ?K (? White) Traffic Routes – ?K (? White) Town Centres - ?K (? White) Conservation Areas – ?K (? White) ?K or thereabouts to warrant the description warm, neutral or cool |
| Lumen Maintenance (minimum) | L70 at 80,000 hours |
| Luminous Intensity Class (minimum) | Residential areas – G2 Traffic Route / Conflict Areas – G3 Town Centres – G2 |
| Ingress Protection | IP66 minimum |
| Mounting Arrangement | The luminaire must be capable of allowing either Side Entry and Post Top mounting within the same body. Varying tilt up to $\pm 10^\circ$ Side Entry Spigot diameters: 34, 42, 60mm Post Top Spigot diameters: 60, 76mm |
| Construction | Modular – to facilitate future upgrades in LED arrays Various colour options |
| Control (The Council reserves the right to select the method of control.) | Option A – Luminaires shall operate with photocell / mini cell control; or Option B – Luminaires shall operate with photocell / mini cell control and control gear capable of delivering a fixed dimming regime; or Option C - Luminaires shall incorporate a node / CMS communication device with Constant Light Output functionality. |
| Warranty | Each luminaire should be covered by a warranty providing a minimum 20 year operating life, details of which are to be provided by the Service Provider and novated to the Council on the completion of the LED Replacement Programme |

Tenderers are invited to submit alternative tenders, based on a different combination of LED luminaires other than that shown in options 1 to 4; clearly identifying the benefits and costings of supporting such a proposal within an agreed business case format.

For each of the above Options the Service Provider will, for each proposed luminaire provide a Manufacturer's data sheet (or equivalent) to confirm the following data:-

- 1 Rated input power (in W)
- 2 Rated Luminous flux (in lumens)
- 3 LED luminaire efficacy in (lm/W)
- 4 Luminous Intensity Distribution
- 5 Photometric Code
 - a. Correlated Colour Temperature (CCT in K)
 - b. Rated Colour Rendering Index (CRI)
 - c. Rated Chromacity co-ordinated values (initial and maintained)
 - d. Maintained luminous flux
- 6 Rated life (in h) of the LED module and the associated rated lumen maintenance (Lx)
- 7 Failure fraction (Fy), corresponding to the rated life of the LED module in the luminaire
- 8 Ambient temperature (ta) for the luminaire
- 9 Power Factor
- 10 Intensity Distribution
- 11 Drive Current
- 12 Risk Group (Control of Artificial Optical Radiation at Work Regs 2010)

TRAFFORD COUNCIL

Report to: Executive
Date: 16th March 2015
Report for: Discussion
Report of: Chairman of Scrutiny Committee

Report Title

SCRUTINY COMMITTEE – RESPONSE TO JOINT VENTURE PROPOSALS

Summary

The Scrutiny Committee met on the 26th February 2015 to consider a further update on whether the desired outcomes have been achieved to engage private sector partners for the delivery of a range of environmental, highways, professional, technical and infrastructure services. The Committee were provided an update on the procurement process prior to the report being issued to the Executive.

This report sets out the findings of the Committee for the Executive's consideration as part of its decision making around the Joint Venture proposals.

Recommendation(s)

That the Executive note the comments of the Scrutiny Committee and provide a response on the matters raised.

Contact person for access to background papers and further information:

Name: Peter Forrester
Extension: 1815

Background Papers:

None

1.0 Background

On 26 February 2015, the Scrutiny Committee convened to discuss the upcoming decision on the awarding of the Joint Venture Contracts as part of the 'Reshaping Trafford' strategy.

The Committee had also met on 29 October to receive a presentation on the latest position and also made some comments as part of the Budget Scrutiny report. The Committee welcome the opportunity to discuss and comment on the proposals ahead of the decision.

The Committee felt that the presentation by the Director of Growth and Regulatory Services at the meeting on the 26 February was informative and alleviated several of the Committee's concerns as far as is possible prior to the final arrangements of the successful bids.

However, the Committee feels there are still some areas arising from the presentation and reports that they would bring to the Executive's attention.

- (1) **Social and Community Engagement** - The Committee are disappointed by the apparent lack of explicit incentives for contractors to engage with local communities. The Committee acknowledge that, whilst the need to engage with local communities is recognised, there need to be clearer incentives to encourage contractors to engage with residents to develop innovative ways to improve services.

The Committee would also welcome confirmation about the proposed arrangements for on-going Member involvement in any processes of community engagement.

- (2) **Budget Pressures** - The Committee are unclear whether the proposed savings are achievable (in particular in Lot 3). The Committee are concerned that the proposed savings target in year 1 would not be met which raises concerns that this will impact on current and future budgets.

- (3) **Contractor Failure** - The Committee would welcome greater clarity about what would happen in the event of contractor failure. For example, the steps that will be put in place if the contractor's performance falls significantly below the agreed service levels resulting in the contract being terminated. The Committee would also welcome confirmation of what would happen if a contractor ceased to exist.

The Committee ask the Executive to consider the above comments when making their final decision and to provide information to the Scrutiny Committee Members to alleviate these concerns.

The Scrutiny Committee will be tracking the delivery of any Joint Venture contracts as part of their future work programmes.

TRAFFORD COUNCIL

Report to: Executive
Date: 25th March 2015
Report for: Information & Decision
Report author: Executive Member for Transformation & Resources

Report Title

Outcome of the Libraries Budget Consultation for 2015/16 and recommendations.

Purpose of Report

This report provides an overview of the Libraries Budget Consultation 2015/16. It sets out the methodology and the outcomes of the consultations including describing how proposals have changed as a result of consultation. It makes recommendation in relation to the outcome of the Libraries Budget Consultation 2015/16.

Recommendations

That the Executive:

- 1) Note the content of the report
- 2) Approve the recommendations as set out below, having regard to the public sector equality duty (outlined at section 4);
 - (a) **Woodsend Library** - Increasing the use of technology at libraries; specifically Open + technology at Woodsend Library and as a consideration in other Libraries subject to redevelopment.
 - (b) **Coppice Library** - that the Council partner with other organisations and community groups to continue to provide access to library services at Coppice Library, specifically blueSCI.
 - (c) **Timperley Library** – that the Council proceeds with the sale of the land to Park Medical Practice and the redevelopment of the site to include a community focussed facility comprising a new medical centre of c 8,000 sq. ft. linked to a new library of c 2,500 sq. ft. and 28 residential apartments.
 - (d) **Hale Library** – that the Council proceeds to invite formal tenders in

relation to the provision of a library in Hale (together with redevelopment of the former library site) from the bidders who have previously expressed an interest on an informal basis, as set out in paragraph 3.5.4

- (e) **Staff reduction** – Implement back office staff reductions as set out in paragraph 2.7 and 3.6.
- (f) **Book fund** - that the book fund is reduced by £105k.
- (g) **Income generation** - that further areas of opportunity for income generation are explored and implemented where considered appropriate.
- (h) **Bowfell and Davyhulme Libraries** – that Bowfell and Davyhulme Libraries close.
- (i) **Lostock Library** - to maintain a library for the pupils of Lostock College, which will allow continued access to the library and its resources by the community as set out in paragraph 3.8.4.
- (j) **Delamere Toy Library** - that the funding for two part-time staff is withdrawn.

Contact person for access to background papers and further information:

| | | |
|------------|-------------|--------------|
| Name: | Joanne Hyde | Sarah Curran |
| Extension: | 4009 | 2823 |

| | |
|---|---|
| Relationship to Policy Framework/Corporate Priorities | Reshaping Trafford |
| Financial | The full year effect of all the proposals is forecast to save £700k. However there will be a lead-in time to a number of the proposals and therefore it is anticipated that £500k will be saved in the financial year 2015/16, with the balance occurring in the following financial year. The approved budget for 2015/16 assumed savings of £550k and therefore it will be necessary for the balance of £50k to be identified from elsewhere in the Council's budget. The Director of Finance will report on this in the first monitoring report in July 2015 |
| Legal Implications: | The legal implications are as set out in this report |
| Equality/Diversity Implications | These proposals have been considered in the context of our public sector equality duty and EIA's have been developed for each of the relevant proposals |
| Sustainability Implications | N/A |
| Risk Management Implications | N/A |
| Staffing/E-Government/Asset Management Implications | These proposals will require a reduction in staffing in the region of 22. The Council entered into a period of 30 days consultation with staff and trade unions. Requests for voluntary redundancy/retirement were requested and 'at risk' staff will have access to other vacancies. |

| | |
|-----------------------------------|--|
| Health and Wellbeing Implications | Staffing reduction proposals may impact on health & well being, detailed consultation has taken place with staff to mitigate this and support provided in terms of a range of options. |
| Health and Safety Implications | N/A |

Key Decision

This is a key decision currently on the Forward Plan: Yes

Finance Officer Clearance ...ID.....

Legal Officer Clearance HAK

CORPORATE DIRECTOR'S SIGNATURE

(electronic)...

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

1. Background

1.1 As part of the Council's savings requirement of £24.3m for 2015/16, Trafford Library and Information Service had an original target saving to be achieved of £700,000, which equated to approximately a third of the overall budget; as a result of the Executive's proposals this was reduced to £550,000 as part of the Council's budget setting process. The Council currently has 14 libraries which collectively issue 800,000 items and have over one million visitors. The Council also supports Delamere Toy Library, an independent charity, with funding for 2 part-time staff, rent free use of the building they occupy and payment of bills for electricity, gas etc.

Under the Public Libraries and Museums Act 1964 it is the statutory duty of the Council, as a library authority, to provide a comprehensive and efficient library service to people who live, work or study in Trafford. 'Comprehensive' has been interpreted by the Courts to mean delivering a service that is accessible by all residents using reasonable means, including digital technologies, and 'efficient' has been interpreted as meaning the service must make the best use of the assets available in order to meet its core objectives and vision, recognising the constraints on Council resources.

2 Approach to Public and Stakeholder Consultation

2.1 The approach to public and stakeholder consultation was to engage in a two stage consultation process. The first stage was an information gathering exercise based on facts and figures about the library service. This ran for six weeks from 3rd November 2014 until the 12th December 2014. The second stage ran for a further six weeks from 19th January 2015 until 27th February 2015 (for staff this was a five week consultation from 19th January 2015 until 20th February 2015). A detailed breakdown of the responses to phase 2 consultations is set out at Appendix 1. The demographic breakdown of those responding is attached at Appendix 2.

2.2 The aim of the first consultation was to gather peoples' views on how the savings could be achieved and also invited ideas and suggestions on options for change and potential criteria. Those options for change included ;

- Closing some libraries.
- Reducing opening hours at some libraries.
- Using more volunteers.
- Reducing the range of services available.
- Increasing the use of technology in libraries.
- Partnering with other organisations in providing library services.
- Moving libraries to alternative sites.
- Redeveloping current library sites to reduce costs.

The criteria people were asked to consider included;

- Location of libraries e.g. proximity to other libraries and transport provision.
- Usage of libraries e.g. number of visitors and loans etc.
- Services offered in libraries e.g. books, information, online, activities and community space.

People were also asked to offer any other options or alternatives that they thought were relevant and invited any other comments they wanted to add.

Feedback on the first phase of consultation was presented as part of a general overview of the budget consultation process to the Executive on 26 January 2015.

2.3 From the information gathered in the first stage of consultation, proposals were developed which were then subject to a second phase of consultation.

2.4 The proposals put forward to the second stage of consultation were;

Proposal 1 - Increasing the use of technology at libraries; specifically Open + technology at Woodsend Library.

Proposal 2 - Partnering with other organisations in providing library services; specifically blueSCI at Coppice library.

Proposal 3 - Redeveloping libraries; with a GP at Timperley Library.

Proposal 4 - Redeveloping libraries; three options for Hale Library.

Proposal 5 - Reduction in back office staff and a reduction in the book fund.

Proposal 6 - Income generation opportunities.

Proposal 7 - Closing libraries; specifically Bowfell, Davyhulme and Lostock.

Proposal 8 - Reduction in funding for Delamere Toy Library.

Individuals were also again given a further opportunity to suggest any other alternatives they had.

- 2.5 Due to the amount of savings required and in order to assess the impact those savings could potentially have on the users of the library service; an independent consultancy firm was engaged to ensure independence of the consultation process.

The Campaign Company was appointed after a tender process and brought experience in local authority consultation processes. They are also Consultation Institute Practitioner Partners. Their contribution to the consultation process was;

- Providing advice on the two public consultation documents.
- Attending the public consultation meetings.
- Analysing the feedback from both the first and second stage consultations.
- Providing a report at the end of each stage.

The Councils' overall budget consultation including the libraries consultation was launched through staff briefings, media briefings and a dedicated Budget Consultation section on the Council's website.

2.6 Public consultation

- 2.6.1 Both phases of the public consultation process used a variety of engagement methods to ensure that service users and partner agencies were able to participate. These included;

- An online questionnaire which could be found via the Council's consultation webpages, the library webpages and the 'Say It' webpages.
- This was mirrored with a paper document, available in all libraries, which people could read and then complete with their comments
- There were seven general meetings which took place during the first phase of consultation in the evenings where residents and interested parties could discuss all the Council budget proposals, including the library service budget target.

- There were Library specific meetings where the sole focus was to discuss the proposed library savings. These took place at various times, including evenings and on different days of the week including a Saturday at venues across the borough. In total there were 18 of these meetings across both consultation phases.
- A consultation email address was set up for people who wished to send comments.
- During the first phase of consultation 1,407 responses were received;
 - Neighbourhood Forums 100
 - Online responses 769
 - Reshaping Trafford responses 50
 - Paper surveys 298
 - Library specific consultation meetings 180
 - Letters 10

2.6.2 During the second phase a total of 314 people attended the public consultation meetings and there were 948 responses to the proposals;

- Online surveys 364
- Paper surveys 326
- Comment cards 189
- Letters (from individuals, including staff members) 35
- Letters (from stakeholders) 32
- Petitions (Davyhulme and Townswomen's Guild) 2

The stage 2 consultation feedback report prepared by The Campaign Company can be found at www.trafford.gov.uk/phase2feedback.

2.7 Staff consultation

In line with the original budget proposals, it was anticipated that the total number of staff reductions would be in the region of 22. This required the Council to enter into a period of 30 days consultation with staff and trade unions.

2.7.1 The purpose of the consultation process was:

- to inform staff and trade unions of the detailed proposals.
- to consult with staff and trade unions about the proposed implementation strategy.
- to listen to and consider comments and suggestions from staff and trade unions about the proposed implementation strategy.
- to consider any alternatives put forward that meet the identified objectives.
- to seek to minimise the need for redundancies.

2.7.2 During the consultation process, in order to mitigate the need for compulsory redundancies, staff in “at risk” areas were offered the option of applying for early release on the grounds of redundancy or early retirement. In addition, staff in “at risk” areas were also given support to be redeployed into suitable alternative vacancies. In terms of ‘front line’ staffing reductions, all of these can be achieved by voluntary means and there are a number of vacancies available within the service for any remaining ‘at risk’ staff.

3. Consultation feedback

3.1 During the second stage of consultation respondents were asked to indicate their level of agreement with the proposals whilst still being able to suggest alternatives. The net score subtracts all negative responses from all positive responses leaving an overall level of agreement with the proposals. The ‘don’t know’ and ‘no responses’ were omitted. In the following paragraphs you will find details of the phase 2 proposals, overall nets scores, general consultation responses, a brief outline of some of the other alternatives considered, any mitigation in response to the consultation feedback and a final proposed recommendation.

3.1.2 Overall net score table:

| Proposal | Net Score |
|--|-----------|
| Overall agreement with proposals | +11 |
| Proposal 1 Woodsend – Technology Development | +2 |
| Proposal 2 Coppice – Partnering with other services | +28 |
| Proposal 3 Timperley - Redevelopment | +16 |
| Proposal 4 Hale - Redevelopment | -7 |
| Proposal 5 - Reduction in back office | 0 |
| Proposal 5 - Reduction in book fund | -30 |
| Proposal 6 - Income generation | N/A |
| Proposal 7 Davyhulme, Lostock and Bowfell – Closures | -4 |
| Proposal 8 Delamere – Reduced funding | +8 |

3.2 PROPOSAL 1

Increase the use of technology at libraries; specifically Open + technology at Woodsend Library and as a consideration in other Libraries subject to redevelopment.

3.2.1 Consultation feedback

The net score for this proposal was +2. Respondents were attracted to the fact that this technology would enable the library to remain open and available to community groups and individuals to carry on accessing library services.

There was also a welcome response to the use of technology which is seen by some as natural progress and an important step forward for libraries.

However, concerns were raised that certain people might have difficulty in using the technology to access the library, particularly the elderly. There were also some concerns around health and safety aspects such as going into an unstaffed building and theft of the stock.

3.2.2 Other alternatives to proposal 1 that were considered included;

- No change. However this option has to be assessed against the need for the Council to make savings.
- Closing the library and selling the site, this is not deemed a viable option.
- Moving the library to be included in the new development at Woodsend Circle, however, all units have now been filled.
- Moving the library into the new Health Centre, however, plans have already been approved and there was no space for this to happen.

3.2.3 In order to mitigate the concerns raised during the consultation period, there will remain some staff presence at the Library. Staff will be able to assist the elderly and other users, who may be unsure how to use the technology. In addition work has been undertaken to produce robust risk assessments, to mitigate concerns expressed in respect of security of customers and items in the library. The trials taking place in Leeds and Stockport will be monitored and the Council will ensure lessons learnt from these are implemented at Woodsend library.

3.2.4 In addition the use of this technology could be considered in other libraries subject to proposals in this report such as Hale, Timperley and Lostock.

3.2.5 **Recommendation:** – Increase the use of technology at libraries; specifically Open + technology at Woodsend Library and as a consideration in other Libraries subject to redevelopment.

3.2 PROPOSAL 2

Proposal 2 was to partner with other organisations and community groups in providing library services at Coppice Library, specifically blueSCI.

3.3.1 Consultation feedback

The net score for this proposal was +28. There was a positive response to the concept of using a partnership to create a community facility and community hub. As a result there was a view that this proposal would increase accessibility and useable facilities, particularly for sections of the community that are less well off. In addition, blueSCI was mentioned as a positive addition to the facility and a good partnership to save money from the public purse.

People were concerned about the possible degradation of the library service, as a result of the library sharing space with other services. There were concerns about the reduction in staff, in particular a concern that the reduction in staff will mean that the council service currently on offer would deteriorate and that this will have an impact on low income families living nearby. There was also a concern that volunteers will not be trained and supported to provide the services that people have come to expect.

3.3.2 Other alternatives to proposal 2 that were considered included:

- No change. However this option has to be assessed against the need for the Council to make savings.
- Closing the library and realising the value of the site. However, this option is not considered to be viable.
- Re-locating the library to smaller premises. This is not recommended as no suitable premises are available.

3.3.3 In order to mitigate the concerns raised during the consultation period, BlueSCI have been working with the Council and Friends of Coppice Library to produce a robust business case for the continuation of the library service.

There will be additional training for staff and library and blueSCI volunteers to ensure they have knowledge of both services. Additional staff resource has been allocated to Coppice which will result in 2FTE being available, including a Team Manager. This will enable customers to access the range of Council services and have their enquiries dealt with.

3.3.4 **Recommendation:** That the Council partner with other organisations and community groups to continue to provide access to library services at Coppice Library, specifically blueSCI.

3.4 PROPOSAL 3

Redeveloping libraries with a GP at Timperley Library (set out in detail below :)

Park Medical Practice has expressed an interest in acquiring and redeveloping Timperley Library and the adjoining Baker Street car park. The

medical practice is keen to expand to provide an increasing range of services, providing the best health care for patients. The proposal will provide a community focussed facility comprising a new medical centre of c 8,000 sq. ft. linked to a new library of c 2,500 sq. ft. and 28 residential apartments. There would be 18 dedicated car spaces for the medical centre, 45 car spaces for the apartments and 25 car spaces for the library.

The total site area affected by this proposal is approx. 1.13 acres. 120 unrestricted long term public parking spaces will be lost and a waste recycling facility on the car park site will need to re-located. The transaction would be by way of a private treaty transaction granting a long lease of the site to the developer. The proposal is subject to detailed planning consent.

The Council would receive a premium on the grant of the head lease, plus a long leasehold interest of the new library on completion of the development, at a peppercorn rent, which would provide state of the art facilities at the developer's expense. In addition, an overage will be payable by the developer on the achieved sale value of the residential apartments above a base sales price per sq. ft. The cumulative value of these elements represents best value for the site for the Council.

3.4.1 Consultation feedback

The net score for this proposal was +16. There was a view that the new facility will attract more people and increase footfall in the library and that the move to modern facilities would be a beneficial move for the community with some respondents commenting that the new facility will provide a long term community asset.

A petition was received from Timperley Women's Civic Society containing 45 signatures supporting the proposal to redevelop the current library site.

There were concerns over the reduction in size of the library and the impact that it will have on frequently used services such as Rhymetime. There was also a concern on the availability of rooms for hire for local community groups.

Respondents commented on the impact of the proposals on the volume of traffic in Timperley town centre and the lack of car parking. The current car park at the library is seen as busy and any additional car parking that is lost will have an impact on the ability of people to access the facility and the town generally.

3.4.2 Other alternatives to proposal 3 that were considered included:

- No change. However this option has to be assessed against the need for the Council to make savings.

- Closing Timperley as the library is only 1.87miles from Altrincham. The approach from the GP is felt to be a better option than closure.
- Moving the library to another location within Timperley is not considered viable as a suitably sized building is not available. The approach from the GP is felt to be a more favourable option as the library could remain in its current location.

3.4.3 In order to mitigate the concerns raised during the consultation period, the Council considers that this proposal represents best value for the Council. Car parking will be retained for those people using the library as well as the medical centre.

3.4.4 **Recommendation:-** that the Council proceeds with the sale of the land to Park Medical Practice and the redevelopment of the site as set out in paragraph 3.4, to reduce the staffing assignment as appropriate_and in addition;

That the Director of Legal and Democratic Services in consultation with the Deputy Chief Executive be authorised to prepare, finalise and enter into all legal agreements and documentation required to implement the proposed sale and redevelopment of Timperley Library, including the Baker Street car park, to Park Medical Practice.

3.5 **PROPOSAL 4**

Redeveloping libraries; three options for Hale Library set out below:

- Option 1 Smaller, replacement library on the existing site with the remainder being developed for residential
- Option 2 – Residential on existing site, smaller replacement library elsewhere in Hale
- Option 3 – Residential on existing site, temporary library for up to 3 years elsewhere in Hale

3.5.1 **Consultation feedback**

The overall net score for this proposal was -7. E-petitions were started but none were sent to the Council by the end of the consultation period. However, since the consultation period closed we have received notification of the following petitions:

- Hale Civic Society e-petition 100 signatures
- Friends of Hale Library 1582 signatures
- Hale community (paper petition) 763 signatures

The principal positive comment on the impact of the options set out was that with at least two proposals there would be a maintained library service in the area housed in a new and modern facility. The addition of housing stock in an area of high demand is welcomed by a number of respondents, as is the generation of income from the sale of the land and the associated reduction in library running costs.

Respondents were concerned over possible disruption both to the library service and to the town itself during any construction period. Respondents also felt that the development of additional housing would impact on the availability of parking for the library and increase congestion generally in and around the library site.

A number were against any closure of Hale Library and wanted to keep it open in its current form as a well-used community asset. Respondents felt that the proposals have many drawbacks such as the proposed move to Altrincham and the size of reported replacements (250 sq. metres).

There was strong interest shown in the range of proposals, with 23 Expressions of Interest submitted. 16 submitted financial offers and 7 requested further time and a more detailed specification to submit a financial offer.

3.5.2 Consultation feedback in respect of the three individual options is as follows:

- **Option 1** – 23% of respondents were in favour of this option.
- **Option 2** – 39% of respondents were in favour of this option.
- **Option 3** – 10% of respondents were in favour of this option.

3.5.3 Other alternatives to proposal 4 that were considered included:

- No change. However this option has to be assessed against the need for the Council to make savings.
- Immediate closure of the Library, this is considered not to be a viable option at this stage.
- Income generation. This is not considered to be a sustainable option giving the voluntary nature of the proposal and in that no firm proposals have been received.
- To see community hub options such as those proposed for Timperley and Coppice explored for Hale. However, no firm proposals have been received in this regard.
- Immediately moving the library to another location within Hale is not considered viable at this time, as a suitable alternative location has not been identified.

- 3.5.4 In considering whether there is any mitigation to the concerns raised during consultation, it is noted that at least two of the options outlined in the consultation proposals would result in the continuing provision of a library within Hale. In the event that one of these options is progressed then this will address a number of the concerns raised.
- 3.5.5 There have been 23 expressions of interest in respect of the three options proposed for Hale Library with differing degrees of support from respondents of the consultation process. However, given the potential value of each option and the need to progress to further and better detail, it is not proposed to rule out any of these options at this stage and tenders will be invited across the range of options.
- 3.5.6 **Recommendation:** - that formal tenders should be invited in relation to the provision of a library in Hale (together with redevelopment of the former library site) from the bidders who have previously expressed an interest on an informal basis.

Following receipt of the formal tenders, a report should be prepared to evaluate the proposals for the provision of a library in Hale (together with redevelopment of the former library site).

Delegate the decision to approve the successful bidder following the evaluation of the proposals for the provision of a library in Hale (together with redevelopment of the former library site) to the Executive Member for Transformation and Resources.

That the Director of Legal and Democratic Services in consultation with the Deputy Chief Executive be authorised to prepare, finalise and enter into all legal agreements and documentation required to implement the proposed sale and redevelopment of Hale Library

This recommendation represents best value for the Council.

3.6 PROPOSAL 5

Reduction in back office staff and a reduction in the book fund.

3.6.1 Consultation feedback

The net score for the reduction of back office staff was 0. The net score for the reduction of the book fund was -30.

Amongst all age groups there was no majority for or against the reduction in staffing, with the remainder of people replying 'Don't know'.

The majority of people across all age groups disagree with the reduction of the book fund proposal, with the highest disagreement amongst the 75+ group (68 per cent), 45-54 (66 per cent) and 65-74 group (65 per cent).

3.6.2 Other alternatives to proposal 5 that were considered included:

- A further reduction in back office staff to offset a reduction in the book fund. This is considered to not be appropriate or viable.
- Reduce front line staff further. This is not considered to be a viable option as it would necessitate the need for further changes across the Library service, which would have a detrimental impact.

In considering any mitigation to support concerns raised during consultation, enough voluntary requests have been received to support the proposed 'front line' staffing reductions, and there are vacancies available within the service for staff considered to be 'at risk'. In addition, if the recommendations are accepted to close and redevelop libraries then the current level of book fund will not be required. As a member of the north-west library purchasing consortium this will further mitigate the impact of reducing the book fund through heavily discounted rates.

3.6.3 **Recommendation** - Implement back office staff reduction and agree that the book fund is reduced by £105k.

3.7 PROPOSAL 6

Consider income generation options

3.7.1 **Consultation feedback**

Net score – not applicable for this option

3.7.2 Option suggested for consideration under proposal 6 included:

- Increasing the variety and price of products sold in libraries
- Introducing an Amazon collection point into some libraries
- Looking for sponsorship from businesses
- Increasing council tax

- Renting e-books
- Increasing late fines
- Increasing charges for photocopier/computer use
- Working with schools
- Sharing space with other council run services
- Selling library sites to spend on the remaining libraries

The Council will continue to exploit opportunities for additional income, although it is estimated that any potential income opportunities would not be sufficient to mitigate other proposals. In addition the Council has already as part of its budget setting process agreed to freeze Council Tax for 15/16.

3.7.4 **Recommendation:** - that further areas of opportunity for income generation are explored.

3.8 **Proposal 7**

Closing libraries; specifically Bowfell, Davyhulme and Lostock

3.8.1 **Consultation feedback**

The net score for this proposal was -4. In cases where respondents support the proposal, there was a consensus that the closures would have minimal impact or no impact at all, occasionally respondents specified that this was because there are other library sites very close by.

Most respondents who agreed with the closures supported the reasoning that this has been decided due to these libraries' low usage.

Many respondents commented that the closure of these libraries would have a negative impact on those members of the community that lived close by, reducing accessibility and the convenience of being able to walk to a local library. Respondents expressed particular concern about the impact these closures might have on the elderly as well as children. A petition containing over 900 signatures was received in respect of Davyhulme Library.

3.8.2 Other alternatives to proposal 7 that were considered included:

- Keeping the libraries open but reducing their opening hours. However this option has to be assessed against the need for the Council to make savings and the impact across the whole Library service.
- Keeping the libraries open but reducing staffing and using volunteers. However this option has to be assessed against the need for the Council

to make savings and the impact of continued running costs across the library service as is considered to not be viable.

- Working with other organisations such as schools or businesses to keep the libraries open. This is considered not to be viable as no firm proposals have been received in this regard.

3.8.3 In mitigation of the concerns raised during consultation an approach was made by the Head of Lostock College to maintain a library for the pupils of Lostock College, which will allow continued access to the library and its resources by the community

Bowfell Library and Davyhulme Library are a short distance away from Urmston Library and can be accessed by good public transport links. Feedback from the first consultation showed that 41% of people thought that 10 minutes was an acceptable travelling time to another library. Both Bowfell and Davyhulme are within this time frame from Urmston Library, with Bowfell being 0.91 miles away and Davyhulme being 0.76 miles away.

80% of Bowfell customers already use another library and 71% of Davyhulme so customers are already using different libraries. Extra Rhyme times and Story times will be introduced at Urmston to cope with the additional numbers that will transfer from Davyhulme. The Home Library Service will be offered as an option for those elderly people who might find it difficult to get to Urmston Library.

3.8.4 **Proposal for Lostock:**

This proposal has developed as the College wish to maintain a library for the pupils of Lostock College. In maintaining this library provision there is a desire for the community to have continued access to the library and its resources.

The Council will ensure that all book stock, fixtures and furnishings will be retained in the library for the College to use. This will include the self-service machine that customer can use to issue, return and renew books. It will also include the People's Network computers so customers can still access the internet.

The College will provide a member of staff who will be on hand to assist people with library related queries and to signpost customers who may have Council enquires to either Urmston or Stretford Libraries which are both under two miles away. As only 87 council enquiries were dealt with in 2014/15 this should not unduly inconvenience existing customers.

Customers will still be able to access the library for books and as a meeting place for the community groups that currently use the library. The Open + technology will be considered as part of finalising these arrangements.

3.8.5 Recommendation:

- i. that Bowfell and Davyhulme Libraries should close.
- ii. that the management and day to day running of Lostock Library transfers to Lostock College and that the detail of this is developed.

3.9 PROPOSAL 8

Reduction in funding for Delamere Toy Library

3.9.1 Consultation feedback

The net score for this proposal was +8. Some respondents commented that the impact of the proposal would be minimal with a handful of respondents supporting the proposal because it saved costs. A few respondents felt that the toy library was a service that should not be funded from the council's library budget.

Respondents who oppose this proposal were primarily concerned about the impact of the proposals on the families that use the service. There was a sense that this proposal targeted and impacted those users who were most disadvantaged, namely families on low incomes and families with disabled children.

Respondents were also concerned that the proposal would result in a reduction of the quality of the service: fewer toys as well as a lower standard of staffing if the library were to be run by volunteers alone.

3.9.2 Other alternatives to proposal 8 that were considered included:

- No change. However this option has to be assessed against the need for the Council to make savings
- Income generation. No firm proposals have been received in this regard.

3.9.3 In considering any mitigation in relation to concerns raised during consultation the Council will continue to support Delamere Toy Library by providing the building rent free, approximately £4kp.a and continuing to pay the running costs, approximately £5.6kp.a. In addition the Council will continue to work with Delamere Toy Library Committee to source other areas of funding/income and in this regard some additional funding has already been identified. It will continue to assist the Committee to explore the other ideas mentioned above ensuring that the Toy Library remains open and thus able to provide the same level of service as it does currently.

3.9.4 **Recommendation:** - that the funding for two part-time staff at Delamere Toy Library should be withdrawn.

3.10 The full year effect of all the proposals is forecast to save £700k. However there will be a lead-in time to a number of the proposals and therefore it is anticipated that £500k will be saved in the financial year 2015/16, with the balance occurring in the following financial year. The approved budget for 2015/16 assumed savings of £550k and therefore it will be necessary for the balance of £50k to be identified from elsewhere in the Council's budget. The Director of Finance will report on this in the first monitoring report in July 2015.

The cost of the Open + technology will be met from the capital programme. Furthermore, the Council will still comply with its statutory duty under the Public Libraries and Museums Act 1964 to provide a comprehensive and efficient service

4 The Public Sector Equality Duty

4.1 Under the Equality Act 2010 a public authority in the exercise of its functions must have due regard to the need to eliminate discrimination, harassment, victimisation and any relevant prohibited conduct, advance equality of opportunity between persons sharing a relevant prohibited characteristic and persons who do not; and foster good relations between persons sharing a relevant prohibited characteristic and persons who do not.

4.2 Protected characteristics for the purpose of the Act are disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

4.3 In order to assist the evaluation of the proposals and to ensure that the Council paid due regard to its duties under the Equality Act, a number of Equality Impact Assessments (EIAs) were carried out as part of the evaluation process to ensure that due consideration was given to those with the protected characteristics and the likely impact of the proposals on each of these groups.

4.4 The EIAs were available to officers evaluating the consultation responses and are available to members of the Executive who will be deciding whether or not to support the proposals contained within the report. Any potential impacts have been identified through the EIA and consultation process. Where any potential impact has been identified consideration has been given to whether measures can be taken to mitigate against these impacts and the mitigation measures are set out within the body of the relevant EIA or are reflected in modifications to the proposals.

4.5 In considering the report and deciding whether to accept the recommendations the Executive is required to have regard to the Public Sector Equality Duty. In order to satisfy this duty the Executive must consider the potential impacts identified in the EIA's and the consultation responses which are appended to the report. Where reasonable and appropriate

mitigation measures have been proposed which will offset either wholly or in part the impacts identified. Where mitigating measures are not proposed, countervailing factors, namely the significant budgetary pressures facing the Council and the need to make improvements and efficiencies to the library services concerned are considered to provide justification for the measures proposed.

The E.I.A.s can be found in Appendix 3, EIA's are not required in relation to Hale Library (at this stage), the book fund and the income generation proposals.

5 Next Steps

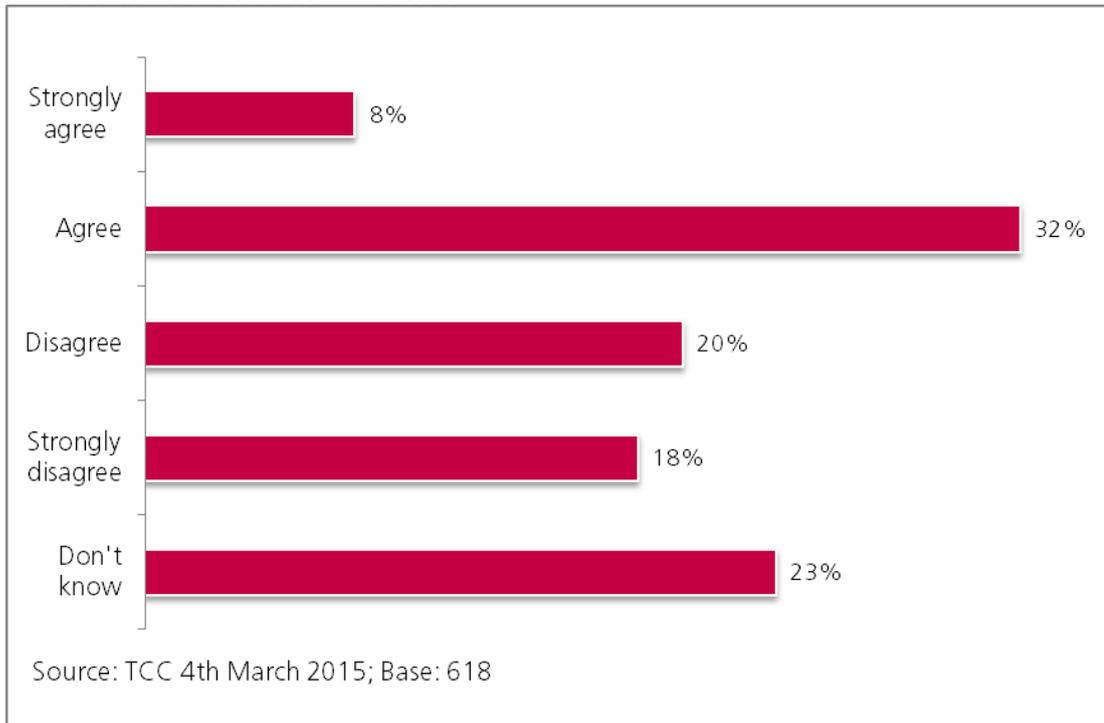
An action plan will be developed for the progression of the proposals

Appendix 1 – Consultation feedback on service proposals

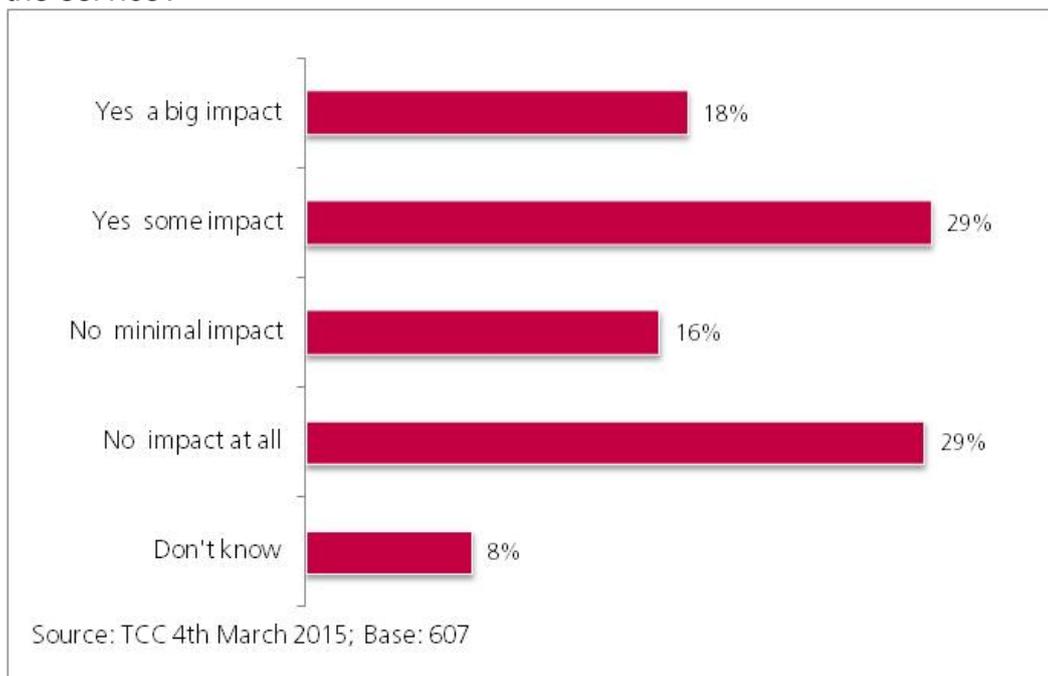
The following feedback has been received as part of the consultation.

Proposal 1 - Increasing use of technology at libraries; specifically Open + technology at Woodsend Library.

Do you agree with the proposal to increase the use of technology and reduction of staff at Woodsend?

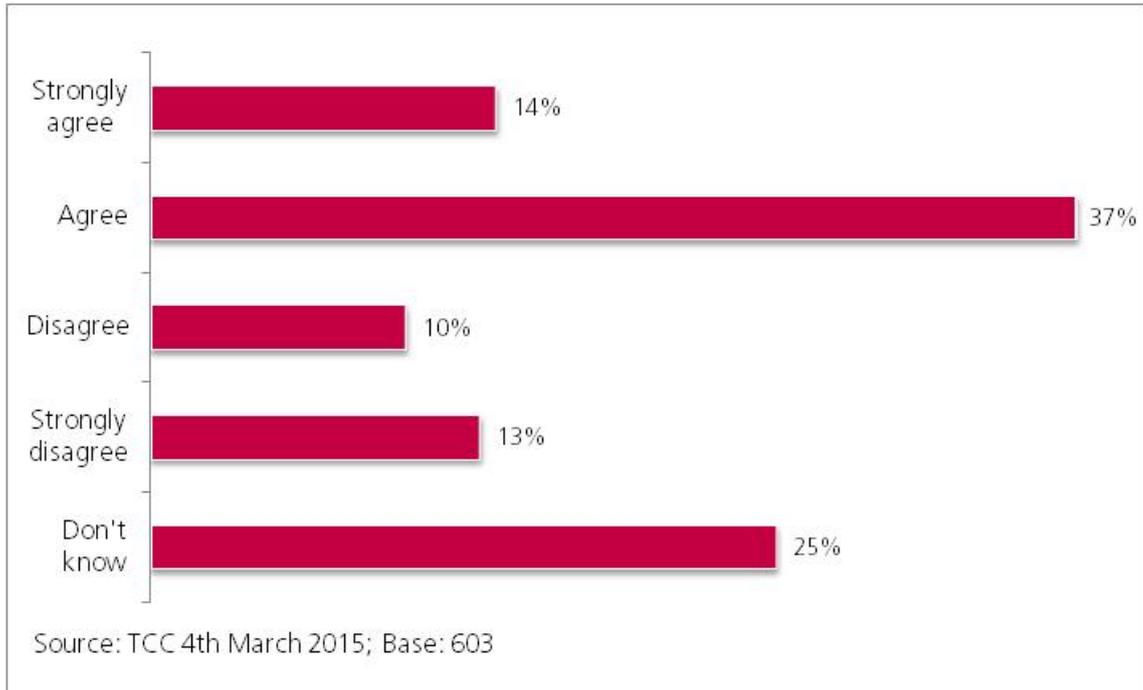


Do you think that these proposals will impact on you and your family's use of the service?

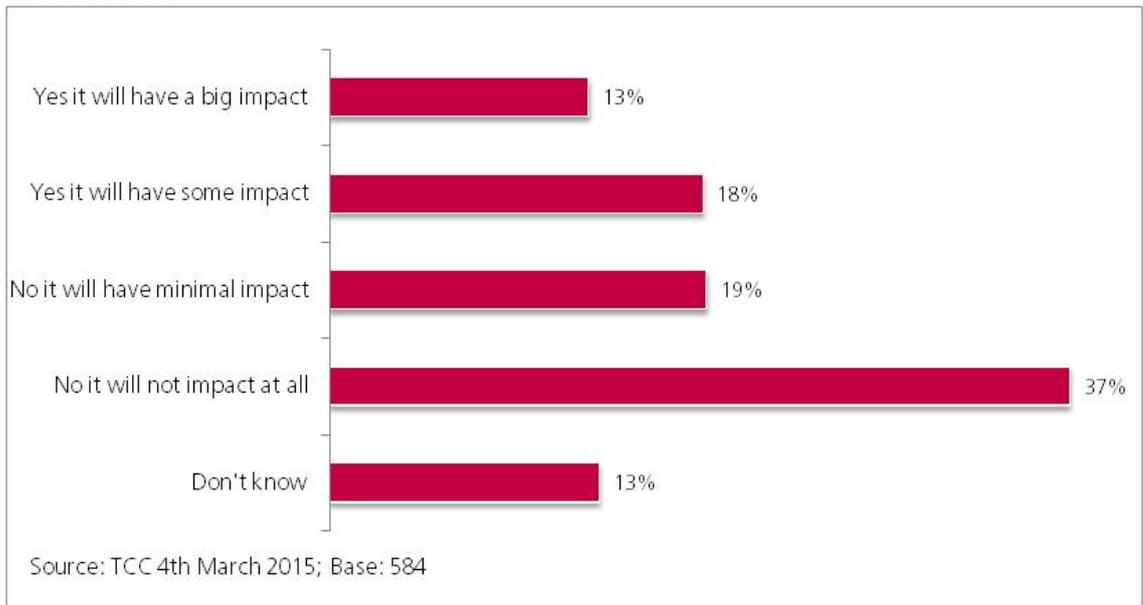


Proposal 2 - Partnering with other organisations in providing library services; specifically blueSCI at Coppice library.

Do you agree with the proposal to establish Coppice Library as a community hub with reduced staff and more volunteers and run with health and wellbeing and other services delivered from the same site?

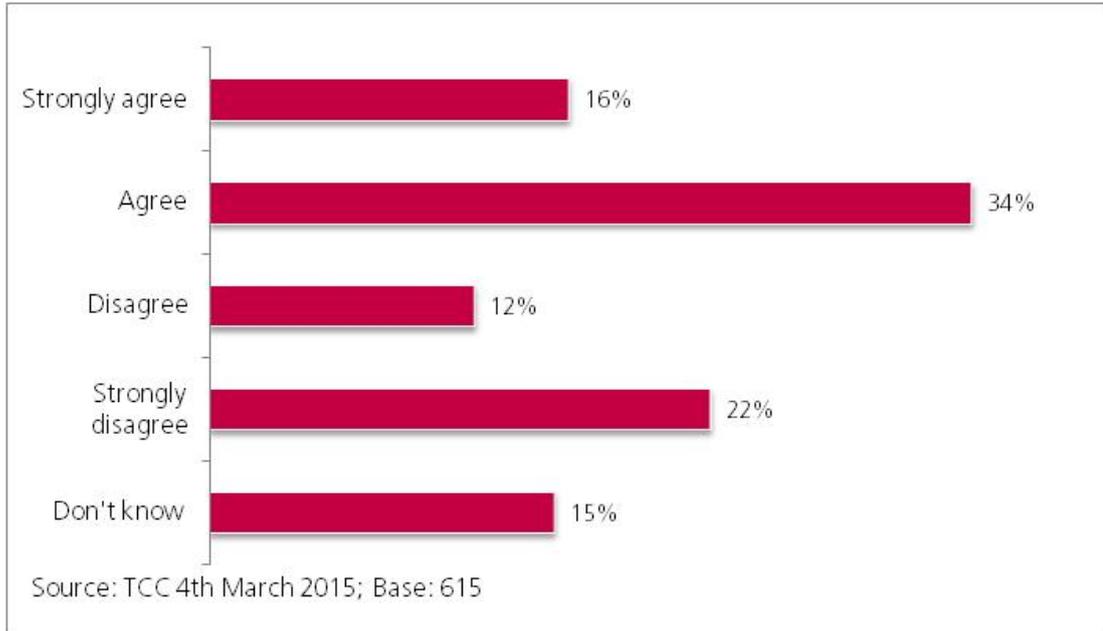


Do you think that these proposals will impact on you and your family's use of the service?

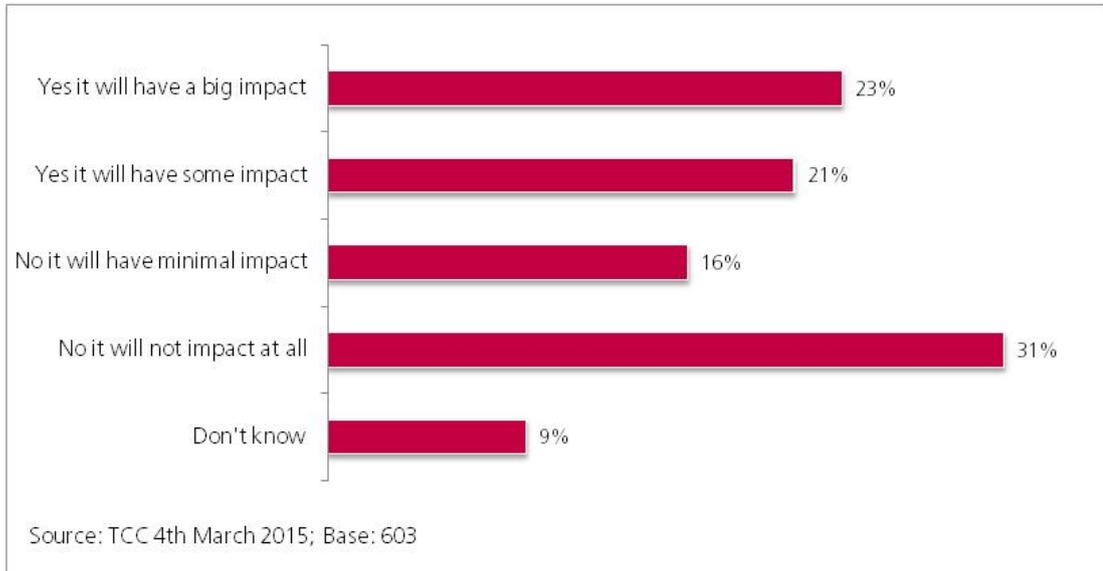


Proposal 3 - Redeveloping libraries; with a GP at Timperley Library.

Do you agree with the proposal to develop Timperley's library to incorporate a GP surgery and a residential development?

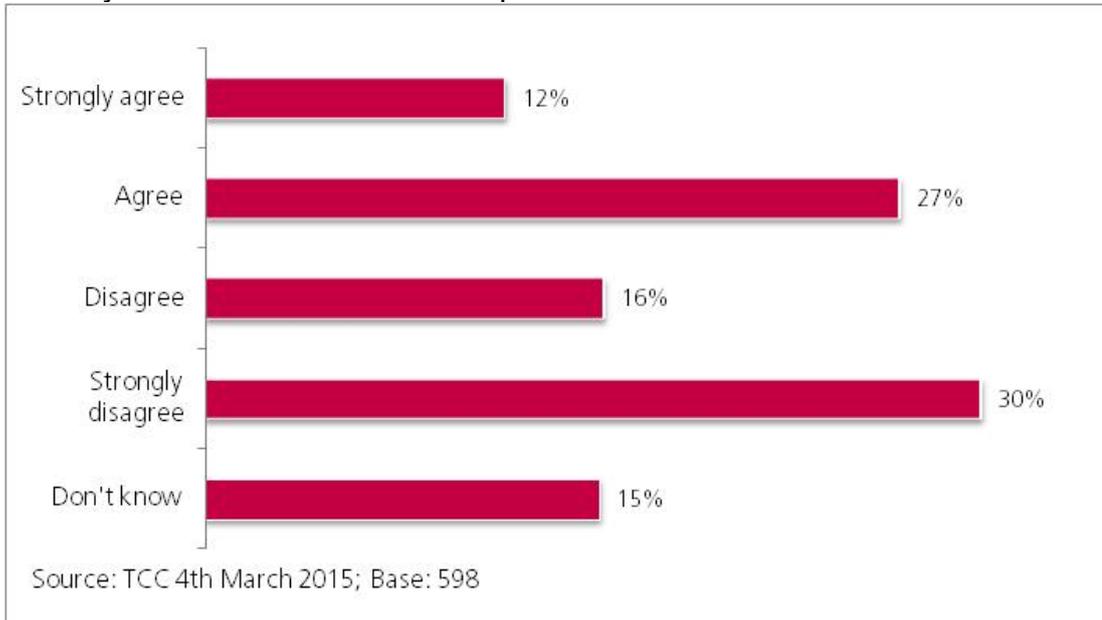


Do you think that these proposals will impact on you and your family's use of the service?



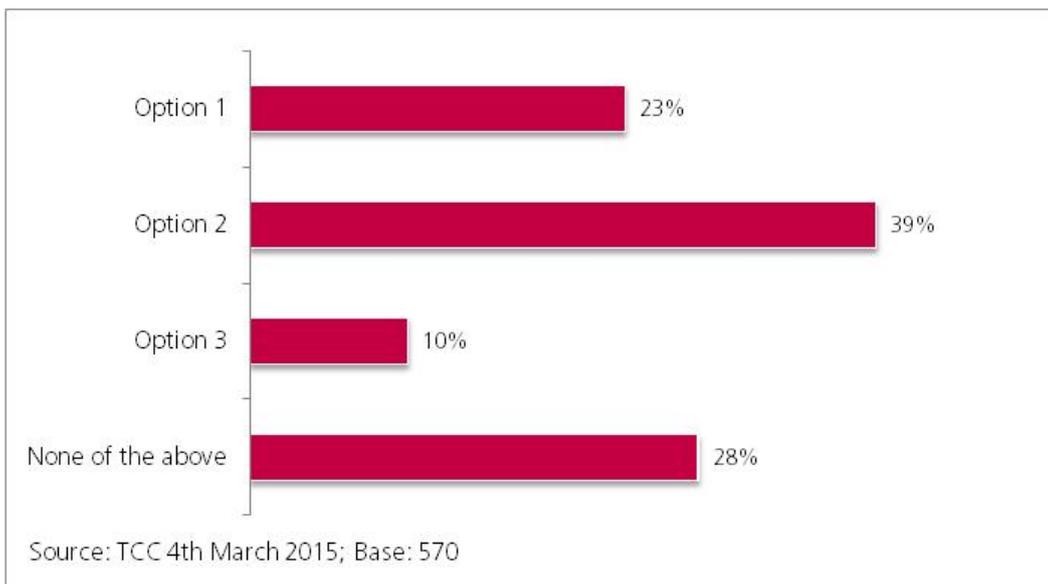
Proposal 4 - Redeveloping libraries; three options for Hale Library.

Do you agree with the proposal to sell the site at Hale Library on condition that a library be maintained or redeveloped until at least 2017?

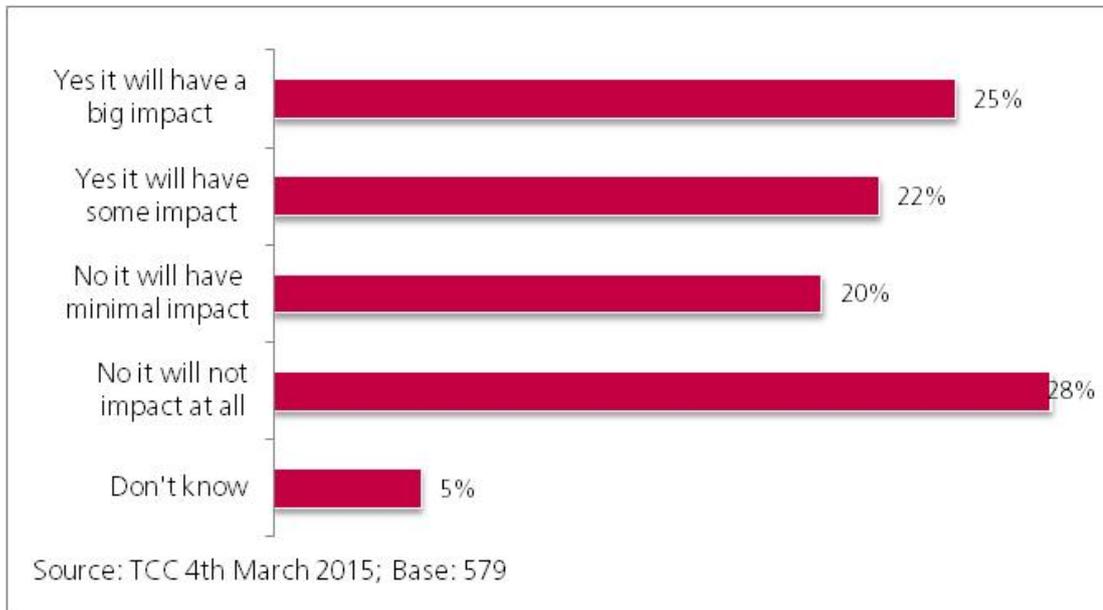


There are three potential options for the redevelopment of Hale Library. Please indicate which option you prefer.

- Sale of the current site with a requirement for a smaller library to be built on the existing site with residential homes on the remainder.
- Sale of the current library site with a requirement to provide a new permanent library to be built at no cost to the Council within Hale village.
- Sale of the current library site with a requirement to provide a temporary library for the period up to mid-2017 (by which time it is envisaged that Altrincham's new library will have been built and opened in the market quarter). The temporary library would then close.

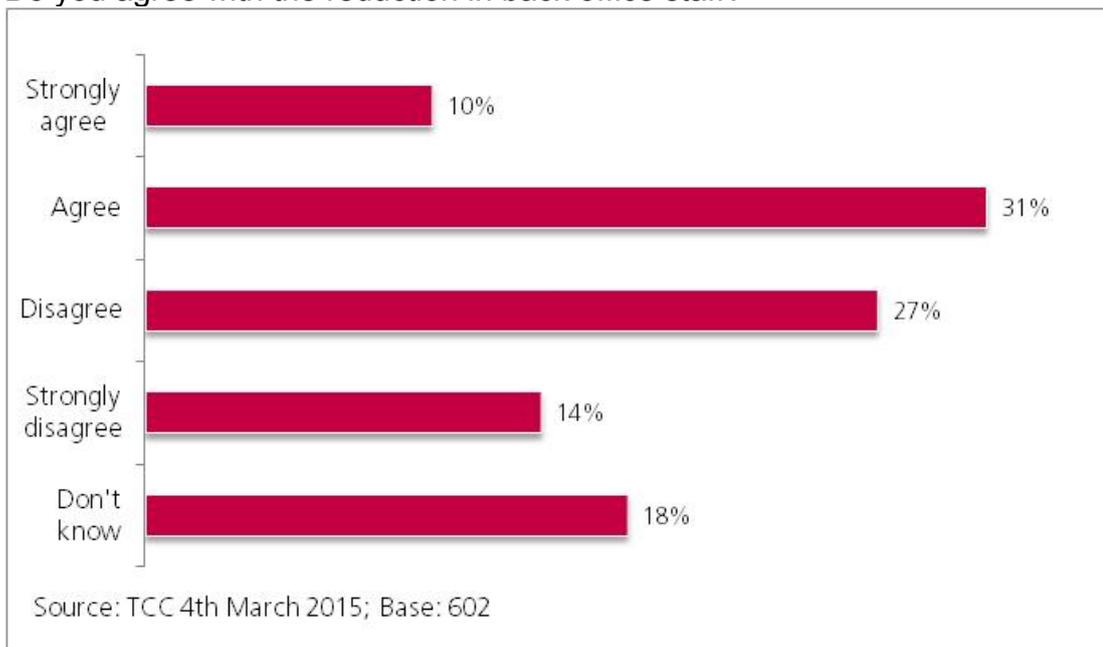


Do you think that these proposals will impact on you and your family's use of the service?

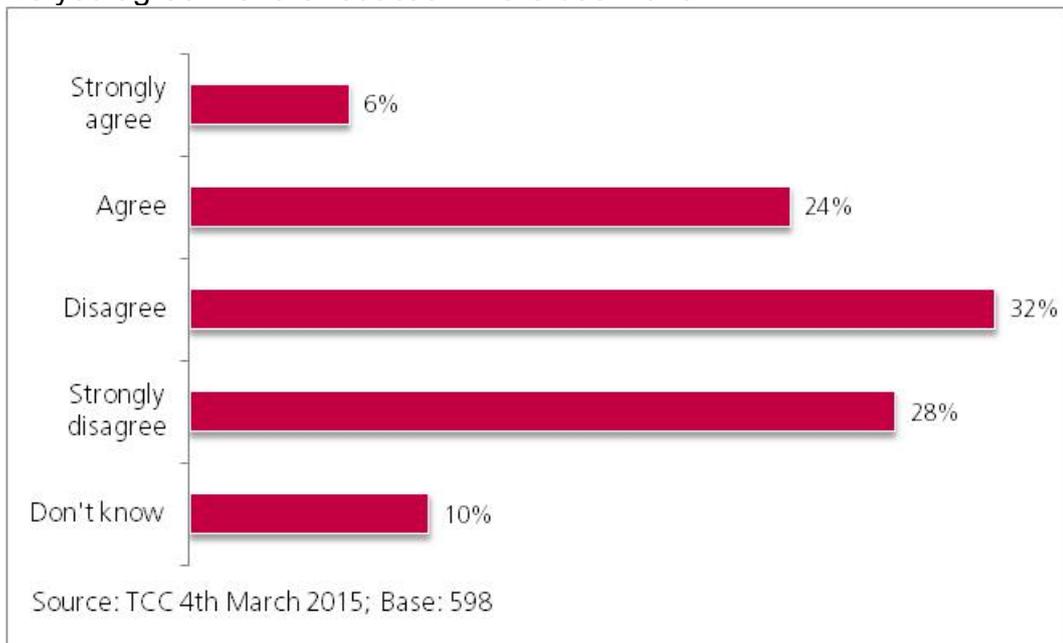


Proposal 5 - Reduction in back office staff and a reduction in the book fund.

Do you agree with the reduction in back office staff?



Do you agree with the reduction in the book fund?



Proposal 6 - Income generation.

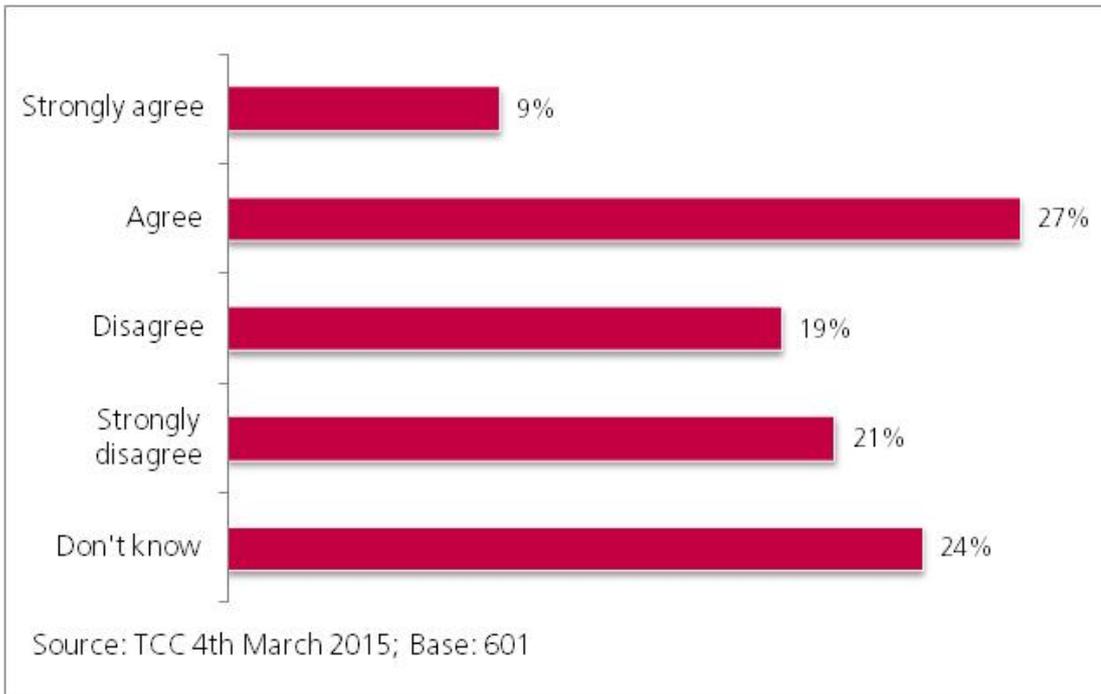
Respondents were asked to provide ideas for where extra income could be generated;

- Increasing the variety and price of products sold in libraries
- Introducing an Amazon collection point into some libraries
- Looking for sponsorship from businesses
- Increasing council tax
- Renting e-books
- Increasing late fines
- Increasing charges for photocopier/computer use
- Working with schools

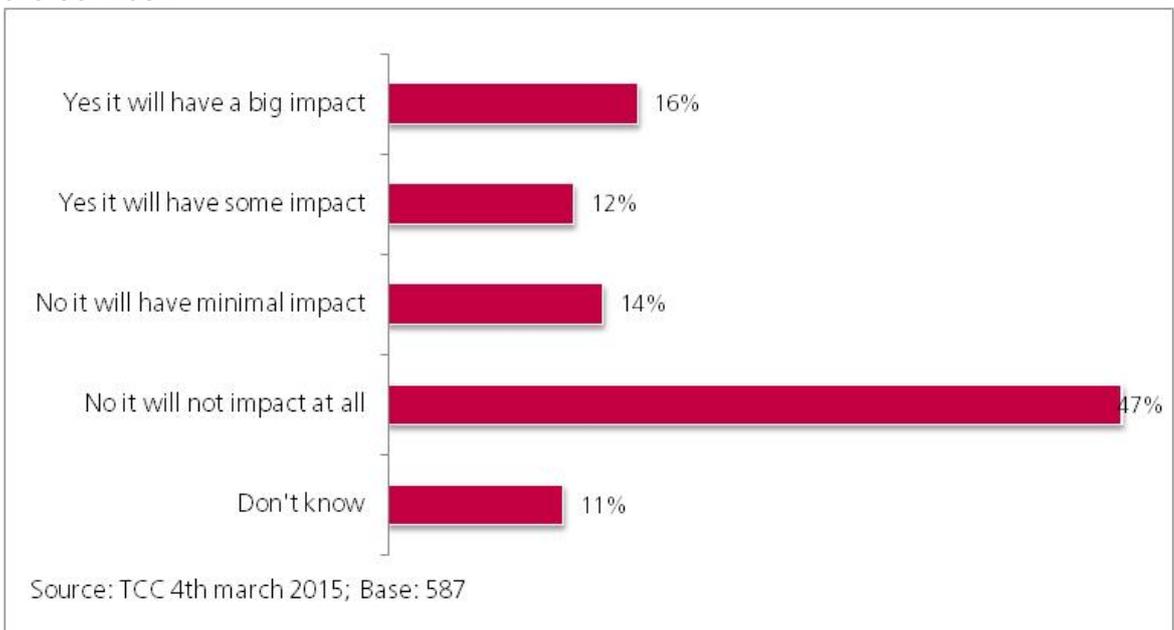
Work is taking place to trial a self-serving Costa coffee machine at Urmston Library. This should be self-financing and require little input from library staff.

Proposal 7 - Closing libraries; specifically Bowfell, Davyhulme and Lostock.

Do you agree with the proposed closure of these three libraries?

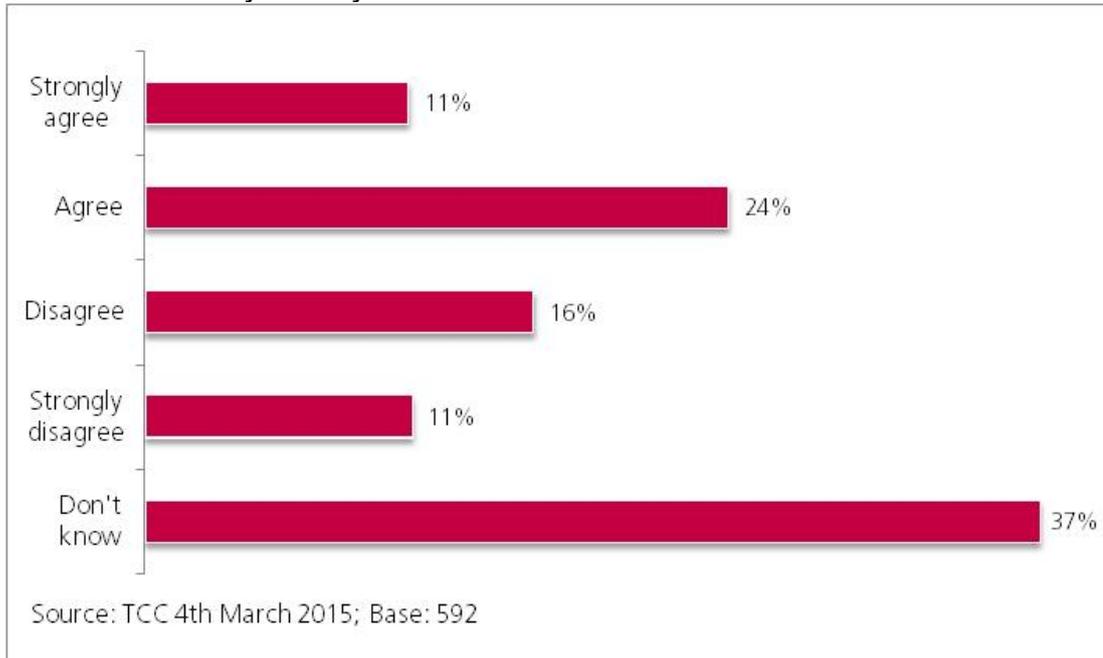


Do you think that these proposals will impact on you and your family's use of the service?

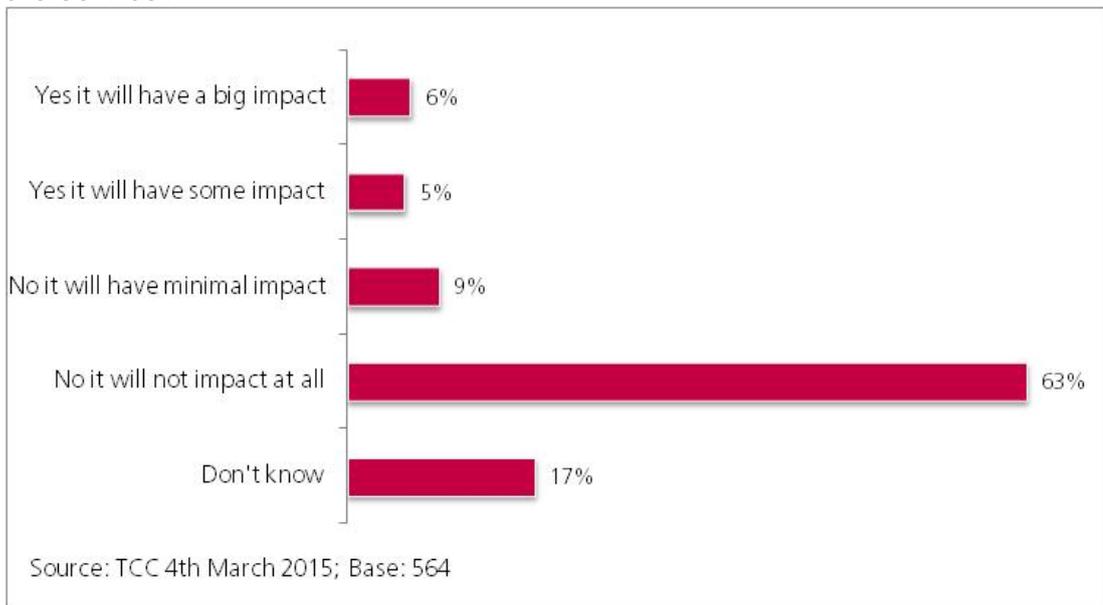


Proposal 8 - Reduction in funding for Delamere Toy Library.

Do you agree with the proposal to reduce funding for the provision of staff to the Delamere Toy Library?



Do you think that these proposals will impact on you and your family's use of the service?



Appendix 2 – Demographics of those who responded

| | Percentage | Count |
|-------------------|------------|-------|
| An organisation | 1% | 8 |
| A local resident | 94% | 598 |
| A member of staff | 2% | 12 |
| A volunteer | 3% | 19 |
| Total | | 637 |

| Gender | Percentage | Count |
|-------------------|------------|-------|
| Male | 34% | 219 |
| Female | 64% | 410 |
| Prefer not to say | 2% | 11 |
| Total | | 640 |

| Age | Percentage | Count |
|-------------|------------|-------|
| 24 or below | 2% | 11 |
| 25-34 | 8% | 51 |
| 35-44 | 15% | 99 |
| 45-54 | 18% | 113 |
| 55-64 | 21% | 133 |
| 65-74 | 24% | 151 |
| 75+ | 13% | 81 |

| | | |
|-------|--|-----|
| Total | | 639 |
|-------|--|-----|

| Disability | Percentage | Count |
|----------------------|------------|-------|
| Yes | 11% | 72 |
| No | 86% | 544 |
| Don't know/can't say | 2% | 13 |
| Total | | 629 |

| Ethnicity | Percentage | Count |
|-------------------------|------------|-------|
| White British | 90% | 571 |
| White Irish | 1% | 7 |
| Other White | 2% | 11 |
| Indian | 1% | 7 |
| Pakistani | 1% | 7 |
| Bangladeshi | 0% | 0 |
| Other Asian | 0% | 1 |
| Black African | 0% | 1 |
| Black Caribbean | 0% | 0 |
| Other Black | 0% | 0 |
| White Asian | 0% | 0 |
| White and Black African | 0% | 0 |
| White and Black | 0% | 1 |
| Caribbean | 0% | 0 |
| Other mixed | 0% | 3 |
| Chinese | 1% | 5 |
| Other | 3% | 17 |
| Total | | 631 |

Appendix 3 – Equality Impact Assessments

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

Page 66

| A. Summary Details | | |
|-----------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Woodsend Library Self-Service Access |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |
| B. Policy or Function | | |
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | <p>Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services.</p> <p>This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.</p> |

| | | |
|---|--|--|
| | | <p>This EIA specifically relates to the proposed use of technology at Woodsend Library to facilitate a self-service access model for library users.</p> <p>Separate EIAs have been carried out for other library proposals. These are detailed below:</p> <ul style="list-style-type: none"> • Implementing a Community Hub at Coppice Library with a third sector partner • Redeveloping the Timperley and Hale Library sites. • Reducing the number of Library and back office staff • Reducing the book fund • Closing Bowfell, Davyhulme and Lostock Libraries • Withdrawing funding for the Toy Library Advisor at Delamere Toy Library <p>Woodsend Library is currently staffed part time, which limits the opening hours of the library. We are proposing to introduce technology at Woodsend Library that will enable customers to access the library using their library card and PIN number. This will switch on the library building including the lights, heating and the monitored CCTV cameras. Customers will also be able to access the People's Network computers.</p> <p>The flexibility offered by the technology will help us to create a self-service model which will create the option for opening hours to be extended for longer than at present. It will also enable the Council to reduce staffing costs at the site, generating estimated savings of £54,000.</p> <p>Some staff resource will be maintained so that the library is not unstaffed all the time. The libraries team will work with current users to help them transition to new ways of using the service. We will train volunteers to be experts in using the system and to be an additional source of support.</p> |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | <p>Yes:</p> <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are | The Council - The new approach will help to create sustainable value for money library services |

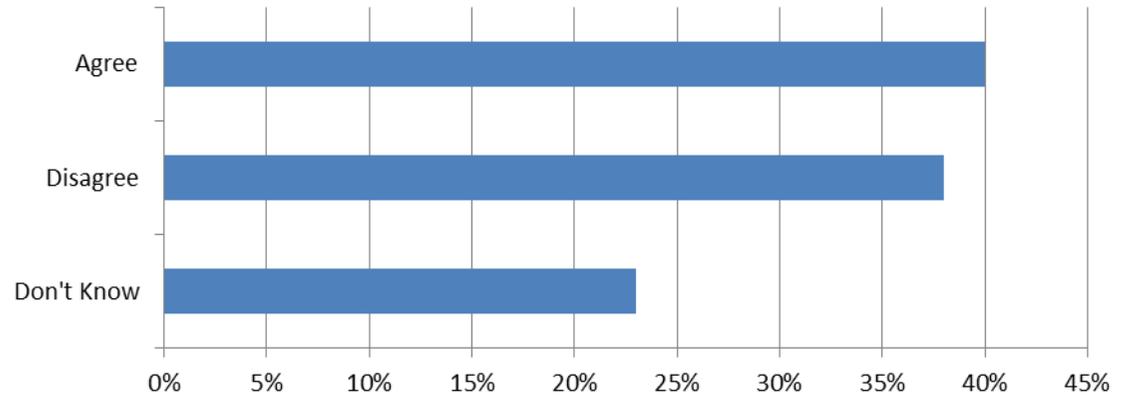
| | | |
|---|---|---|
| | they expected to benefit? | <p>while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term, this has the potential to ensure secure employment for Council employees.</p> <p>Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target.</p> |
| 8 | How will the policy/function (or change/Improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The following activities in the implementation plan are currently underway:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback • Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • Customers will be notified of the outcome from the Executive meeting • Work will continue with to implement the technology and communicate with customers |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of Trafford Borough and library usage • Well established internal and external customer relationships <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |

| | | |
|----|---|----|
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state? | No |
|----|---|----|

| C. Data Collection | | |
|---------------------------|--|---|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Ethnic Origin • Disability • Gender All information is displayed in section E below. |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

| D. Consultation & Involvement | | | | | | | | | | | | | | | | |
|---|--|---|------------------|--------|----------------|-----|---------------|-----|---------------|-----|---|----|-----------------------------|----|-----------|---|
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> | | | | | | | | | | | | | | |
| 2 | Please list any consultations planned, methods used and groups you plan to target. (If applicable) | <p>A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran from 16th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:</p> <ul style="list-style-type: none"> • A dedicated web page with information about the proposals • A booklet containing information about the proposals. This was made available at all libraries across the borough • A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet • An email address was made available for the public to submit their views on all of the proposals • Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback. <p>At the end of the consultation there had been the following responses:</p> <table border="1"> <thead> <tr> <th>Response channel</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Online surveys</td> <td>364</td> </tr> <tr> <td>Paper surveys</td> <td>326</td> </tr> <tr> <td>Comment cards</td> <td>189</td> </tr> <tr> <td>Letters (from individuals, including staff members)</td> <td>35</td> </tr> <tr> <td>Letters (from stakeholders)</td> <td>32</td> </tr> <tr> <td>Petitions</td> <td>2</td> </tr> </tbody> </table> | Response channel | Number | Online surveys | 364 | Paper surveys | 326 | Comment cards | 189 | Letters (from individuals, including staff members) | 35 | Letters (from stakeholders) | 32 | Petitions | 2 |
| Response channel | Number | | | | | | | | | | | | | | | |
| Online surveys | 364 | | | | | | | | | | | | | | | |
| Paper surveys | 326 | | | | | | | | | | | | | | | |
| Comment cards | 189 | | | | | | | | | | | | | | | |
| Letters (from individuals, including staff members) | 35 | | | | | | | | | | | | | | | |
| Letters (from stakeholders) | 32 | | | | | | | | | | | | | | | |
| Petitions | 2 | | | | | | | | | | | | | | | |

Proposal increased use of technology at libraries (Woodsend)



The feedback from the 2nd phase of the public consultations has highlighted the positive and negative impacts of the proposal.

The positive impacts include the continuing presence of a library in Woodsend, the use of technology to be able to access the library and the increased provision of library services in the local area through longer opening hours.

The negative impacts include the possibility of certain people experiencing difficulty in using the technology to access the library, particularly older people. Concerns about the health and safety aspects such as going into an unstaffed building and theft of the stock, and diminution of the library service.

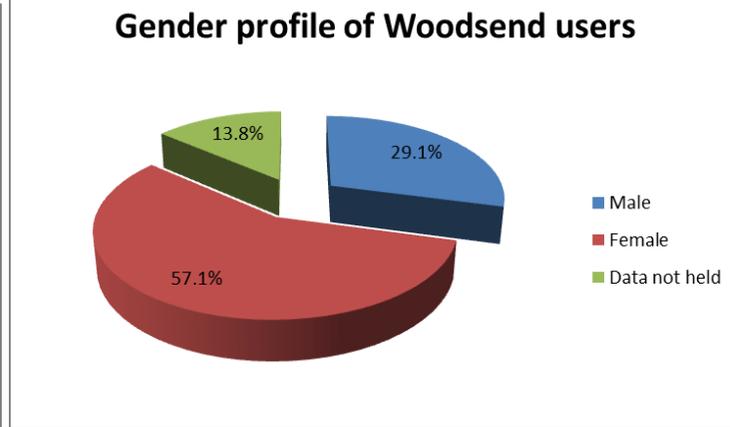
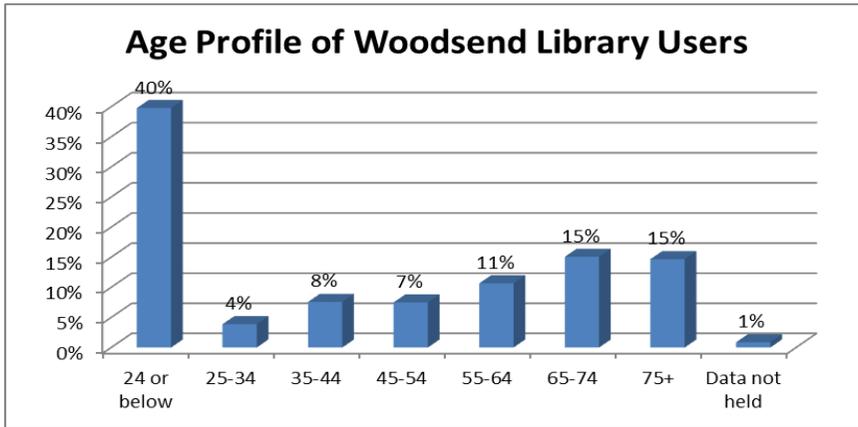
We will mitigate these concerns by providing:

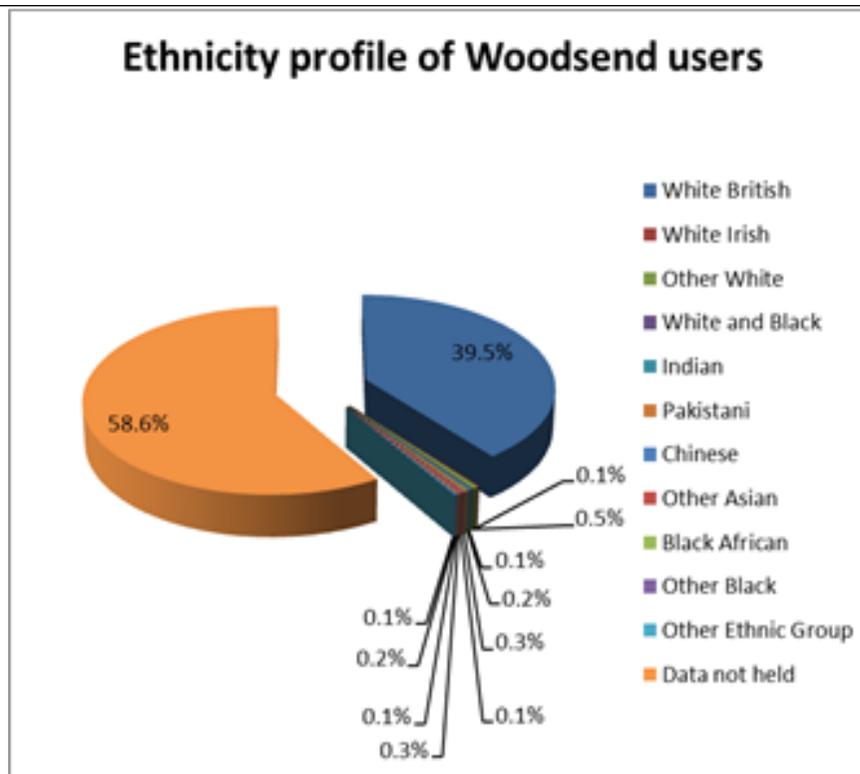
- Well trained staff and volunteers to support local people to offer support to regular users through training sessions. These should particularly cater for vulnerable groups.
- A phased introduction of the proposed changes, supported by staff and volunteers

3 ****What barriers, if any, exist to effective consultation with these groups and how will you overcome them?**

As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout.

E – Equalities Data





Four out of ten library users in the local area below 24 years old. Similarly four out of ten library users are people over the age of 55 years. Almost six out of ten (57%) of library users are female. The majority of the library users identify themselves as White British. Woodsend Library falls under the Davyhulme West ward. Data based on disability benefits claimant highlights that 9.34% of people in the ward have declared a disability.

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|---|----------|--|---------|--|
| Gender – both men and women, and transgender; | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Pregnant women & women on maternity leave | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Gender Reassignment | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Marriage & Civil Partnership | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. We have mitigated against the impacts in specific ways for those groups where the proposals will impact and in a general way for those where the information limited |
| Race - include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Disability – physical, sensory & mental impairments | | ✓ Low | | Detailed information relating to disabilities is not available from the data held on library customers. For the purpose of this EIA, 2011 census data relating to people in receipt of a disability related benefit (Disability Living Allowance, Incapacity Benefit and Attendance Allowance) has been used. |

| | | | | |
|---|--|--------------|---|---|
| | | | | <p>Less than 10% of people that live in the wards where the libraries are located are in receipt of a disability related benefit.</p> <p>Disabled library users may need assistance in accessing the library. We will mitigate this by providing secure and well-designed access for disabled library users.</p> |
| Age Group - specify eg; older, younger etc) | | ✓ Low | | <p>Older and younger people may need assistance in using the services and assurances that the library will remain a safe and welcoming environment.</p> <p>We will mitigate this by providing information guides, well trained staff and volunteers to support local people to use the technology.</p> <p>The building will be monitored by CCTV cameras and we will communicate this clearly to all library users, so that they act as on-going deterrent.</p> |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Religious/Faith groups (specify) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |

As a result of completing the above what is the potential negative impact of your policy?

High

Medium

Low

| F. Could you minimise or remove any negative potential impact? If yes, explain how. | | |
|--|--|---|
| Race: | | |
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | | |
| Disability: | | Disabled library users may need assistance in accessing the library. We will mitigate this by providing secure and well-designed access for disabled library users. |
| Age: | | <p>We will mitigate this by providing information guides, well trained staff and volunteers to support local people to use the technology.</p> <p>The building will be monitored by CCTV cameras and we will communicate this clearly to all library users, so that they act as on-going deterrent.</p> |
| Sexual Orientation: | | |
| Religious/Faith groups: | | |
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> | N/A |

| | |
|--|--|
| equal opportunity, could it be adapted so that it does? If yes, how? | |
|--|--|

G. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|------------------------------------|--|------------------|----------------------------|-----------------------------|----------------------------|-----------------|
| Complete public consultation | Review submissions from the public | March 2015 | The Campaign Company | | | |
| Communicate to staff and customers | Continue to work to implement the technology | April 15 onwards | Sarah Curran | Implementation Plan | Timescales announced | |
| | | | | | | |

Page 78

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

| A. Summary Details | | |
|--------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Coppice Library Partnership Arrangement |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |

| B. Policy or Function | | |
|-----------------------|---|--|
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | <p>Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services.</p> <p>This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.</p> <p>This EIA specifically relates to the implementation of a Community Hub at Coppice Library with a third sector partner.</p> |

| | | |
|---|---|---|
| | | <p>Separate EIAs have been carried out for other library proposals. These are detailed below:</p> <ul style="list-style-type: none"> • Introducing technology at Woodsend Library to facilitate a self-service access model for library users. • Redeveloping the Timperley and Hale Library sites. • Reducing the number of Library and back office staff • Reducing the book fund • Closing Bowfell, Davyhulme and Lostock Libraries • Withdrawing funding for the Toy Library Advisor at Delamere Toy Library <p>We can reduce costs by partnering with other organisations. This not only saves money but helps to further embed the libraries as part of the community over the long term and make them sustainable. We think that there is an opportunity at Coppice library to achieve this.</p> <p>We have been approached by a third sector organisation, BlueSCI with a vision to establish a community hub at Coppice Library. As well as providing library services, the building will be used to provide health and wellbeing services and will be available to provide additional community facilities. We will work with this provider and the Friends of Coppice Library group to develop a sustainable model for the future.</p> <p>We will make greater use of volunteers so that current opening hours will be maintained. We will also evaluate whether it would be feasible to introduce technology at Coppice Library that will enable customers to access the library using their library card and PIN number, thereby providing the option of extended opening hours.</p> <p>By partnering with another organisation and increasing the use of volunteers, we estimate that we will generate estimated savings of £120,900. This approach will also help to Create a multiuse community hub which will increase the centrality of the library in community life and ensure there are facilities available for a wide range of groups/organisations.</p> |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | <p>Yes:</p> <ul style="list-style-type: none"> • Redeployment Policy |

| | | |
|---|--|--|
| | | <ul style="list-style-type: none"> Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term; this has the potential to ensure secure employment for Council employees.</p> <p>Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target.</p> |
| 8 | How will the policy/function (or change/Improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The following activities in the implementation plan are currently underway:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> Consider feedback from public consultation Review proposals in light of feedback Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> Executive approve or amend proposals <p>26th March onwards</p> <ul style="list-style-type: none"> Customers will be notified of the outcome from the Executive meeting Work will continue with blueSCI to develop the proposal |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> A detailed knowledge of the make-up of Trafford Borough and library usage Well established internal and external customer relationships |

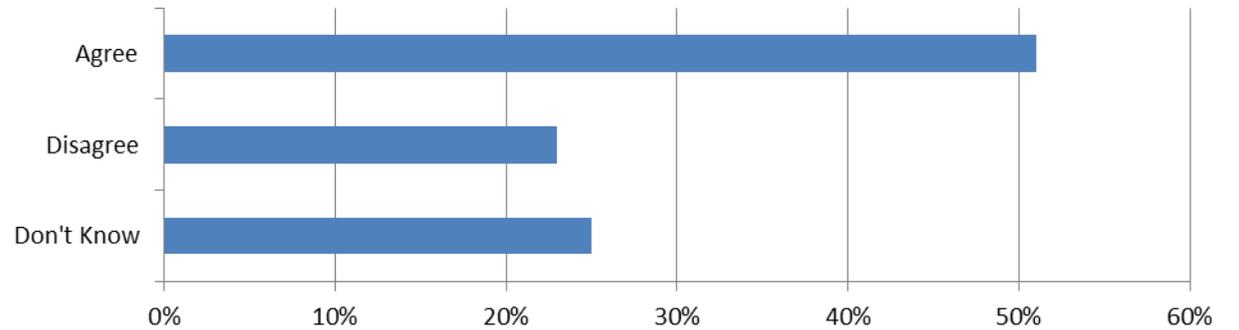
| | | |
|----|---|--|
| | | The factors that could detract from achieving the outcomes for service users include: <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state? | No |

C. Data Collection

| | | |
|---|--|---|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Ethnic Origin • Disability • Gender All information is displayed in section E below. |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

| D. Consultation & Involvement | | | | | | | | | | | | | | | | |
|---|--|---|------------------|--------|----------------|-----|---------------|-----|---------------|-----|---|----|-----------------------------|----|-----------|---|
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> | | | | | | | | | | | | | | |
| 2 | Please list any consultations planned, methods used and groups you plan to target. (If applicable) | <p>A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran from 16th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:</p> <ul style="list-style-type: none"> • A dedicated web page with information about the proposals • A booklet containing information about the proposals. This was made available at all libraries across the borough • A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet • An email address was made available for the public to submit their views on all of the proposals • Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback. <p>At the end of the consultation there had been the following responses:</p> <table border="1"> <thead> <tr> <th>Response channel</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Online surveys</td> <td>364</td> </tr> <tr> <td>Paper surveys</td> <td>326</td> </tr> <tr> <td>Comment cards</td> <td>189</td> </tr> <tr> <td>Letters (from individuals, including staff members)</td> <td>35</td> </tr> <tr> <td>Letters (from stakeholders)</td> <td>32</td> </tr> <tr> <td>Petitions</td> <td>2</td> </tr> </tbody> </table> | Response channel | Number | Online surveys | 364 | Paper surveys | 326 | Comment cards | 189 | Letters (from individuals, including staff members) | 35 | Letters (from stakeholders) | 32 | Petitions | 2 |
| Response channel | Number | | | | | | | | | | | | | | | |
| Online surveys | 364 | | | | | | | | | | | | | | | |
| Paper surveys | 326 | | | | | | | | | | | | | | | |
| Comment cards | 189 | | | | | | | | | | | | | | | |
| Letters (from individuals, including staff members) | 35 | | | | | | | | | | | | | | | |
| Letters (from stakeholders) | 32 | | | | | | | | | | | | | | | |
| Petitions | 2 | | | | | | | | | | | | | | | |

Do you agree with the proposal for the Community Hub



The feedback from the 2nd phase of the public consultations has highlighted the positive and negative impacts of the proposal.

The positive impacts include a positive response to the concept of using a partnership to create a community facility and community hub, a view that this proposal will increase accessibility and useable facilities particularly for sections of the community that are less well off, blueSCI considered as a positive addition to the facility and a good partnership to save money from the public purse.

The negative impacts include concerns about the degradation of the library service as a result of the library sharing space with other services. There are also concerns about the reduction in staff, in particular a concern that the reduction in staff will mean that the extensive council service currently on offer will deteriorate and that this will have an impact on low income families living nearby. Concerns also exist about the possibility of volunteers not being trained and supported to provide the services that people have come to expect.

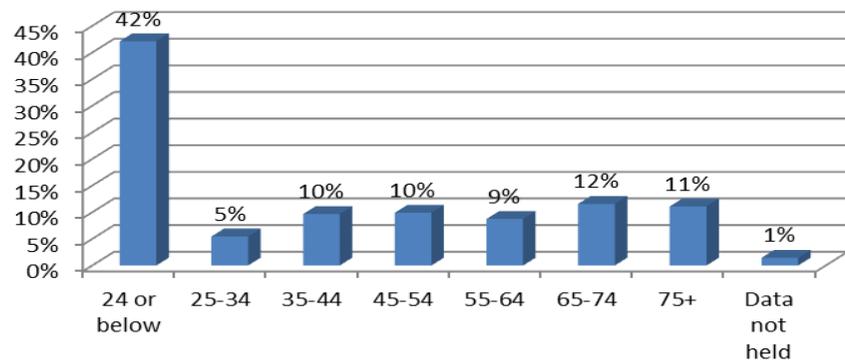
We will mitigate these concerns by:

- Having staff available to support vulnerable users to make use of the facility
- Focusing on the layout of the library to ensure enough space is retained for the library service
- Ensuring there is good communication with users on how the library services will change
- Ensuring that there are adequately trained volunteers

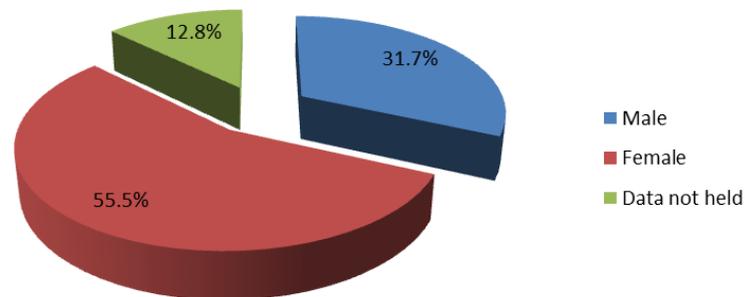
| | | |
|---|--|---|
| 3 | **What barriers, if any, exist to effective consultation with these groups and how will you overcome them? | As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout. |
|---|--|---|

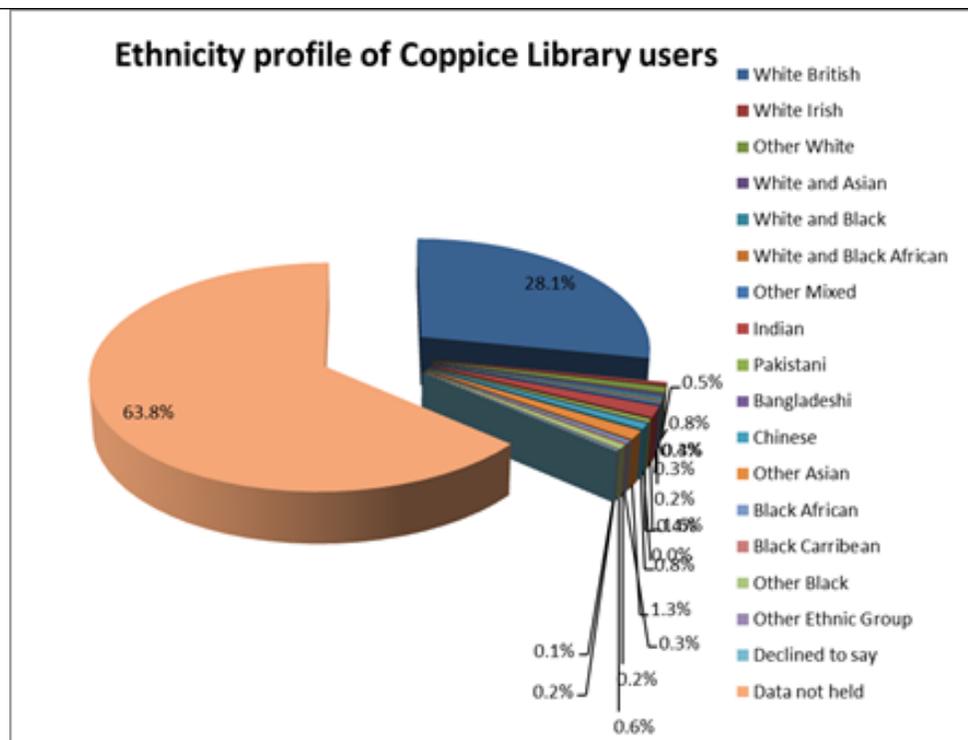
E – Equalities Data

Age Profile of Coppice Library Users



Gender profile of Coppice Library users





Four out of ten library users in the local area below 24 years old. Similarly three out of ten library users are people over the age of 55 years. Over half (56%) of library users are female. The majority of the library users identify themselves as White British. Coppice Library falls under the Sale Moor ward. Data based on disability benefits claimant highlights that 8.84% of people in the ward have declared a disability.

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

| | Positive | Negative (please specify if | Neutral | Reason |
|--|----------|-----------------------------|---------|--------|
| | | | | |

| | | High, Medium or Low) | | |
|---|--|-------------------------|---|--|
| Gender – both men and women, and transgender; | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Pregnant women & women on maternity leave | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Gender Reassignment | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Marriage & Civil Partnership | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. We have mitigated against the impacts in specific ways for those groups where the proposals will impact and in a general way for those where the information limited |
| Race - include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Disability – physical, sensory & mental impairments | | LOW | | <p>Detailed information relating to disabilities is not available from the data held on library customers.</p> <p>For the purpose of this EIA, 2011 census data relating to people in receipt of a disability related benefit (Disability Living Allowance, Incapacity Benefit and Attendance Allowance) has been used.</p> <p>Less than 10% of people that live in the wards where the libraries are located are in receipt of a disability related benefit.</p> <p>Coppice has a high number of Council enquiries.</p> |
| Age Group - specify eg; older, younger etc) | | ✓ Low | | Coppice has a high proportion of users who are under 24. |

| | | | | |
|---|--|--|---|--|
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Religious/Faith groups (specify) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |

As a result of completing the above what is the potential negative impact of your policy?

High **Medium** **Low** ✓

Page 89

| F. Could you minimise or remove any negative potential impact? If yes, explain how. | |
|--|---|
| Race: | N/A |
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | N/A |
| Disability: | We will ensure that this service is maintained by trained staff who will be retained at the library, supported by a Manager. blueSCI will work with the Council to ensure staff and volunteers receive training on the Five Ways to Wellbeing |
| Age: | Young people using Coppice Library We will ensure that the services they currently receive will continue and look to also expand using the experience of blueSCI |
| Sexual Orientation: | N/A |

| | | |
|------------------------------|--|-----|
| Religious/Faith groups: | | N/A |
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

Page 90

H. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|------------------------------|------------------------------------|------------|----------------------|----------------------|---------------------|----------|
| Complete public consultation | Review submissions from the public | March 2015 | The Campaign Company | | | |

| | | | | | | |
|------------------------------------|---|----------|--------------|---------------------|----------------------|--|
| Communicate to staff and customers | Timescales would be announced for the closure of Bowfell and Davyhulme | April 15 | Sarah Curran | Implementation Plan | Timescales announced | |
| Communicate to staff and customers | Continue to work with blueSCI to develop the proposal, ensuring the points in this EIA are included | April 15 | Sarah Curran | Implementation Plan | Timescales announced | |

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

| A. Summary Details | | |
|--------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Timperley Library |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |

| B. Policy or Function | | |
|-----------------------|---|--|
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | <p>Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services.</p> <p>This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.</p> <p>This EIA specifically relates to the implementation of a Community Hub at Coppice Library with a third sector partner.</p> |

| | | |
|---|--|--|
| | | <p>Separate EIAs have been carried out for other library proposals. These are detailed below:</p> <ul style="list-style-type: none"> • Introducing technology at Woodsend Library to facilitate a self-service access model for library users. • Redeveloping the Timperley and Hale Library sites. • Reducing the number of Library and back office staff • Reducing the book fund • Closing Bowfell, Davyhulme and Lostock Libraries • Withdrawing funding for the Toy Library Advisor at Delamere Toy Library <p>We can reduce costs by redeveloping libraries and the sites they occupy. This not only saves money but helps to further embed the libraries as part of the community over the long term and make them sustainable. We think that there is an opportunity at Timperley library to achieve this. Park Medical Practice has expressed an interest in acquiring and redeveloping Timperley Library and the adjoining Baker Street car park. The medical practice is keen to expand to provide an increasing range of services, providing the best health care for patients. The proposal will provide a community focussed facility comprising a new medical centre of c 8,000 sq. ft. linked to a new library of c 2,500 sq. ft. and 28 residential apartments. There would be 18 dedicated car spaces for the medical centre, 45 car spaces for the apartments and 25 car spaces for the library</p> |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | <p>Yes:</p> <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term; this has the potential to ensure secure employment for Council employees.</p> |

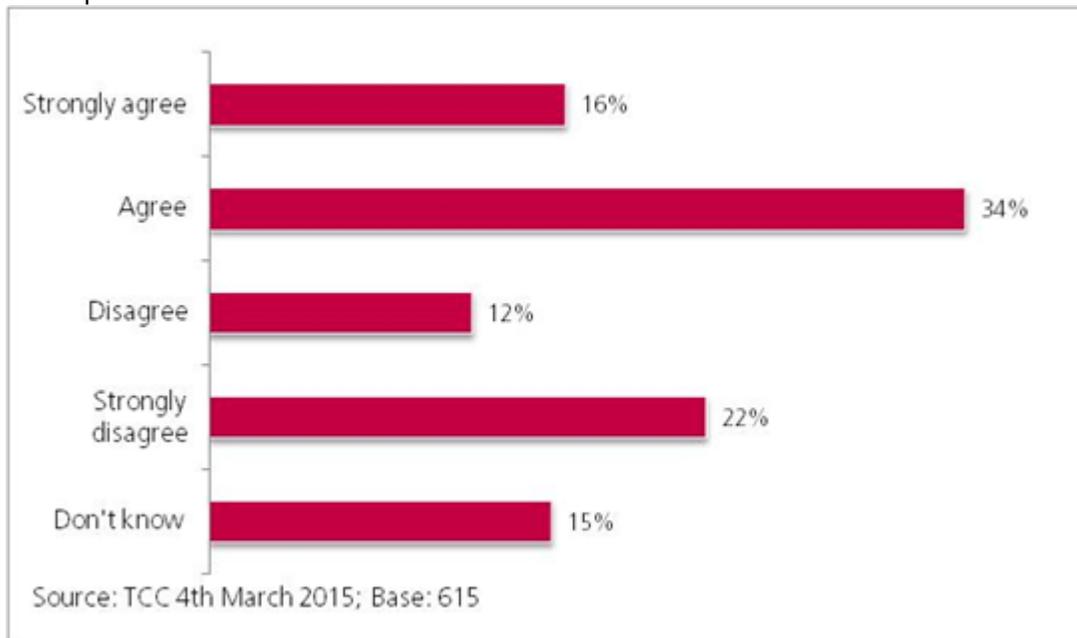
| | | |
|----|---|--|
| | | Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target. |
| 8 | How will the policy/function (or change/Improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The following activities in the implementation plan are currently underway:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback • Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend budget proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • Customers and staff will be notified of the outcome from the Executive meeting • A timescale will be drawn up to redevelop the site |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of Trafford Borough and library usage • Well established internal and external customer relationships <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state? | No |

C. Data Collection

| | | |
|---|--|---|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Ethnic Origin • Disability • Gender All information is displayed in section E below. |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

| D. Consultation & Involvement | | | | | | | | | | | | | | | | |
|---|--|--|------------------|--------|----------------|-----|---------------|-----|---------------|-----|---|----|-----------------------------|----|-----------|---|
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> | | | | | | | | | | | | | | |
| 2 | Please list any consultations planned, methods used and groups you plan to target. (If applicable) | <p>A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran from 16th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:</p> <ul style="list-style-type: none"> • A dedicated web page with information about the proposals • A booklet containing information about the proposals. This was made available at all libraries across the borough • A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet • An email address was made available for the public to submit their views on all of the proposals • Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback. <p>At the end of the consultation there had been the following responses:</p> <table border="1"> <thead> <tr> <th>Response channel</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Online surveys</td> <td>364</td> </tr> <tr> <td>Paper surveys</td> <td>326</td> </tr> <tr> <td>Comment cards</td> <td>189</td> </tr> <tr> <td>Letters (from individuals, including staff members)</td> <td>35</td> </tr> <tr> <td>Letters (from stakeholders)</td> <td>32</td> </tr> <tr> <td>Petitions</td> <td>2</td> </tr> </tbody> </table> <p>Do you agree with the proposal to develop Timperley's library to incorporate a GP surgery and a residential</p> | Response channel | Number | Online surveys | 364 | Paper surveys | 326 | Comment cards | 189 | Letters (from individuals, including staff members) | 35 | Letters (from stakeholders) | 32 | Petitions | 2 |
| Response channel | Number | | | | | | | | | | | | | | | |
| Online surveys | 364 | | | | | | | | | | | | | | | |
| Paper surveys | 326 | | | | | | | | | | | | | | | |
| Comment cards | 189 | | | | | | | | | | | | | | | |
| Letters (from individuals, including staff members) | 35 | | | | | | | | | | | | | | | |
| Letters (from stakeholders) | 32 | | | | | | | | | | | | | | | |
| Petitions | 2 | | | | | | | | | | | | | | | |

development?



The feedback from the 2nd phase of the public consultations has highlighted the positive and negative impacts of the proposal.

The positive impacts include the view that a new facility will attract more people and increase footfall in the library and that the move to modern facilities would be a beneficial move for the community with some respondents commenting that the new facility will provide a long term community asset.

A petition was received from Timperley Women's Civic Society containing 45 signatures supporting the proposal to redevelop the current library site

The negative impacts concerned the reduction in size of the library and the impact that it will have on frequently used services such as Rhymetime. There was also a concern on the availability of rooms for hire for local community groups.

Respondents persistently commented on the impact of the proposals on the volume of traffic in Timperley town centre and the lack of car parking. The current car park at the library is seen as busy and any

| | | |
|---|--|---|
| | | <p>additional car parking that is lost will have an impact on the ability of people to access the facility and the town generally</p> <p>We will mitigate these concerns by:</p> <ul style="list-style-type: none"> • Ensuring that there will be car parking specifically for library customers • providing additional staffing resource to support the library activities • Ensuring there is good communication with users on how the library service will change • Ensuring that there are adequately trained volunteers to support staff |
| 3 | **What barriers, if any, exist to effective consultation with these groups and how will you overcome them? | As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout. |

E – Equalities Data

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|---|----------|--|---------|---|
| Gender – both men and women, and transgender; | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Pregnant women & women on maternity leave | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Gender Reassignment | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Marriage & Civil Partnership | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. We have mitigated against the impacts in specific ways for those groups where the proposals will impact and in a general way for those where the information limited |
| Race - include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Disability – physical, sensory & mental impairments | | LOW | | Detailed information relating to disabilities is not available from the data held on library customers. For the purpose of this EIA, 2011 census data relating to people in receipt of a disability |

| | | | | |
|---|--|--------------|---|---|
| | | | | related benefit (Disability Living Allowance, Incapacity Benefit and Attendance Allowance) has been used. Less than 10% of people that live in these wards are in receipt of a disability related benefit. Timperley deals with blue badge applications. Car parking |
| Age Group - specify eg; older, younger etc) | | ✓ Low | | Timperley has a high proportion of users who are under 24. |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Religious/Faith groups (specify) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |

As a result of completing the above what is the potential negative impact of your policy?

High

Medium

Low ✓

F. Could you minimise or remove any negative potential impact? If yes, explain how.

| | |
|--|---|
| Race: | N/A |
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | N/A |
| Disability: | We will ensure that there are staff retained at the library to support blue badge applications. |

| | | |
|------------------------------|--|---|
| | | We will ensure that there will be car parking specifically for library customers and those with disabilities. |
| Age: | | Younger people We will ensure that staff and volunteers continue to provide storytimes and Rhymetimes for Under 5s |
| Sexual Orientation: | | N/A |
| Religious/Faith groups: | | N/A |
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

Page 101

I. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|----------------|--------------|------|---------------------|----------------------|---------------------|----------|
|----------------|--------------|------|---------------------|----------------------|---------------------|----------|

| | | | | | | |
|------------------------------------|---|-----------------|----------------------|---------------------|--|-----------|
| Complete public consultation | Review submissions from the public | March 2015 | The Campaign Company | | | Completed |
| Communicate to staff and customers | Timescales would be announced for the development of the site | May 15 onwards | Sarah Curran | Implementation Plan | Timescales announced | |
| Communicate to staff and customer | A detailed implementation plan will be developed | June 15 onwards | Sarah Curran | | Detailed Implementation Plan available | |

Page 102

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

| A. Summary Details | | |
|--------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Affected Staff |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |

| B. Policy or Function | | |
|-----------------------|---|--|
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | <p>Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services.</p> <p>This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation. This EIA specifically relates to the staff affected by these proposals. Separate EIAs have been carried out for each proposal detailed below:</p> <ul style="list-style-type: none"> • Implement Open + technology at Woodsend Library and reduce staffing at the site. • Implement a Community Hub at Coppice Library with a third sector partner, reducing staffing at the library • Redevelopment of Timperley Library site. Rebuild on the current site to provide a GP surgery and smaller integrated library and reduce staffing at the site. Advisors to provide Council services • Hale Library – consider the following three possible options: <ul style="list-style-type: none"> ○ sell the site and build a smaller library on the existing site with residential on the remainder ○ sell the site and build a permanent library within the Hale area at no cost to the council ○ sell the site and provide a temporary library until 2017 when the new Altrincham Library opens • Reduce the number of back office staff by 2 full time equivalents (FTE). This includes a reduction of 1 FTE Training and Systems Officer and 1FTE Performance Analyst • As a result of the above proposals the book fund will be reduced by £82,000. In addition it will be reduced by a further £23,000 across the remaining libraries. This will result in a total reduction of £105,000 |

| | | |
|---|--|--|
| | | <ul style="list-style-type: none"> • The closure of Bowfell, Davyhulme and Lostock Libraries • Withdraw funding for Toy Library Advisor from Delamere Toy Library <p>The impact of these proposed changes will result in an overall staffing reduction of 14.89 FTE posts across the library service. This equates to almost 25% of the current staff.</p> |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | Yes: <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term, this has the potential to ensure more secure employment for Council employees.</p> <p>Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target.</p> |
| 8 | How will the policy/function (or change/improvement), be implemented? | <p>Staff have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 20th February 2015.</p> <p>Due to the number of requests for voluntary redundancy received from staff, there is no longer the need to consider compulsory redundancies for Customer Service Advisors.</p> <p>However a redundancy selection matrix may need to be applied for other affected posts and staff selected using this process.</p> <p>The implementation plan is as follows:</p> <p>Consideration of feedback on proposals (20th February 2015 onwards)</p> <ul style="list-style-type: none"> • Consider feedback from staff and trade unions • Consider voluntary options • Review proposals in light of feedback • Prepare outcome of consultation report |

| | | |
|----|--|---|
| | | <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback • Prepare outcome of consultation report <p>16th March</p> <ul style="list-style-type: none"> • Head of Customer Service to formally brief TUs on the outcome of consultation • Managers to brief staff at a local level on the proposals which will be submitted to the Executive for approval <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • Head of Customer Service to brief TUs on the formal outcome of consultation • Managers to brief staff and commence implementation strategy • Hold individual meetings with those staff who requested redundancy and inform them if their requests have been accepted • Meet with any staff identified as redundant as part of the redundancy selection matrix • Ensure robust support processes are in place for displaced staff (e.g. outplacement and redeployment support, time off to seek alternative employment, etc.) |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of the Trafford Borough and library usage • Well established internal and external customer relationships <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or | No |

| | |
|------------------------------------|--|
| organisation? If so, please state? | |
|------------------------------------|--|

| C. Data Collection | | |
|--------------------|--|--|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | HR equalities data – analysed for all staff directly affected and also all staff working within Access Trafford that are indirectly affected. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Religion • Sexual Orientation • Ethnic Origin • Disability • Gender <p>There is currently a significant proportion of staff where information regarding different equality groups is not known. However the information that is shown within Section E, is from the data available as at 5 February 2015.</p> |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

| D. Communication & Involvement | | |
|---|---|---|
| 1 | Are you using information from any previous communications/consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> |
| 2 | Please list communications planned, methods used and groups you plan to target. | <p>Consultation sessions were held with all directly and indirectly affected staff as follows;</p> <ul style="list-style-type: none"> • An initial briefing with staff and trade unions on the budget proposals; • Service/team level meetings with staff and trade union officials, with the facility for staff and trade unions to provide verbal, written and electronic feedback on service specific proposals; • Individual meetings with affected staff and the relevant trade union representative (where appropriate), with the facility for staff to provide verbal, written and electronic feedback on the proposals • Two group meetings, which all staff could attend, took place, one at Altrincham Library and one at Urmston Library |
| 3 | **What barriers, if any, exist to effective communication with these groups and how will you overcome them? | <p>As the service is a front line service it is difficult to get all staff together in one place during core hours. This has been mitigated by holding a number of consultation sessions for staff at different locations outside of normal working hours as detailed above.</p> <p>Staff without access to the intranet or email have been issued with printed versions of the consultation document.</p> <p>Feedback has been submitted via paper based methods, electronically and face to face with managers.</p> |

E. Equalities Profile

Profile of staff in scope directly affected

Profile of staff within wider Access Trafford service

F: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

Page 108

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|---|----------|--|---------|---|
| Gender – both men and women, and transgender; | | | ✓ | <p>The staff affected are made up of 17.1% male and 82.9% female. This is almost the same split as staff within the wider service.</p> <p>The disestablished roles are ring-fenced to existing staff members which presents an equal opportunity for appointment regardless of gender.</p> <p>As in previous restructures all staff will be asked to provide 3 preferred working locations.</p> |
| Pregnant women & women on maternity leave | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact. |

| | | | | |
|--|--|--------------|---|--|
| | | | | Currently there is one member of staff who is pregnant, however they are a Customer Service Advisor and as such will not be subject to redundancy selection. |
| Gender Reassignment | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Marriage & Civil Partnership | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Race- include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact based on ethnic origin. Again, the directly affected group make-up is relatively in line with the wider service. |
| Disability – physical, sensory & mental impairments | | ✓ Low | | The data available highlights that there are relatively low numbers of disabled staff (9%) in the Service that are directly affected. Consideration will need to be made around where these staff will be located in the new structure. Ensuring access requirements are addressed as required and any reasonable adjustments made. |
| Age Group - specify eg; older, younger etc) | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact on staff based on their age. Nearly 65% of the affective staff are over 45. This again is in line with the make-up of the wider service. |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Religious/Faith groups (specify) | | | ✓ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |

| | | | | |
|--|--|--|--|---|
| | | | | As in previous restructures all staff will be asked to provide 3 preferred working locations. |
|--|--|--|--|---|

* In line with best practice, if certain equality groups contain a small number of people they are rounded together so as not to potentially identify individuals.

As a result of completing the above what is the potential negative impact of your policy?

High Medium Low

Page 110

| G. Could you minimise or remove any negative potential impact? If yes, explain how. | | |
|--|--|---|
| Race: | | N/A |
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | | N/A |
| Disability: | | All Trafford libraries are compliant with access requirements under the Equality Act. As part of the implementation of the new structure all staff will be asked their preference of working location. Reasonable adjustments will be made where appropriate. This should help mitigate any risk of negative impact in this area. |
| Age: | | N/A |
| Sexual Orientation: | | N/A |
| Religious/Faith groups: | | N/A |
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

J. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|---|--|--------------------------|---------------------|--|---------------------|-----------|
| Complete staff consultation | Review submissions from staff | January 15 – February 15 | Sarah Curran | | | Completed |
| Prepare consultation report | Include staff feedback | February 15 | Sarah Curran | Implementation plan | | |
| Communicate final decisions to staff | Inform of timescales for implementation | March 15 | Sarah Curran | Implementation plan | | |
| Interview staff for ring-fenced positions | | March 15 | Sarah Curran | Implementation plan | | |
| Reduce headcount across the service | Redundancy process. Redeployment register. | March 15 | Sarah Curran | Implementation plan. Redundancy process. Redeployment process. | | |

Page 14

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

| A. Summary Details | | |
|--------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Proposed closure of Bowfell and Davyhulme Libraries |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |

| | | |
|---|--|--|
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |

B. Policy or Function

| | | |
|---|---|---|
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | <p>Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services.</p> <p>This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.</p> <p>This EIA specifically relates to the proposed closure of Bowfell and Davyhulme libraries.</p> <p>Separate EIAs have been carried out for each proposal detailed below:</p> <ul style="list-style-type: none"> • Implement Open + technology at Woodsend Library and reduce staffing at the site. |

| | | |
|---|--|--|
| | | <ul style="list-style-type: none"> • Implement a Community Hub at Coppice Library with a third sector partner, reducing staffing at the library • Redevelopment of Timperley Library site. Rebuild on the current site to provide a GP surgery and smaller integrated library and reduce staffing at the site. Advisors to provide Council services • Hale Library – consider the following three possible options: <ul style="list-style-type: none"> ○ sell the site and build a smaller library on the existing site with residential on the remainder ○ sell the site and build a permanent library within the Hale area at no cost to the council ○ sell the site and provide a temporary library until 2017 when the new Altrincham Library opens • Reduce the number of back office staff by 2 full time equivalents (FTE). This includes a reduction of 1 FTE Training and Systems Officer and 1FTE Performance Analyst • As a result of the above proposals the book fund will be reduced by £82,000. In addition it will be reduced by a further £23,000 across the remaining libraries. This will result in a total reduction of £105,000 • The closure of Bowfell, Davyhulme and Lostock Libraries • Withdraw funding for Toy Library Advisor from Delamere Toy Library |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | Yes: <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term, this has the potential to ensure secure employment for Council employees.</p> |

| | | |
|----|---|--|
| | | Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target. |
| 8 | How will the policy/function (or change/Improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The implementation plan is as follows:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback • Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend budget proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • Customers will be notified of the outcome from the Executive meeting • Timescales would be announced for the closure of Bowfell and Davyhulme • Any customers wishing to use the Home library Service or Talking Books Service would be referred to those services • Extra Storytimes and Rhymetimes would commence at Urmston Library |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of Trafford Borough and library usage • Well established internal and external customer relationships <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another | No |

| | | |
|--|---|--|
| | department or authority or organisation? If so, please state? | |
|--|---|--|

C. Data Collection

| | | |
|---|--|---|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Ethnic Origin • Disability • Gender • Number of books loaned per Library • Number of people who use another library All information is displayed in section E below. |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

D. Consultation & Involvement

| | | |
|---|--|---|
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> |
| 2 | Please list any consultations | A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran |

planned, methods used and groups you plan to target. (If applicable)

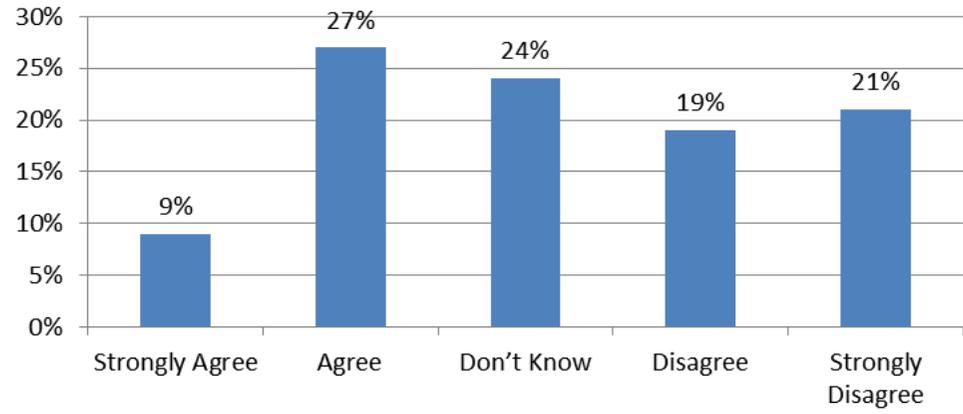
from 19th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:

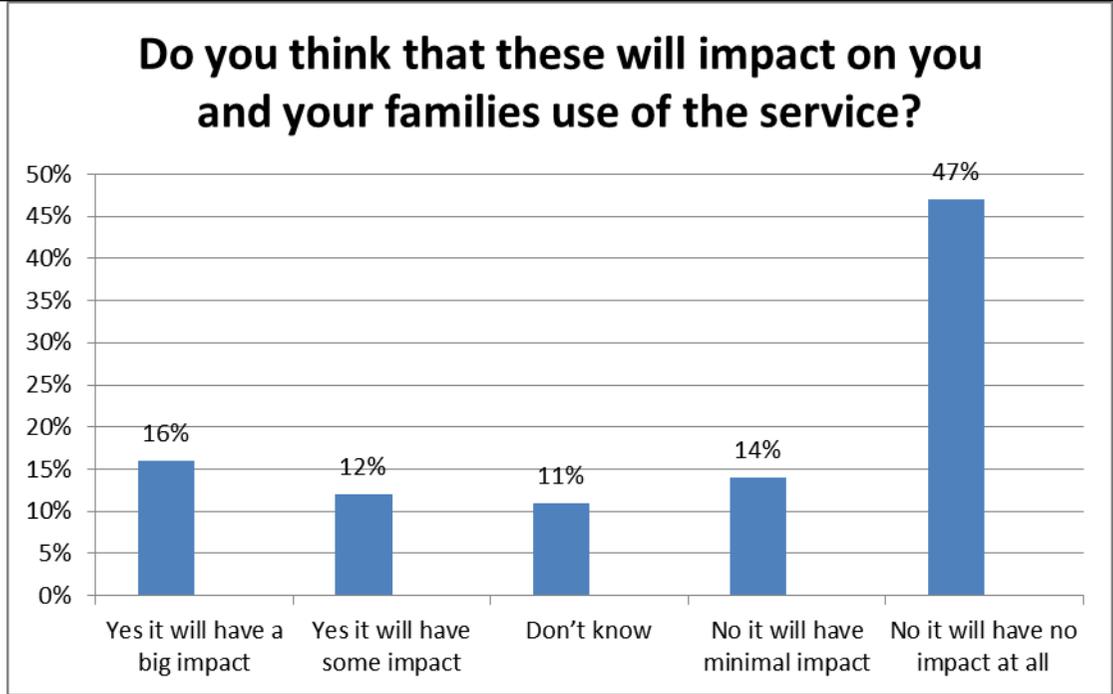
- A dedicated web page with information about the proposals
- A booklet containing information about the proposals. This was made available at all libraries across the borough
- A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet
- An email address was made available for the public to submit their views on all of the proposals
- Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback.
- The public consultation sessions were held on different days of the week, including at the weekend and at different times of the day. This enabled all sections of the community to engage.
- The total number of people who attended the public meetings was 308
- The number of responses to the consultation was 948 as detailed below

| Response channel | Number |
|---|--------|
| Online surveys | 364 |
| Paper surveys | 326 |
| Comment cards | 189 |
| Letters (from individuals, including staff members) | 35 |
| Letters (from stakeholders) | 32 |
| Petitions | 2 |

Responses to the questions around closing libraries were as follows:

Do you agree with the proposed closure of these three library sites?





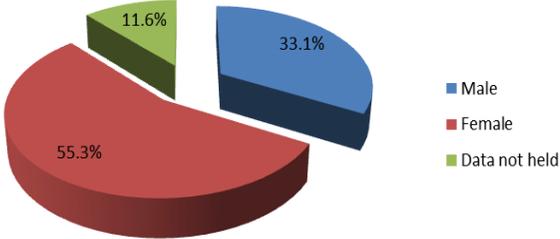
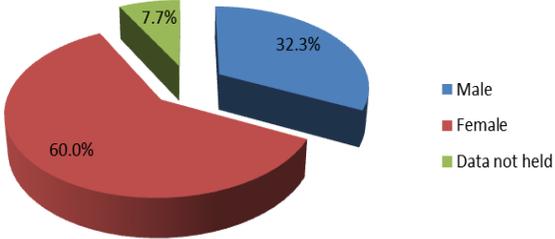
3 ****What barriers, if any, exist to effective consultation with these groups and how will you overcome them?**

As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout.

E – Equalities Data

Page 121

| <p style="text-align: center;">Bowfell</p> <table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>24 or below</td> <td>50.9%</td> </tr> <tr> <td>25-34</td> <td>3.9%</td> </tr> <tr> <td>35-44</td> <td>12.6%</td> </tr> <tr> <td>45-54</td> <td>9.7%</td> </tr> <tr> <td>55-64</td> <td>6.9%</td> </tr> <tr> <td>65-74</td> <td>8.0%</td> </tr> <tr> <td>75+</td> <td>6.9%</td> </tr> <tr> <td>Data not held</td> <td>1.2%</td> </tr> </tbody> </table> | Age Group | Percentage | 24 or below | 50.9% | 25-34 | 3.9% | 35-44 | 12.6% | 45-54 | 9.7% | 55-64 | 6.9% | 65-74 | 8.0% | 75+ | 6.9% | Data not held | 1.2% | | <p style="text-align: center;">Davyhulme</p> <table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>5 and under</td> <td>14.9%</td> </tr> <tr> <td>6 to 15</td> <td>21.0%</td> </tr> <tr> <td>16 to 59</td> <td>31.0%</td> </tr> <tr> <td>60 and over</td> <td>31.8%</td> </tr> <tr> <td>Data not held</td> <td>1.2%</td> </tr> </tbody> </table> | Age Group | Percentage | 5 and under | 14.9% | 6 to 15 | 21.0% | 16 to 59 | 31.0% | 60 and over | 31.8% | Data not held | 1.2% | | | | | | | |
|--|--------------|---|---------------|-------|-------------|-------|-------------|-------|-------------|------|--------|------|-------------|------|--------------------|------|---------------|------|--|---|--------------|------------|---------------|-------|-------------|-------|-------------|-------|-------------|-------|---------------|------|---------------|------|--------------------|------|---------------|------|--|
| Age Group | Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 or below | 50.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25-34 | 3.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 35-44 | 12.6% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 45-54 | 9.7% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 55-64 | 6.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 65-74 | 8.0% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 75+ | 6.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Data not held | 1.2% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Age Group | Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 and under | 14.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 to 15 | 21.0% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 to 59 | 31.0% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 60 and over | 31.8% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Data not held | 1.2% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p style="text-align: center;">Bowfell</p> <table border="1"> <thead> <tr> <th>Ethnic Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>White British</td> <td>41.7%</td> </tr> <tr> <td>White Irish</td> <td>53.3%</td> </tr> <tr> <td>Other White</td> <td>0.3%</td> </tr> <tr> <td>Other Mixed</td> <td>1.3%</td> </tr> <tr> <td>Indian</td> <td>0.8%</td> </tr> <tr> <td>Other Asian</td> <td>0.8%</td> </tr> <tr> <td>Other Ethnic Group</td> <td>0.8%</td> </tr> <tr> <td>Data not held</td> <td>0.9%</td> </tr> </tbody> </table> | Ethnic Group | Percentage | White British | 41.7% | White Irish | 53.3% | Other White | 0.3% | Other Mixed | 1.3% | Indian | 0.8% | Other Asian | 0.8% | Other Ethnic Group | 0.8% | Data not held | 0.9% | | <p style="text-align: center;">Davyhulme</p> <table border="1"> <thead> <tr> <th>Ethnic Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>White British</td> <td>43.2%</td> </tr> <tr> <td>White Irish</td> <td>51.9%</td> </tr> <tr> <td>Other White</td> <td>0.6%</td> </tr> <tr> <td>Other Mixed</td> <td>0.4%</td> </tr> <tr> <td>Other Asian</td> <td>1.1%</td> </tr> <tr> <td>Black African</td> <td>1.1%</td> </tr> <tr> <td>Other Ethnic Group</td> <td>1.0%</td> </tr> <tr> <td>Data not held</td> <td>0.6%</td> </tr> </tbody> </table> | Ethnic Group | Percentage | White British | 43.2% | White Irish | 51.9% | Other White | 0.6% | Other Mixed | 0.4% | Other Asian | 1.1% | Black African | 1.1% | Other Ethnic Group | 1.0% | Data not held | 0.6% | |
| Ethnic Group | Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White British | 41.7% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White Irish | 53.3% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other White | 0.3% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Mixed | 1.3% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indian | 0.8% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Asian | 0.8% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Ethnic Group | 0.8% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Data not held | 0.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ethnic Group | Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White British | 43.2% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White Irish | 51.9% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other White | 0.6% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Mixed | 0.4% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Asian | 1.1% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Black African | 1.1% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Ethnic Group | 1.0% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Data not held | 0.6% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p style="text-align: center;">Bowfell</p> <p>Flixton Ward data – 9.42%</p> | | <p style="text-align: center;">Davyhulme</p> <p>Davyhulme West Ward data – 9.34%</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| <p style="text-align: center;">Bowfell</p>  <table border="1"> <thead> <tr> <th>Gender</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td>33.1%</td> </tr> <tr> <td>Female</td> <td>55.3%</td> </tr> <tr> <td>Data not held</td> <td>11.6%</td> </tr> </tbody> </table> | Gender | Percentage | Male | 33.1% | Female | 55.3% | Data not held | 11.6% | <p style="text-align: center;">Davyhulme</p>  <table border="1"> <thead> <tr> <th>Gender</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td>32.3%</td> </tr> <tr> <td>Female</td> <td>60.0%</td> </tr> <tr> <td>Data not held</td> <td>7.7%</td> </tr> </tbody> </table> | Gender | Percentage | Male | 32.3% | Female | 60.0% | Data not held | 7.7% |
|---|---|------------|------|-------|--------|-------|---------------|-------|--|--------|------------|------|-------|--------|-------|---------------|------|
| Gender | Percentage | | | | | | | | | | | | | | | | |
| Male | 33.1% | | | | | | | | | | | | | | | | |
| Female | 55.3% | | | | | | | | | | | | | | | | |
| Data not held | 11.6% | | | | | | | | | | | | | | | | |
| Gender | Percentage | | | | | | | | | | | | | | | | |
| Male | 32.3% | | | | | | | | | | | | | | | | |
| Female | 60.0% | | | | | | | | | | | | | | | | |
| Data not held | 7.7% | | | | | | | | | | | | | | | | |
| Library Stats | | | | | | | | | | | | | | | | | |
| <p style="text-align: center;">Bowfell</p> <p>Number of 'active' customers in the last 12 months* – 741</p> <p>% of borrowers who use another Trafford library – 88%</p> | <p style="text-align: center;">Davyhulme</p> <p>Number of 'active' customers in the last 12 months* – 803</p> <p>% of borrowers who use another Trafford library – 75%</p> | | | | | | | | | | | | | | | | |

**Active customers are defined as those who have borrowed at least 1 item during the last 12 months*

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

Page 123

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|---|-----------------|---|----------------|--|
| Gender – both men and women, and transgender; | | | √ | |
| Pregnant women & women on maternity leave | | Low | | Customers would need to travel to Urmston for their nearest library if Bowfell and Davyhulme libraries close. Urmston is located on the first floor, above Sainsbury's supermarket. |
| Gender Reassignment | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Marriage & Civil Partnership | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Race - include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Disability – physical, sensory & mental impairments | | Low | | Detailed information relating to disability is not available from the data held on library customers. For the purpose of this EIA, 2011 census data relating to people in receipt of a disability related benefit (Disability Living Allowance, Incapacity Benefit |

| | | | | |
|---|--|------------|---|---|
| | | | | and Attendance Allowance) has been used. Less than 10% of people that live in the wards where the libraries are located are in receipt of a disability related benefit. Customers would need to travel to Urmston for their nearest library if Bowfell and Davyhulme libraries close. Urmston is located on the first floor, above Sainsbury's supermarket. |
| Age Group - specify eg; older, younger etc) | | Low | | Customers would need to travel to Urmston for their nearest library if Bowfell and Davyhulme libraries close. Urmston is located on the first floor, above Sainsbury's supermarket. |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Religious/Faith groups (specify) | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |

As a result of completing the above what is the potential negative impact of your policy?

High Medium Low

| | |
|--|-----|
| F. Could you minimise or remove any negative potential impact? If yes, explain how. | |
| Race: | N/A |

| | |
|---|---|
| <p>Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership</p> | <p>Bowfell – Of those customers where data is available, 55% of customers using Bowfell are women and 33% men. This is reflected across the library service generally.</p> <p>Davyhulme – Of those customers where data is available, 60% of customers using Davyhulme are women and 32% men. This is reflected across the library service generally. Urmston Library is within 10 minutes of both Bowfell and Davyhulme Libraries and has ample ground floor free parking at the adjacent Sainsbury's supermarket. Urmston Library is also on several bus routes.</p> <p>Feedback from the first consultation showed that 41% of people thought 10 minutes was an acceptable travelling time to another library. Both Bowfell and Davyhulme are within this time frame from Urmston Library.</p> <p>80% of Bowfell customers already use another library and 71% of Davyhulme so people are already making use of other libraries. There are currently Storytimes and Rhymetimes at Davyhulme Library on Tuesday and Friday mornings. Plans are in place to hold extra Storytimes and Rhymetimes at Urmston Library on the same days. Urmston Library also hosts Chatterbooks Reading groups for 7-11 year olds so children will be able to transfer from the Davyhulme group. Lifts and escalators are available at Urmston Library therefore access will not be negatively impacted.</p> |
| <p>Disability:</p> | <p>Lifts and escalators are available at Urmston Library therefore access will not be negatively impacted. Urmston Library is within 10 minutes of both Bowfell and Davyhulme Libraries and has ample ground floor free parking at the adjacent Sainsbury's supermarket. Feedback from the first consultation showed that 41% of people thought 10 minutes was an acceptable travelling time to another library. Both Bowfell and Davyhulme are within this time frame from Urmston Library.</p> <p>If customers find it difficult to access Urmston Library then the Home Library Service can be offered to them. This service delivers books to people in their own homes.</p> <p>In addition the Talking Book Service is available to those with a visual impairment. Talking books are posted free of charge to customers' homes.</p> <p>Customers can also access online resources including the ability to renew and reserve</p> |

| | |
|-------------------------|---|
| | books and download e-books and e-audio books. |
| Age: | <p>Older People Where data is available it shows that 15% of customers using Bowfell are over 60. For Davyhulme the figure is 32%. Urmston Library is within 10 minutes of both Bowfell and Davyhulme Libraries and has ample ground floor free parking at the adjacent Sainsbury's supermarket. Urmston Library is also on several bus routes.</p> <p>Feedback from the first consultation showed that 41% of people thought 10 minutes was an acceptable travelling time to another library. Both Bowfell and Davyhulme are within this time frame from Urmston Library.</p> <p>If customers find it difficult to access Urmston Library then the Home Library Service can be offered to them. This service delivers books to people in their own homes.</p> <p>In addition, customers can access online resources including the ability to renew and reserve books and download e-books and e-audio books.</p> <p>There are several reading groups at Urmston that members of the Davyhulme reading group can transfer to. These take place during the day and in the evening. Urmston also holds a Knitting and sewing group, coffee mornings, a Writing Group.</p> <p>Urmston is open for 2 late nights during the week and all day on Saturday so customers will be able to access the library for longer than is the case at Davyhulme.</p> <p>Bowfell, located in Urmston Leisure Centre, is open in the evenings and all weekend. However no library staff are based therefore no access to the council enquiry service or additional library activities is available.</p> <p>Younger People 15% of Davyhulme customers are under 5. As mentioned above, extra Storytimes and Rhymetimes will be held at Urmston on the same days that they take place at Davyhulme.</p> |
| Sexual Orientation: | N/A |
| Religious/Faith groups: | N/A |

| Also consider the following: | | |
|------------------------------|--|-----|
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

K. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|--------------------------|---|----------|---------------------|----------------------|----------------------|----------|
| Communicate to customers | Customers will be notified of the outcome from the Executive meeting | March 15 | Sarah Curran | Implementation Plan | Customers notified | |
| Communicate to customers | Timescales will be announced for the closure of Bowfell and Davyhulme | April 15 | Sarah Curran | Implementation Plan | Timescales announced | |

| | | | | | | |
|--------------------------|---|----------|--------------|---------------------|---|--|
| Communicate to customers | Any customers wishing to use the Home library Service or Talking Books Service will be referred | April 15 | Sarah Curran | Implementation Plan | Age UK notified for those wishing to use the Home Library Service | |
| Communicate to customers | Extra Storytimes and Rhymetimes to commence at Urmston Library | April 15 | Sarah Curran | Implementation Plan | Extra activities start | |
| Communicate to customers | Closure of Bowfell | April 15 | Sarah Curran | Implementation Plan | Library closed | |
| Communicate to customers | Closure of Davyhulme | May 15 | Sarah Curran | Implementation Plan | Library closed | |

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

| A. Summary Details | | |
|-----------------------|--|--|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Lostock Library |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |
| B. Policy or Function | | |
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services. This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to |

| | | |
|---|---|---|
| | | <p>identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.</p> <p>This EIA specifically relates to the proposed closure of Bowfell and Davyhulme libraries.</p> <p>Separate EIAs have been carried out for each proposal detailed below:</p> <ul style="list-style-type: none"> • Implement Open + technology at Woodsend Library and reduce staffing at the site. • Implement a Community Hub at Coppice Library with a third sector partner, reducing staffing at the library • Redevelopment of Timperley Library site. Rebuild on the current site to provide a GP surgery and smaller integrated library and reduce staffing at the site. Advisors to provide Council services • Hale Library – consider the following three possible options: <ul style="list-style-type: none"> ○ sell the site and build a smaller library on the existing site with residential on the remainder ○ sell the site and build a permanent library within the Hale area at no cost to the council ○ sell the site and provide a temporary library until 2017 when the new Altrincham Library opens • Reduce the number of back office staff by 2 full time equivalents (FTE). This includes a reduction of 1 FTE Training and Systems Officer and 1FTE Performance Analyst • As a result of the above proposals the book fund will be reduced by £82,000. In addition it will be reduced by a further £23,000 across the remaining libraries. This will result in a total reduction of £105,000 • The closure of Bowfell, Davyhulme and Lostock Libraries • Withdraw funding for Toy Library Advisor from Delamere Toy Library |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | <p>Yes:</p> <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |

| | | |
|---|--|---|
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term, this has the potential to ensure secure employment for Council employees.</p> <p>Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target.</p> |
| 8 | How will the policy/function (or change/Improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The implementation plan is as follows:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback • Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • Customers will be notified of the outcome from the Executive meeting • Timescales would be announced for the transfer of Lostock Library to the College • Changes made to the building to allow Open + technology |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of Trafford Borough and library usage • Well established internal and external customer relationships |

| | | |
|----|---|---|
| | | <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state? | No |

C. Data Collection

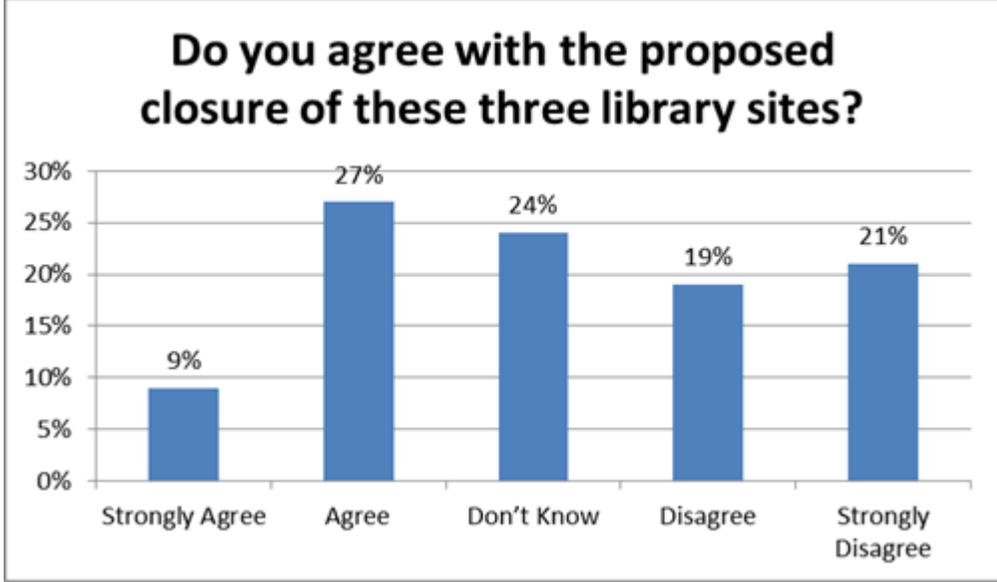
| | | |
|---|--|--|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
| 2 | Please specify monitoring information you have available and attach relevant information* | <ul style="list-style-type: none"> • Age Profile • Ethnic Origin • Disability • Gender • Number of books loaned per Library • Number of people who use another library <p>All information is displayed in section E below.</p> |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

D. Consultation & Involvement

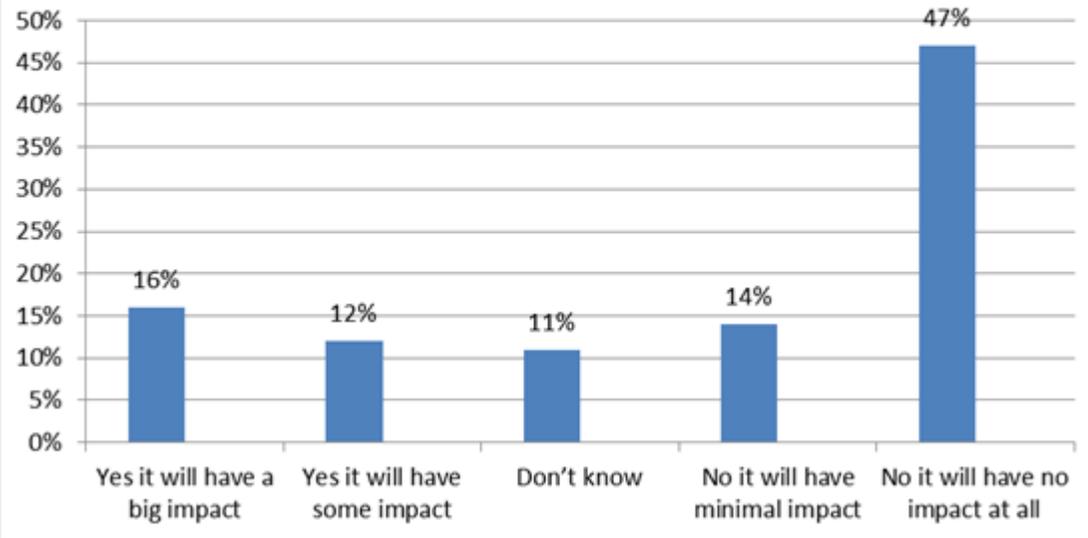
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November and December 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> | | | | | | | | | | |
|---|--|--|------------------|--------|----------------|-----|---------------|-----|---------------|-----|---|----|
| 2 | Please list any consultations planned, methods used and groups you plan to target. (If applicable) | <p>A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran from 19th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:</p> <ul style="list-style-type: none"> • A dedicated web page with information about the proposals • A booklet containing information about the proposals. This was made available at all libraries across the borough • A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet • An email address was made available for the public to submit their views on all of the proposals • Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback. • The public consultation sessions were held on different days of the week, including at the weekend and at different times of the day. This enabled all sections of the community to engage. • The total number of people who attended the public meetings was 308 • The number of responses to the consultation was 948 as detailed below <table border="1" data-bbox="864 1086 2136 1350"> <thead> <tr> <th>Response channel</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Online surveys</td> <td>364</td> </tr> <tr> <td>Paper surveys</td> <td>326</td> </tr> <tr> <td>Comment cards</td> <td>189</td> </tr> <tr> <td>Letters (from individuals, including staff members)</td> <td>35</td> </tr> </tbody> </table> | Response channel | Number | Online surveys | 364 | Paper surveys | 326 | Comment cards | 189 | Letters (from individuals, including staff members) | 35 |
| Response channel | Number | | | | | | | | | | | |
| Online surveys | 364 | | | | | | | | | | | |
| Paper surveys | 326 | | | | | | | | | | | |
| Comment cards | 189 | | | | | | | | | | | |
| Letters (from individuals, including staff members) | 35 | | | | | | | | | | | |

| | |
|-----------------------------|----|
| Letters (from stakeholders) | 32 |
| Petitions | 2 |

Responses to the question around closing libraries were as follows;



Do you think that these will impact on you and your families use of the service?



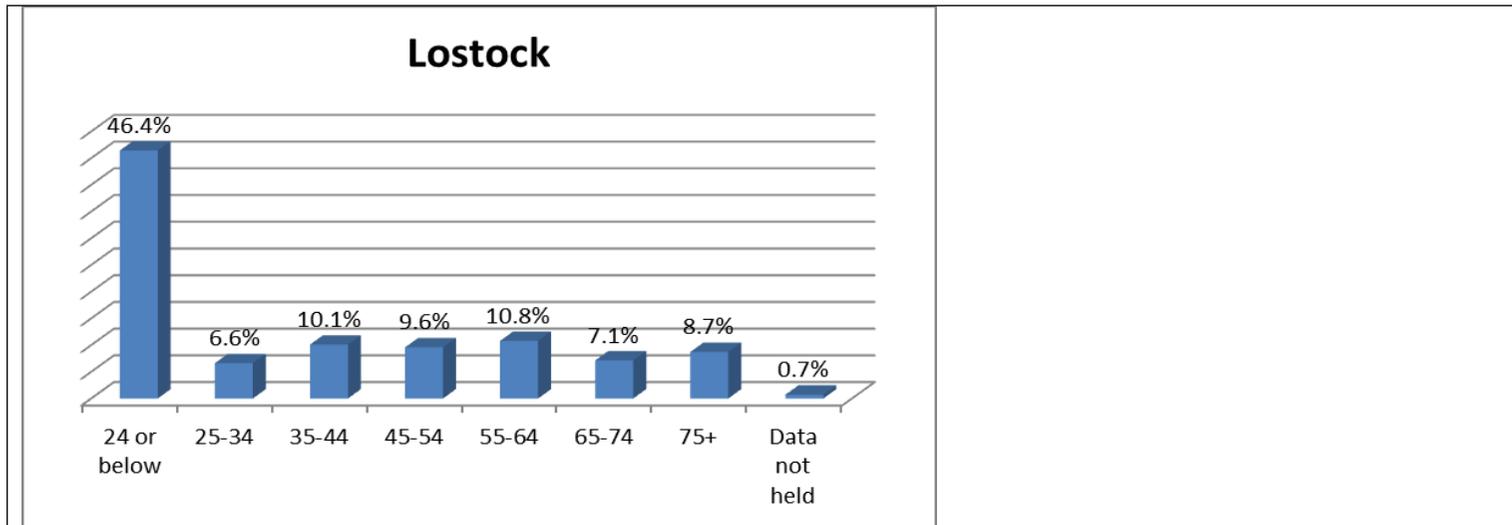
The original proposal around Lostock Library was closure. However during the second stage of consultation an approach was made by Lostock College which would enable the library to remain open. The College intend to take on the running of the library, primarily as a school library but also maintaining access for the community to use. The College will provide a member of staff who will be on hand to assist people with library related queries and to signpost customers who may have Council enquires to either Urmston or Stretford Libraries which are both under two miles away. As only 87 council enquiries were dealt with in 2014/15 this should not unduly inconvenience existing customers.

Customers will still be able to access the library for books and as a meeting place for the community groups that currently use the library. The Council will ensure that all book stock, fixtures and furnishings will be retained in the library for the College to use. This will include the self-service machine that customer can use to issue, return and renew books. It will also include the People's Network computers so customers can still access the internet.

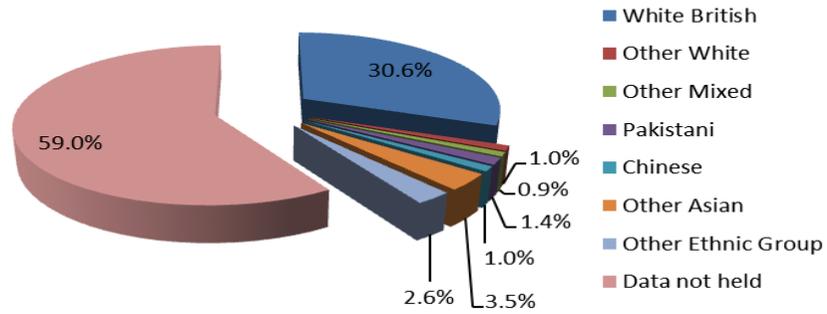
There will be changes to the hours when staff are present. The library will have a member of Lostock

| | | |
|---|--|---|
| | | College staff available during term time but in school holidays the library will be unstaffed. However, the Open + technology can be installed so that customers can still access the library during these periods. If the recommendation is approved, work will continue with the College to ensure a smooth transition. |
| 3 | **What barriers, if any, exist to effective consultation with these groups and how will you overcome them? | As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout. |

E – Equalities Data



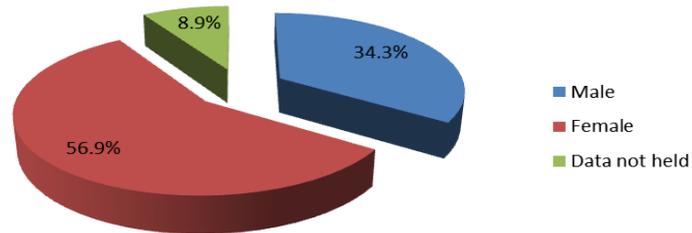
Lostock



Lostock

Davyhulme East data – 8.48%

Lostock



Lostock

Number of 'active' customers in the last 12 months* – 575

% of borrowers who use another Trafford library – 51%

*Active customers are defined as those who have borrowed at least 1 item during the last 12 months

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

Page 138

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|---|-----------------|---|----------------|--|
| Gender – both men and women, and transgender; | | | √ | |
| Pregnant women & women on maternity leave | | Low | | Customers will still be able to access Lostock Library. If customers needed to access the Council enquiry service they could phone the Contact Centre or would need to travel to Urmston or Stretford Libraries. |
| Gender Reassignment | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Marriage & Civil Partnership | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Race - include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | √ | It is not expected that the proposed changes will have a negative or positive impact upon the equality target group. |
| Disability – physical, sensory & mental | | Low | | Detailed information relating to disability is not available from the data held on library customers. For the purpose of this EIA, 2011 census data |

| | | | | |
|---|--|------------|---|---|
| impairments | | | | <p>relating to people in receipt of a disability related benefit (Disability Living Allowance, Incapacity Benefit and Attendance Allowance) has been used. Less than 10% of people that live in the wards where the libraries are located are in receipt of a disability related benefit.</p> <p>Customers will still be able to access Lostock Library. If disabled customers needed to access the Council enquiry service they could phone or email the Contact Centre or would need to travel to Urmston or Stretford Libraries.</p> |
| Age Group - specify e.g. older, younger etc.) | | Low | | <p>Customers will still be able to access Lostock Library. If customers needed to access the Council enquiry service they could phone the Contact Centre or travel to Urmston or Stretford Libraries.</p> |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | √ | <p>It is not expected that the proposed changes will have a negative or positive impact upon the equality target group.</p> |
| Religious/Faith groups (specify) | | | √ | <p>It is not expected that the proposed changes will have a negative or positive impact upon the equality target group.</p> |

As a result of completing the above what is the potential negative impact of your policy?

High

Medium

Low

F. Could you minimise or remove any negative potential impact? If yes, explain how.

| | |
|--|--|
| Race: | N/A |
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | <p>Of those customers where we have data available, 57% of customers using Bowfell are women and 34% men. This is reflected across the library service generally.</p> <p>If customers needed to access the Council enquiry service they could phone the Contact Centre Centre or could travel to Urmston or Stretford Libraries, both less than 2 miles away. As only 87 council enquiries were dealt with in 2014/15 this should not unduly inconvenience existing customers.</p> <p>Feedback from the first consultation showed that 41% of people thought 10 minutes was an acceptable travelling time to another library. Both Urmston and Stretford are within this time frame from Lostock Library. Urmston is located on the first floor, above Sainsbury's supermarket. Stretford is located opposite Stretford Mall. There is ample ground floor free parking in Urmston at the adjacent Sainsbury's supermarket. Stretford Library is located on the ground floor and has on-street parking available in the vicinity of the library.</p> <p>There are currently Storytimes on Thursday afternoons at Lostock Library for under 5s. It is envisaged that these can continue being offered with Lostock College staff and/or Volunteers running the sessions.</p> |
| Disability: | <p>In some circumstances Lostock customers might need to travel to Urmston or Stretford libraries. Lifts and escalators are available at Urmston Library therefore suitable access is available. There is also ample ground floor free parking at the adjacent Sainsbury's supermarket.</p> <p>Stretford Library is located on the ground floor and has disabled parking available immediately outside the library.</p> <p>Customers can also access online resources including the ability to renew and reserve books and download e-books and e-audio books.</p> |
| Age: | <p>Older People Where data is available it shows that 16% of customers using Lostock Library are over</p> |

| | | |
|------------------------------|--|--|
| | | 60. There are various craft activities that take place at Lostock Library and the College have given assurance that these groups will be able to continue to meet in the library. Council surgeries take place in the library on a Thursday afternoon. The Head of Customer Service will liaise with the local councillors to ensure they can still access the library to hold their sessions. Younger People As mentioned above, Storytimes will continue to be held at Lostock. |
| Sexual Orientation: | | N/A |
| Religious/Faith groups: | | N/A |
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

L. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|----------------|--------------|------|---------------------|----------------------|---------------------|----------|
| | | | | | | |

| | | | | | | |
|--------------------------|---|----------|--------------|---------------------|------------------------------|--|
| Communicate to customers | Customers will be notified of the outcome from the Executive meeting | March 15 | Sarah Curran | Implementation Plan | Customers notified | |
| Communicate to customers | Timescales to be announced for the transfer of the library to Lostock College | April 15 | Sarah Curran | Implementation Plan | Timescales announced | |
| Communicate to customers | Timescale will be developed to train the Lostock College member of staff | April 15 | Sarah Curran | Implementation Plan | Training completed | |
| Communicate to customers | Installation of Open + Technology | April 15 | Sarah Curran | Implementation Plan | Open + installed and working | |

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

Page 143

| A. Summary Details | | |
|-----------------------|--|---|
| 1 | Title of EIA: | Reshaping Trafford Library Service – Delamere Toy Library Reduced Funding |
| 2 | Person responsible for the assessment: | Sarah Curran – Head of Customer Services |
| 3 | Contact details: | Tel: 0161 912 2328 |
| 4 | Section & Directorate: | Transformation and Resources > Access Trafford |
| 5 | Name and roles of other officers involved in the EIA, if applicable: | Waseem Tahir – Business Change Analyst Craig Holt – Business Change Support Officer |
| B. Policy or Function | | |
| 1 | Is this EIA for a policy or function? | Policy <input type="checkbox"/> N Function <input checked="" type="checkbox"/> |
| 2 | Is this EIA for a new or existing policy or function? | New <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/> |
| 3 | What is the main purpose of the policy/function? | Trafford Council faces significant financial challenges over the next few years with a further £50m identified to be saved. Trafford are unable to continue operating in the same way with the financial pressures that exist and so must 're-shape' to adapt to the increasing financial pressures and demands on our services. This includes changing how the Council delivers its library services within the borough to ensure that it is delivering efficient and relevant services to residents. To achieve this, the Council utilised a two phase public consultation model, to identify possible options in order to deliver £700,000 in savings over the next financial year. Following the feedback from the first phase of the consultation, a |

number of proposals are currently being considered and consulted on as part of the second phase of the libraries consultation.

This EIA specifically relates to the withdrawal of funding for the Toy Library Advisor at Delamere Toy Library.

Separate EIAs have been carried out for other library proposals. These are detailed below:

- Introducing technology at Woodsend Library to facilitate a self-service access model for library users.
- Redeveloping the Timperley and Hale Library sites.
- Reducing the number of Library and back office staff
- Reducing the book fund
- Closing Bowfell, Davyhulme and Lostock Libraries
- Implementing a Community Hub at Coppice Library with a third sector partner

We are proposing to withdraw the funding that provides 2 part time members of staff at Delamere Toy Library. Withdrawing this support is estimated to save £29,000.

Delamere Toy Library is a registered charity separate from the Council and is not a service that we are legally required to provide. However, we recognise the importance of the service and will continue to support and help the registered charity to thrive. This will include:

- Continuing to provide the premises for Delamere Toy Library rent free (c.£4,000 per annum) and supporting the charity with running costs to the sum of c.£5,600 per year.
- Working with the charity to identify alternative income streams including opportunities for crowd funding and assistance with grants applications and increasing the volunteer base.

| | | |
|---|--|---|
| | | <ul style="list-style-type: none"> • Ensuring that Delamere Toy Library has access to expertise from Thrive, Trafford Council's partner in achieving our vision of a thriving Third Sector. • Providing assistance in enhancing the website of Delamere Toy Library to enable donations to be made via the site. |
| 4 | Is the policy/function associated with any other policies of the Authority? | Reshaping Trafford Council |
| 5 | Do any written procedures exist to enable delivery of this policy/function? | Yes: <ul style="list-style-type: none"> • Redeployment Policy • Establishment and Organisational Change Framework |
| 6 | Are there elements of common practice not clearly defined within the written procedures? If yes, please state. | No |
| 7 | Who are the main stakeholders of the policy? How are they expected to benefit? | <p>The Council - The new approach will help to create sustainable value for money library services while achieving the required savings target</p> <p>Staff – The aim of the new approach is to help create sustainable services and development opportunities for staff. In the long-term, this has the potential to ensure secure employment for Council employees.</p> <p>Library customers – The new approach will ensure that the Council will still be able to offer a relevant, comprehensive and efficient library service for customers, while achieving the required savings target.</p> |
| 8 | How will the policy/function (or change/ improvement), be implemented? | <p>The public have been consulted on the proposals and encouraged to feedback with their views and ideas. The consultation period ended on 27th February 2015.</p> <p>The following activities in the implementation plan are currently underway:</p> <p>27th February onwards</p> <ul style="list-style-type: none"> • Consider feedback from public consultation • Review proposals in light of feedback |

| | | |
|----|---|--|
| | | <ul style="list-style-type: none"> • Prepare outcome of consultation report <p>25th March</p> <ul style="list-style-type: none"> • Executive approve or amend proposals <p>26th March onwards</p> <ul style="list-style-type: none"> • |
| 9 | What factors could contribute or detract from achieving these outcomes for service users? | <p>The factors that could contribute to achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • A detailed knowledge of the make-up of the Trafford Borough and library usage • Well established internal and external customer relationships <p>The factors that could detract from achieving the outcomes for service users include:</p> <ul style="list-style-type: none"> • Resistance to change • Objections from members of the community |
| 10 | Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state? | No |

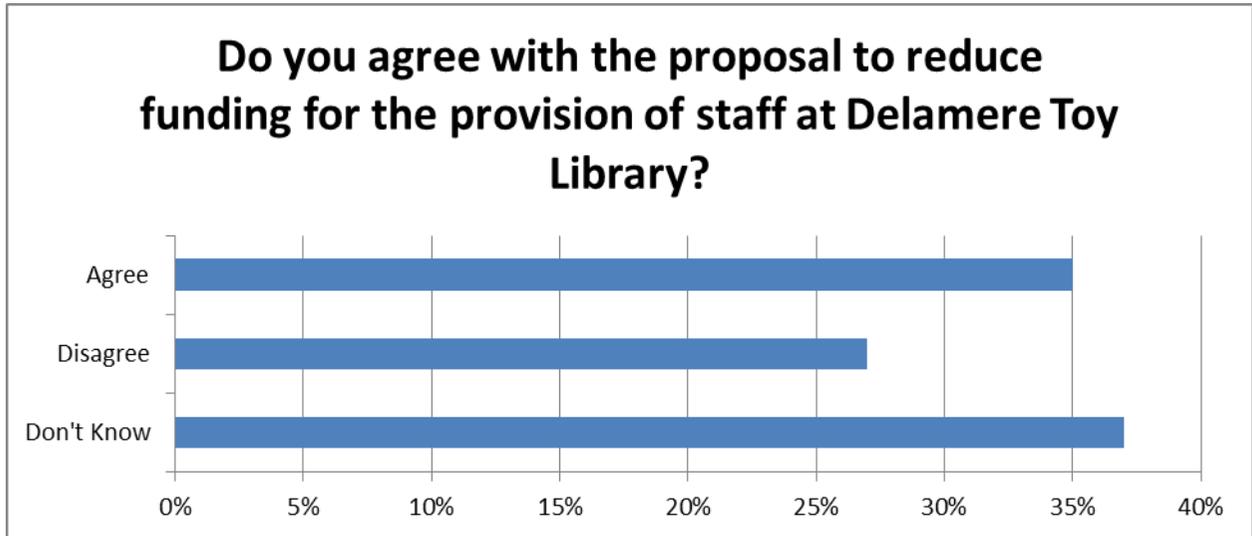
C. Data Collection

| | | |
|---|--|---|
| 1 | What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function? | Monitoring data has been gathered from the 2011 census and 2013/14 local data in relation to Library usage. |
|---|--|---|

| | | |
|---|---|--|
| 2 | Please specify monitoring information you have available and attach relevant information* | Due to the operating arrangements of the toy library there is limited monitoring information available |
| 3 | If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data? | N/A |

| D. Consultation & Involvement | | | | | | | | | | |
|-------------------------------|--|--|------------------|--------|----------------|-----|---------------|-----|---------------|-----|
| 1 | Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA? | <p>An initial Public Consultation in November 2014 helped shape the proposed changes to the service. This can be found at: Trafford Libraries Phase One Consultation Feedback Report</p> <p>Reviewing previous EIAs undertaken by the Council</p> | | | | | | | | |
| 2 | Please list any consultations planned, methods used and groups you plan to target. (If applicable) | <p>A full public consultation was carried out in conjunction with The Campaign Company. The consultation ran from 16th January to 27th February 2015. In order to be able to maximise responses and enable as many people as possible to put forward their views on the proposals the following lines of communication were established:</p> <ul style="list-style-type: none"> • A dedicated web page with information about the proposals • A booklet containing information about the proposals. This was made available at all libraries across the borough • A questionnaire to obtain the public's views on the proposals. This was available online and a paper version was contained in the booklet • An email address was made available for the public to submit their views on all of the proposals • Dedicated public consultation sessions were facilitated at libraries across the borough. These offered the chance for the public to discuss the proposals and express their views in detail. Comments were collated by The Campaign Company and formed part of the overall consultation feedback. <p>At the end of the consultation there had been the following responses:</p> <table border="1"> <thead> <tr> <th>Response channel</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Online surveys</td> <td>364</td> </tr> <tr> <td>Paper surveys</td> <td>326</td> </tr> <tr> <td>Comment cards</td> <td>189</td> </tr> </tbody> </table> | Response channel | Number | Online surveys | 364 | Paper surveys | 326 | Comment cards | 189 |
| Response channel | Number | | | | | | | | | |
| Online surveys | 364 | | | | | | | | | |
| Paper surveys | 326 | | | | | | | | | |
| Comment cards | 189 | | | | | | | | | |

| | |
|---|----|
| Letters (from individuals, including staff members) | 35 |
| Letters (from stakeholders) | 32 |
| Petitions | 2 |



The feedback from the 2nd phase of the public consultations has highlighted the positive and negative impacts of the proposal.

The positive impacts include some respondents commenting that the impact of the proposal will be minimal with a handful of respondents supporting the proposal because it saves costs. A few respondents feel that the toy library is a service that should not be funded from the council's library budget.

The negative impacts include concerns about the impact of the proposals on the families that use the service. There is a sense that this proposal targets and impacts those users

| | | |
|---|--|--|
| | | <p>who are most disadvantaged and that are being hit the hardest, namely families on low incomes and families with disabled children. There are also concerns that the proposal will result in a reduction of the quality of the service: fewer toys as well as a lower standard of staffing if the library were to be run by volunteers alone.</p> <p>We will mitigate these concerns by:</p> <ul style="list-style-type: none"> • Working with the charity to generate ideas for recruiting volunteers for example parents whose children use the library, schools or the Women's Institute • Training volunteers well • Generating income through increased charges • Supporting applications for other external funding • Publicising the library's services more widely • Working with the charity for the development of other ideas for increasing income |
| 3 | **What barriers, if any, exist to effective consultation with these groups and how will you overcome them? | As above. In order to reduce any barriers to effective consultation, a number of different communication channels were made available throughout. |

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

| | Positive | Negative (please specify if High, Medium or Low) | Neutral | Reason |
|--|-----------------|---|----------------|--|
| Gender – both men and women, and transgender; | | | ✓ | It is not expected that the proposed changes will have a negative or |

| | | | | |
|--|--|--------------|---|---|
| | | | | positive impact upon the equality target group. |
| Pregnant women & women on maternity leave | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Gender Reassignment | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Marriage & Civil Partnership | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. We have mitigated against the impacts in specific ways for those groups where the proposals will impact and in a general way for those where the information limited |
| Race- include race, nationality & ethnicity (NB: the experiences may be different for different groups) | | | ✓ | We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group. |
| Disability – physical, sensory & mental impairments | | ✓ Low | | Detailed information relating to disabilities is not available from the data held on library customers. For the purpose of this EIA, 2011 census data relating to people in receipt of a disability related benefit (Disability Living Allowance, Incapacity Benefit and Attendance Allowance) has been used. |

| | | | | |
|---|--|--------------|---|---|
| | | | | <p>Less than 10% of people that live in the wards where the libraries are located are in receipt of a disability related benefit.</p> <p>The majority of the customers at Delamere are disabled children and their families</p> |
| Age Group - specify eg; older, younger etc) | | ✓ Low | | <p>The majority of customers at Delamere are children and their families</p> <p>Delamere Toy Library provides a service for children</p> |
| Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people | | | ✓ | <p>We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group.</p> |
| Religious/Faith groups (specify) | | | ✓ | <p>We have considered the nature of the proposals but it is not considered that there will be any impact on people in this group.</p> |

As a result of completing the above what is the potential negative impact of your policy?

High Medium Low ✓

| | |
|--|-----|
| F. Could you minimise or remove any negative potential impact? If yes, explain how. | |
| Race: | N/A |

| | |
|--|---|
| Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership | N/A |
| Disability: | <p>Disabled children</p> <p>A significant proportion of Delamere's service users are disabled children and their families. The Council is continuing to work with Delamere Toy Library Committee to ensure alternative sources of funding can be sourced and there has been some success to date.</p> <p>Thrive and blueSCI, both charities that work in partnership with the Council, have been approached to assist Delamere and are providing advice.</p> <p>This should ensure that the charity continues to function and strengthen its funding base</p> |
| Age: | <p>Younger</p> <p>Delamere Toy Library provides a service for younger children. The Council is continuing to work with Delamere Toy Library Committee to ensure alternative sources of funding can be sourced and there has been some success to date.</p> <p>Thrive and blueSCI, both charities that work in partnership with the Council, have been approached to assist Delamere and are providing advice.</p> <p>This should ensure that the charity continues to function and strengthen its funding base</p> |
| Sexual Orientation: | N/A |
| Religious/Faith groups: | N/A |

| | | |
|------------------------------|--|-----|
| Also consider the following: | | |
| 1 | If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason? | N/A |
| 2 | Could the policy have an adverse impact on relations between different groups? | No |
| 3 | If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how? | N/A |

M. EIA Action Plan

| Recommendation | Key activity | When | Officer Responsible | Links to other Plans | Progress milestones | Progress |
|------------------------------------|---|------------|----------------------|----------------------|---------------------|----------|
| Complete public consultation | Review submissions from the public | March 2015 | The Campaign Company | | | |
| Communicate to staff and customers | Inform of the decision after Exec meeting | March 15 | Sarah Curran | | | |

| | | | | | | |
|------------------|--|------------------|--------------|--|--|--|
| Transition phase | Continue to work with Delamere Committee to ensure smooth transition | April 15 onwards | Sarah Curran | | | |
|------------------|--|------------------|--------------|--|--|--|

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed
Lead Officer
Date

Signed
Service Head
Date

This page is intentionally left blank

TRAFFORD COUNCIL

Report to: Executive
Date: 25th March 2015
Report for: Decision
Report of: Executive Member Adult Social Care and Community Wellbeing

Report Title

Residential and Nursing Care: Review of the 'Fair Price for Care' in Trafford

Summary

The report describes the process undertaken to engage Trafford's Residential and Nursing Home providers in the identification of a 'Fair Price for Care'. It outlines the methodology used. This is the fourth year we have applied this approach.

Consideration is given to both national and local factors that are impacting on the market, taking account of both cost pressures and mitigation. Work undertaken over the last 3 years to assess a 'fair price for care' in Trafford has led to a cumulative increase of 10.1% in residential and nursing fees paid by the Council. Trafford's rates when benchmarked against other Greater Manchester (GM) authorities are amongst the highest in the sub-region.

The recommendation is based on balancing the cost pressures in the market set out in Section 4.3 and the outcome of the formula applied in Appendix 1 against the following factors;

- Affordability in the context of the financial challenges faced by all public sector organisations
- A 10.1% cumulative increase over the last 3 years leading to Trafford paying amongst the highest rates compared to our neighbours.
- Inflation at a record low of 0.3% in January 2015 with a recent downward trend in energy and food costs
- Expansion of the local market with new providers bringing additional capacity in Trafford. On average there are approximately 70 spare beds each week.

Taking all of this into account the recommendation to Executive is to approve a 0% inflationary uplift for the Residential and Nursing market for 2015-16,

Recommendation

That Executive approve a 0% inflationary uplift for the Residential and Nursing Care market for 2015-16 for the reasons set out in this report. 5

Contact person for access to background papers and further information:

Name: John Pearce, Director Service Development

Extension: x5100

Background Papers: None

| | |
|---|--|
| Relationship to Policy Framework/Corporate Priorities | The report impacts on the following corporate priorities; <ul style="list-style-type: none">• Supporting Vulnerable People• Low Council Tax and Value for Money |
| Financial | The recommendation for an inflationary uplift of 0% within the residential sector does not have any financial implications. |
| Legal Implications: | Legal framework is set out in Section 2 of the report |
| Equality/Diversity Implications | The equality and diversity implications been taken into account. |
| Sustainability Implications | Not applicable |
| Resource Implications e.g. Staffing / ICT / Assets | Not applicable |
| Risk Management Implications | Not applicable |
| Health & Wellbeing Implications | Market analysis indicates there is capacity within Trafford to enable access to suitable provision to support health and wellbeing of residents. |
| Health and Safety Implications | Not applicable |

1.0 Background

- 1.1 Trafford's current residential and nursing market has developed over a number of years. The market in 2005 was deemed to be unable to support the future needs of Trafford residents but this has now progressed to a far more diverse market with several new providers having entered into the market. This has subsequently expanded the offer giving a wide range of choice for the residents of Trafford.
- 1.2 Residential and Nursing Care in Trafford is of a high overall standard as a result of many years' work to develop and stimulate the market and the skills of the sector's workforce. This is underpinned by Trafford's market management approach which is robust in nature and multi-tiered in relation to the monitoring of service provision.
- 1.3 Each year Trafford Council supports existing placements and makes new placements at a cost of approximately £14.6 million. This constitutes approximately 30% of the Adult Social Services 2015-16 Budget.
- 1.4 In 2012, Trafford Commissioners undertook a detailed review of the Residential and Nursing Care market and as part of this work started the process of engagement with providers to determine a 'fair price for care' in Trafford.
- 1.5 Following a number of initial meetings, it was agreed that in order to carry out this piece of work to determine the 'fair price of care' residential and nursing, providers would work with the Council and each other to develop a framework based on the work of Laing and Buisson. This work established the current Trafford model to engage annually with providers on a 'fair price for care'.
- 1.6 The market capacity in Trafford has fluctuated over the past twelve months with a particular demand in relation to individuals who have dementia. There are currently 39 Residential and Nursing homes operating in Trafford, offering a total of 1271 residential and nursing beds. In the first part of 14/15 bed availability did drop on occasion to 35 vacancies each week. However, following a number of developments, in the last half of this financial year, the average number of available beds has risen and there is now an average of 70 beds/ placements vacant across the borough each week.
- 1.8 A recent piece of work carried out to determine the level of self funders, highlighted that over half of the available beds within Trafford are occupied by 'self funders'.
- 1.9 Residential Care Homes

| Establishment | Provider | Location |
|---|--------------------------------|------------|
| Ann Challis Residential Home for Ladies | Jem Care Ltd | Urmston |
| Bickham House | Bickham House Trustees | Bowdon |
| Claremont Residential Home | Claremont Residential Home Ltd | Sale |
| De Brook Lodge | Ideal Care Homes Ltd | Flixton |
| Dover House Residential Home | Mrs C Conchie | Stretford |
| Fairways Residential Home | Knoll Care Partnership Ltd | Flixton |
| Ferrol Lodge | Mr Ian Nicoll | Sale |
| Handsworth | Methodist Homes for the Aged | Bowdon |
| Haylands | Jem Care Ltd | Urmston |
| Heathside | Mr & Mrs Meehan | Altrincham |

| Establishment | Provider | Location |
|------------------------|--------------------------------------|--------------|
| Kara House | Trinity Merchants Ltd | Sale |
| Kilpeacon House | Mr & Mrs J R Skeath | Altrincham |
| Lynwood Lodge | Trinity Merchants Ltd | Sale |
| Mayfield | Stephen & Julie Gilmour | Sale |
| Oldfield Bank | Mr & Mrs L Leavy | Altrincham |
| Ravencourt | Miss B Richardson & Mrs J Richardson | Altrincham |
| The Cedars RH | The Cedars Rest Home Ltd | Bowdon |
| The Conifers Rest Home | Conifers Care Group | Old Trafford |
| The Knoll | Knoll Care Partnership Ltd | Flixton |
| Serendipity | Ideal Care Homes Ltd | Urmston |
| Victoria RH | Trinity Merchants Ltd | Sale |
| York Lodge RH | Mr Alan Machen and Mrs Ann Crowe | Urmston |

1.10 Nursing Care Homes

| Establishment | Provider | Location |
|-------------------------------------|--------------------------------|------------|
| Allingham House | New Care Projects LLP | Timperley |
| Beech House (Partington) | Rosewood Healthcare | Partington |
| Beverley Park | Beverley Park Nursing Home Ltd | Stretford |
| Bradley House NH | Bange Nursing Homes Ltd | Sale |
| Brookfield NH | Mrs M J Chell | Urmston |
| Faversham | Miss A Burke and Mrs A Wynn | Flixton |
| Flixton Manor | Flixton House Ltd | Flixton |
| Lady of the Vale | Sisters of St Joseph | Bowdon |
| Lime Tree House | Mountlands Trust Ltd | Sale |
| Manor Hey Care Home | New Care Projects LLP | Sale |
| Shawe House NH | Shawe House Nursing Home Ltd | Flixton |
| Shawe Lodge | Shawe House Nursing Home Ltd | Davyhulme |
| Sunrise Senior Living of Hale Barns | Sunrise Senior Living Ltd | Hale Barns |
| Timperley Care Home | Kingsley Healthcare | Timperley |
| Urmston Cottage | Urmston Cottage (MCR) Ltd | Urmston |
| Woodend N and R | Bupa Care Homes | Altrincham |
| Wyncourt | Mr & Mrs H Mattinson | Timperley |

2. Legal Framework

2.1 The legal framework governing care and support in England has recently undergone fundamental reform. The Care Act 2014, in effect as from 1st April 2015, replaces the piecemeal legislation across the previous sixty years. The Care Act 2014, gives effect to, amongst other things, the following provisions:

- Requiring the Council to promote individual wellbeing and apply the wellbeing principle in all cases where a local authority is carrying out a care and support function, or making a decision, in relation to a person.
- The Council is responsible for preventing, reducing or delaying care and support needs
- Requires that the Council must promote the efficient and effective operation of a market of services for meeting care and support needs. The Act places new

duties on local authorities to facilitate and shape their market for adult care and support as a whole, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways.

- Specifies the requirements of a personal budget prepared for each adult needing care or support itemising the cost of meeting assessed need and individual financial assessment in terms of actual payment
- Entitles an adult to express a preference for particular accommodation

2.2 In addition to these provisions, the Council will have a new responsibility for market shaping as prescribed by the Act. Supplementing the Care Act 2014, there is further legislative provision and Statutory Guidance which has been issued by the Department of Health. The relevant regulations are Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 (the Choice Regulations”) which state that a Local Authority has to meet the provision of preferred accommodation. The effect of the Act, regulations and guidance, is to require the Council to facilitate and shape their market for adult care and support as a whole.

2.3 The statutory guidance issued under the Care Act 2014 states that Local Authorities must focus on outcomes when pursuing market shaping and commissioning. This is set out in the Guidance. These include:

- Councils should have regard to guidance on minimum fee levels
- Councils must not undertake any actions which may threaten the sustainability of the market as a whole
- Council should assure themselves and have evidence providers deliver services through staff remunerated so as to retain an effective workforce

2.4 The above will replace the current legal framework under the National Assistance Act 1948. The provisions of the National Assistance Act and Choice of Accommodation directions framework is set out below. Under the National Assistance Act 1948, the Council has a duty to make arrangements for providing residential accommodation and care for persons who by reason of illness and disability are in need of care and attention which is not otherwise available to them. The Council may discharge that duty by making arrangements with private providers of residential accommodation for those assessed to need it. The Council is also required, under s7a of the Local Authority Social Services Act 1970 to exercise its social services functions in accordance with Secretary of State’s directions. The directions are the National Assistance Act 1948 (Choice of Accommodation) 1992 LAC (92) 27 (“the Choice Directions”). Under the Choice Directions, the Council is not required to place a person in their preferred accommodation if (amongst other things) to do so would cost the council more than it would usually expect to pay for accommodation for someone with the individual’s assessed needs.

2.5 The directions are further supplemented by the Local Authority Circular 2004 (20), issued under s 7 (1) of the 1970 Act (“the Circular”). The Circular says that the usual cost should be set by councils at the start of a financial or other planning period, to be sufficient to meet the assessed care needs of supported residents in residential accommodation. A council should set more than one usual cost where the cost of providing residential accommodation to specific groups is different. In setting and reviewing their usual costs, councils should have due regard to the actual costs of providing care and other local factors. Councils should have due regard to the best value requirements under the Local Government Act 1999.

- 2.6 Under the Care Act 2014 and the Choice Directions, the Council needs to have regard to “Building Capacity and Partnership in Care.”, it refers, more than once, to the need for consultation and cooperation between commissioners and providers of care. It states out that fee setting must take into account the legitimate and current future costs faced by providers as well as the factors that affect those costs and the potential for improved performance and more cost effective ways of working. Local authorities should not use their position to drive down fees. Contract prices should not be set mechanistically but should have regard to providers’ costs and efficiencies, and planned outcomes for people using services, including patients.
- 2.7 Therefore under the NAA 1948 the Council was under a requirement for settling the usual cost with care providers. The Care Act 2014 and guidance does not require this. However, it remains lawful and a useful tool in market shaping and choice regulation compliance.
- 2.8 Therefore, in seeking to identify a usual cost the Council is under very similar obligations under the Care Act to the NAA 1948 which is to consider the cost of care and engage with the providers under the Care Act and guidance as it is under the Choice Direction.

3. Methodology

- 3.1 In order to determine the ‘fair price for care’ for 2015/16, a similar exercise to that carried out in the previous 3 years has been completed. All providers were provided with an opportunity to participate in the consultation. Letters inviting providers to engage in the process were sent out and sessions held with providers. Over the last two years the numbers of providers willing to engage in this process has fallen. This year only seven providers, which included only one nursing home, took part in the exercise despite several attempts to invite providers to engage. Feedback from providers has indicated concerns about sharing commercially sensitive data to populate the model.
- 3.2 The Council invited providers not willing to take part in the group discussions to attend individual meetings in order to capture their views or to make representations in writing. The exercise undertaken to map costs in the system used the same model which was agreed by a sub-group of providers linked to the original determination of the ‘fair price for care’ conducted in 2012.
- 3.3 The approach must be a fair, transparent and reasonable method for determining such a price. The Council must balance a range of factors impacting on market costs against issues such as affordability and benchmarking data against other authorities.

3.4 Key Components of the Trafford Model:-

Trafford’s model mirrors the structure of the Laing and Buisson approach and seeks to calculate the four main components of care costs:

1. Staffing costs
2. Repairs and maintenance costs
3. Other non-staffing current costs, and
4. Capital costs

- 3.5 It was agreed that capital costs would include a reasonable return for investors, including profit. Thus using the approach outlined above it can be reasonably assumed that a “Fair market price” could be calculated.
- 3.6 The main challenge has been capturing the evidence from the market needed to populate the model. Given the timeframe and the potential difficulty to obtain market data it was necessary to use an approach that could collect appropriate data to address the four main components mentioned above in an open and transparent manner.
- 3.7 Therefore an “open book” policy was adopted to capture the data. Given the reservations about being able to collect suitable meaningful data, individual providers volunteered to provide data about how much it costs to provide care in Trafford.
- 3.8 Providers engaging in the process have populated a standard template that captured the four main components of the model. It was agreed that the providers would capture this data from their latest published accounts.
- 3.9 In completing the model the Council and the providers agreed on the calculation of the key variables in the model. These are:-
- The model would calculate a cost per bed per week.
 - A rate of occupancy (or allowance for void beds) would be assumed and that this rate would not be 100%.
 - The cost of capital (rate of return on capital allowed) would be 12%. However in the light of current low level of interest rates it has been proposed this year that a rate of 8% would may be more realistic, which includes profit.
 - The data would be captured from the latest published set of accounts
 - Any inflationary uplift would be agreed to harmonise the data captured from the provider’s accounts to an agreed start date
 - Providers can introduce a notional amount of cost to reflect the management resource input into a home by the owners/providers that would otherwise have to be delivered by a paid employee
- 3.10 Appendix 1 shows calculations based on these factors with the analysis submitted by residential providers and a revised assessment by the Council to generate a ‘fair price for care’ in the residential sector. It has not been able to generate an equivalent for the nursing sector as only 1 provider engaged with the process. This exercise gives us a starting point

4. Market Factors

- 4.1 The Residential and Nursing home market in Trafford has been awarded a cumulative uplift of 10.1% over the last three years (2.6% in 2012/13, 6% in 2013/14 and 1.5% in 2014/15). These increases followed the application of the model undertaken to establish a ‘fair price for care’ and should be set against many neighbouring local authorities who continued to deliver an uplift of 0%. This has

ensured that Trafford Council is currently paying rates amongst the highest rates in Greater Manchester. This in the context of Trafford being the lowest funded authority in GM. The table below shows the benchmarking data collected through this process.

2014 / 15 - £ per week

| | Trafford | Bury | Manchester | Rochdale | Salford | Stockport | Tameside |
|-----------------|----------|---------|------------|----------|---------|-----------|----------|
| Residential | £402.71 | £410.31 | £398.35 | £386.00 | £381.74 | £382.00 | £400.00 |
| Residential EMI | £434.26 | £410.31 | £418.35 | £417.00 | £381.74 | £446.00 | £400.00 |
| Nursing | £445.92 | £410.31 | £425.60 | £386.00 | £381.74 | £400.00 | £519.79 |
| Nursing EMI | £501.26 | £410.31 | £445.60 | £432.00 | £381.74 | £421.00 | £534.00 |

4.2 It is important to note that no two local authorities employ identical banding in regards to weekly rates for the service provision. One local authority pays rates dependent on the quality of the service, quality being ascertained through their own monitoring processes and another has different prices for those delivering services both on and off their approved provider framework. For the purpose of the table above the costs represent single occupancy rooms of a good quality and delivering services outside of any framework appointment.

4.3 The Council recognise that a number of factors will put pressure on residential and nursing markets both locally and nationally. In Trafford this has been mitigated by the three consecutive years of uplifts identified above. This will lessen and reduce the impact of cost pressures including:

- The National Minimum Wage
- Reduction in training budgets of local authorities
- Auto- enrolment in Pension Schemes

4.4 Similar to that of all care providers the National Minimum Wage (NMW) plays an important part in the calculation of a Fair Price for Care. Care is historically a low-paid job, with wages at or near the NMW, which has historically been:

| Effective From | Adult Rate | % Increase on previous year |
|----------------|------------|-----------------------------|
| 2014 | £6.50 | 3.01% |
| 2013 | £6.31 | 1.94% |
| 2012 | £6.19 | 1.81% |
| 2011 | £6.08 | 2.53% |
| 2010 | £5.93 | 2.24% |

4.5 The Low Pay Commission (LPC) in February 2015 recommended to the

government an increase of 3 per cent on the current adult rate. This will see the current rate of £6.50 rise to £6.70 from October 2015. This would support the Chancellors previous predictions in 2014 of having a minimum wage of £7.00 by 2016. It is proposed any increase in the minimum wage would take effect from 1st October so would only impact on provider costs for half of the 2015-16 financial year.

- 4.6 In previous exercises Residential and Nursing Home owners have highlighted the added burden of rising energy costs which has added further pressure upon the care sector. However inflation is at a record low of 0.3% as at January 2015 and there have been recent reductions in energy and fuel costs which will benefit the market.
- 4.7 The lack of growth in the housing market since 2008 has meant a lack of capital growth for many residential and nursing providers in their main asset (The Care Home). More recent evidence from national statistics has shown an upturn in the market that may start to benefit providers. Whilst this is very much influenced by location we are aware there has been strong growth in parts of Trafford and the borough is at the forefront of the recovery within the region.
- 4.8 There have been changes to workforce pensions which require all employers to enrol employees into a pension scheme adding a financial burden to providers. Staff wages contribute to approximately two thirds of the costs in an average residential or nursing home.

5. Local Factors

- 5.1 The work undertaken in Trafford with Residential and Nursing providers led to a calculation based on an average home being a 23 bed Residential Home and a 21 bed Nursing Home. Data supplied was also calculated on both an 88% and 92% occupancy rate.
- 5.2 The information submitted from the providers as part of this engagement included a request that Trafford recognise the financial pressures they are facing and seriously consider a significant increase in recognition of the costs that are attributed to providing such services. A 10% increase has been proposed by providers and this would lead to an additional financial burden for the Council of £1,460,000 in 2015-16.
- 5.3 Appendix 1 sets out the information submitted by care home providers on a collective basis and the cost per bed week based on assumptions and 88% and 92% occupancy levels. The cost per bed per week on these assumptions for 88% and 92% occupancy would be £493.10 and £476.14 respectively. We have reviewed the assumptions behind these figures and revised the calculation to adjust for 95% occupancy, an 8% rate of return on capital and 1% inflationary allowance. On this basis the revised cost of care per bed per week would be £422.27. We believe this is a more realistic cost per bed per week against which our current rates against which we should balance the mitigating factors not reflected in the formula e.g. affordability, benchmarking against GM authorities and bed availability.
- 5.4 Unfortunately, the Council were unable to populate the model for nursing homes as only one provider engaged with the process. However, the Council believe that the same factors in terms of cost pressures and mitigation apply to the nursing home market.

- 5.5 There has been a steady increase in third party top-ups (i.e. the amount over and above the rate Trafford Council pays for care that a provider will require to be paid by a resident) over the last three years and although rates are a decision for individual providers they do give an indication of market rates. There is a substantial difference in the rate of top ups across Trafford ranging from £7.50 per week to £703.29 per week. This pressure on top-ups has to be considered against an increase in available beds over the second half of the year and a reduction in capital costs and inflationary pressures for providers.
- 5.6 The work undertaken with the Residential and Nursing Home owners over the last three years has led to uplifts with a cumulative impact of 10.1% to mitigate the national and local pressures described in this report.

6 Recommendation and Rationale

- 6.1 The recommendation for an inflationary uplift of 0% is made based on balancing the cost pressures on the market against the mitigation identified. It is proposed also after considering the relevant factors including those identified in this report and engaging with providers. The providers who chose to engage with the council on this exercise have requested a 10% uplift in fees for 2015/16. The Council do not believe this is either affordable (it would cost an additional £1,460,000) or justified by the market factors set out in this report, Any decision on affordability needs to be set in the context of Council wide budget reductions of £21.5million for 2015-16. The £14.6million spent on residential provision equates to approximately 30% of the Adult Social Care budget and therefore affordability is a critical issue.
- 6.2 The cost pressures on the market and balancing factors that have been taken into consideration include;
- National Minimum Wage
 - Reduction in Local Authority Training Budgets
 - Auto-enrolment in Pension Scheme
 - Work undertaken over the last 3 years has seen a cumulative increase in rates of 10.1% compared to many authorities who have retained 0% uplifts.
 - Benchmarking data shows Trafford's rates are in the top quartile for Residential and Nursing care compared to GM authorities. Inflation is currently at its lowest level on record at only 0.3% in January 2015. Bank of England projections suggest it will remain below their target of 2% for at least the next 18 months. There has been a reduction in both fuel and food costs in recent months.
 - Market analysis shows that there is currently capacity within the Residential and Nursing sector (approx. 70 beds) although there has been an increase in top-ups with all Trafford homes now charging a top up. This reflects an occupancy level of approximately 94.5% in the borough.
 - Projections in relation to 'return on capital' have been reduced from 12% to 8% in the Council's modelling.
 - Recovery in the housing market will assist providers as the main capital asset, the care home, increases in value. In previous years the challenges created by a stagnant housing market have been factored in as a cost pressure on the market

7. Other Options

- 7.1 The seven providers who engaged in the process requested a 10.1% inflationary uplift. The Council, having carefully balanced all the factors, do not believe that is

- affordable or justified given the issues raised in this report
- 7.2 The calculation set out in Appendix 1 identifies Trafford Council's projection of a 'fair price of care' at £422.27 compared to the proposed Trafford basic rate for residential care of £402.71 (see chart in Section 4.1). We do not believe this gap is unreasonable when balanced against affordability issues in the context of the Council's budget reductions of £21.5million in 2015-16. Benchmarking against Greater Manchester Authorities also shows we are amongst the highest funders in the area.
- 7.3 An inflationary increase of up to 3% was considered during the budget setting process in the context of supporting the market balanced against the Council's financial position. Due to the issues identified in the report and the impact in terms of additional financial pressure on Council budget this option is not recommended.

Key Decision: Yes

If Key Decision, has 28-day notice been given? Yes

Finance Officer Clearance *(type in initials)*.....GB.....

Legal Officer Clearance *(type in initials)*.....HK.....

CORPORATE DIRECTOR'S SIGNATURE *(electronic)*



.....
 To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

Financial Calculations

See attached sheet

REPRESENTATIVE 23 BED RESIDENTIAL HOME

| Annual Financial Data for year ending : April 2014 | Care Home Providers Submission | | | | | Trafford Revisions | Notes | |
|--|--------------------------------|--------------------------|-----------------|-------------------|----------------|--------------------|------------|---|
| | Number of Beds | | Total | Cost per bed week | | | | |
| | 23 | Per Financial statements | | Adj | | | | |
| Occupancy percentage | | | | | 88% | 92% | 95% | Higher occupancy assumption not unrealistic give demand for beds in borough |
| Direct Costs | | | | | | | | |
| Wages | £268,502 | | | | | | | |
| Food | £27,093 | | | | | | | |
| Effective wages to reflect owner role / contribution | | £33,500 | £329,095 | £311.83 | £298.27 | 288.85 | | |
| Indirect costs (cash only) | | | | | | | | |
| Utilities (gas, water, electricity & council tax) | £21,765 | | | | | | | |
| Telephones, stationery, postage and advertising | £1,909 | | | | | | | |
| Legal, professional & accountancy fees | £6,455 | | | | | | | |
| Repairs, maintenance and renewals | £27,272 | | | | | | | |
| CQC registration and insurance | £6,243 | | | | | | | |
| Miscellaneous expenses | £954 | | | | | | | |
| Bank charges | £2,248 | | | | | | | |
| Household expenses (medical supplies, uniforms, staff training, motoring clinical waste, equipment hire purchase, entertainment etc..) | £3,701 | | £70,547 | £66.85 | £63.94 | 61.92 | | |
| Total Direct and Indirect costs | | | £399,642 | £378.68 | £362.21 | £350.77 | | |
| Capital Costs | | | | | | | | Interest rates are currently at an all time low and projected to continue so for the immediate future therefore a rate of 8% is considered more appropriate. |
| Current estimated | £1,000,000 | | | £100.06 | £100.06 | £66.71 | | |
| Estimated value per bed Required return | £43,478 12% | | | | | | | |
| Total costs | | | | £478.74 | £462.27 | 417.48 | | |
| Inflation adjustment | | 3% | | £14.36 | £13.87 | 4.79 | | Inflation is currently running at 0.3%. An allowance of 1% has been assumed which covers the part year effect of the minimum wage increase from October 2015. |
| Proposed Fee | | | | £493.10 | £476.14 | £422.27 | | |

Current Trafford Rate - Band B

£402.71

This page is intentionally left blank

TRAFFORD COUNCIL

Report to: Executive
Date: 25th March 2015
Report for: Decision
Report of: Executive Member Adult Social Care and Community Wellbeing

Report Title

Homecare: Review of the 'Fair Price for Care' in Trafford

Summary

The report the review of Trafford's Homecare provision to support the identification of a 'Fair Price for Care'. It outlines the methodology used and this is the fourth year we have applied this approach.

Consideration is given to both national and local factors that are impacting on the market, taking account of both cost pressures and mitigation. Work undertaken over the last two years to establish a fair price for home care in Trafford has resulted in an uplift of 1% in rates for 2013/14 and 1.5% uplift in rates for 2014/15.

It should also be noted that there was a thorough procurement process to establish a new homecare framework in Trafford that took effect from July 2014 and all current providers applied to be part of that framework based on the rates available at that time.

The United Kingdom Home Care Association's (UKHCA) published their position statement on the cost of care on Wednesday 4th March 2015. This shows that whilst Trafford's rate is slightly below the national average of £13.66 per hour it is well above the North West average and the 5th highest of the 23 LA's in the region.

The recommendation is based on balancing the cost pressures in the market as set out in this report.

Recommendation

That Executive approves a 1% inflationary uplift for the Home Care market for 2015-16 for the reasons set out in this report.

Contact person for access to background papers and further information:

Name: John Pearce, Director Service Development

Extension: x5100

Background Papers: None

Implications:

| | |
|---|--|
| Relationship to Policy Framework/Corporate Priorities | The report impacts on the following corporate priorities; <ul style="list-style-type: none">• Supporting Vulnerable People• Low Council Tax and Value for Money |
| Financial | The recommendation for an inflationary uplift of 1% within the home care market creates a financial pressure of £85k for 2015-16. |
| Legal Implications: | Legal framework is set out in Section 2 of the report |
| Equality/Diversity Implications | Equality and diversity implications have been considered as part of the process. |
| Sustainability Implications | Not applicable |
| Resource Implications e.g. Staffing / ICT / Assets | Not applicable |
| Risk Management Implications | Not applicable |
| Health & Wellbeing Implications | Market analysis indicates there is capacity within Trafford to enable access to suitable provision to support health and wellbeing of residents. |
| Health and Safety Implications | Not applicable |

1.0 Background

- 1.1 The Home Care market in Trafford is made up of a diverse range of providers operating through a Framework established in July 2014. Providers range from smaller independent companies up to national chains and franchises. The partnership between the Council and Providers over the last decade has helped stimulate innovation, diversification and the development of a largely qualified and skilled workforce.
- 1.2 Home Care in Trafford is of a high overall standard. This is as a result of many years' work to develop and stimulate the market and to skill the sector's workforce. Trafford's market management approach includes robust monitoring of the quality of the service delivered. The Council is also able to take action whenever standards are found to be below expectations.
- 1.3 As part of the review of Home Care services in Trafford carried out in 2012 a finance sub-group was established which was tasked to review the then pricing structure for commissioned Homecare Services in Trafford. In order to carry out this piece of work a framework for determining the 'fair price' of homecare was developed with home care providers based on the work of Laing and Buisson and the United Kingdom Home Care Association's (UKHCA) .
- 1.4 The UKHCA published their position statement on the cost of care on Wednesday 4th March 2015. This shows that whilst Trafford's rate is slightly below the national average of £13.66 per hour it is well above the North West average and the 5th highest of the 23 LA's in the region. As would be expected given the differences in cost of living, there is a substantial North/South difference in rates that evidences a positive position in Trafford. The current £12.81 per hour rate was agreed following an uplift of 1.5% as a result of the 'fair price for care' work carried out in 2014/15.
- 1.5 The work required providers to participate in 'open book accounting' in order to inform the work in setting and determining the price of Homecare for the financial year 2014/15 and to highlight the financial pressures placed on the market. All providers were invited to participate. However less than half of the providers engaged in the process.

2. Legal Framework (please replace)

- 2.1 The legal framework governing care and support in England has recently undergone fundamental reform. The Care Act 2014, in effect as from 1st April 2015, replaces the piecemeal legislation across the previous sixty years. The Care Act 2014, gives effect to, amongst other things, the following provisions:
 - Requiring the Council to promote individual wellbeing and apply the wellbeing principle in all cases where a local authority is carrying out a care and support function, or making a decision, in relation to a person.
 - The Council is responsible for preventing, reducing or delaying care and support needs
 - Requires that the Council must promote the efficient and effective operation of a market of services for meeting care and support needs. The Act places new duties on local authorities to facilitate and shape their market for adult care and

- support as a whole, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways.
- Specifies the requirements of a personal budget prepared for each adult needing care or support itemising the cost of meeting assessed need and individual financial assessment in terms of actual payment
 - Entitles an adult to express a preference for particular accommodation
- 2.2 In addition to these provisions, the Council will have a new responsibility for market shaping as prescribed by the Act. Supplementing the Care Act 2014, there is further legislative provision and Statutory Guidance which has been issued by the Department of Health. The relevant regulations are Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 (the Choice Regulations”) which state that a Local Authority has to meet the provision of preferred accommodation. The effect of the Act, regulations and guidance, is to require the Council to facilitate and shape their market for adult care and support as a whole.
- 2.3 The statutory guidance issued under the Care Act 2014 states that Local Authorities must focus on outcomes when pursuing market shaping and commissioning. This is set out in the Guidance. These include:
- Councils should have regard to guidance on minimum fee levels
 - Councils must not undertake any actions which may threaten the sustainability of the market as a whole
 - Council should assure themselves and have evidence providers deliver services through staff remunerated so as to retain an effective workforce
- 2.4 The above will replace the current legal framework under the National Assistance Act 1948. The provisions of the National Assistance Act and Choice of Accommodation directions framework is set out below. Under the National Assistance Act 1948, the Council has a duty to make arrangements for providing residential accommodation and care for persons who by reason of illness and disability are in need of care and attention which is not otherwise available to them. The Council may discharge that duty by making arrangements with private providers of residential accommodation for those assessed to need it. The Council is also required, under s7a of the Local Authority Social Services Act 1970 to exercise its social services functions in accordance with Secretary of State’s directions. The directions are the National Assistance Act 1948 (Choice of Accommodation) 1992 LAC (92) 27 (“the Choice Directions”). Under the Choice Directions, the Council is not required to place a person in their preferred accommodation if (amongst other things) to do so would cost the council more than it would usually expect to pay for accommodation for someone with the individual’s assessed needs.
- 2.5 The directions are further supplemented by the Local Authority Circular 2004 (20), issued under s 7 (1) of the 1970 Act (“the Circular”). The Circular says that the usual cost should be set by councils at the start of a financial or other planning period, to be sufficient to meet the assessed care needs of supported residents in residential accommodation. A council should set more than one usual cost where the cost of providing residential accommodation to specific groups is different. In setting and reviewing their usual costs, councils should have due regard to the actual costs of providing care and other local factors. Councils should have due regard to the best value requirements under the Local Government Act 1999.

- 2.6 Under the Care Act 2014 and the Choice Directions, the Council needs to have regard to “Building Capacity and Partnership in Care.”, it refers, more than once, to the need for consultation and cooperation between commissioners and providers of care. It states out that fee setting must take into account the legitimate and current future costs faced by providers as well as the factors that affect those costs and the potential for improved performance and more cost effective ways of working. Local authorities should not use their position to drive down fees. Contract prices should not be set mechanistically but should have regard to providers’ costs and efficiencies, and planned outcomes for people using services, including patients.
- 2.7 Therefore under the NAA 1948 the Council was under a requirement for settling the usual cost with care providers. The Care Act 2014 and guidance does not require this. However, it remains lawful and a useful tool in market shaping and choice regulation compliance.
- 2.8 Therefore, in seeking to identify a usual cost the Council is under very similar obligations under the Care Act to the NAA 1948 which is to consider the cost of care and engage with the providers under the Care Act and guidance as it is under the Choice Direction.

3. **Methodology**

- 3.1 In order to set and inform the ‘fair price for care’ in Trafford for 2015/16 the same exercise undertaken in previous years has been repeated. The work with home care providers commenced in December 2014 and was completed in February 2015. All providers were invited to participate in the exercise which resulted in the major providers operating in Trafford engaging in dialogue with us about the review. However, the number of those providers who submitted financial information was very low so it has not been possible to make a reasonable calculation based on the returns received. We have, therefore, undertaken our review by analysing the market and consideration of the market factors as outlined in section 4 of this report.
- 3.2 The current Framework price for Homecare is £12.81 per hour.

Home Care providers were asked to split the unit price of £12.81 per hour into three parts: -

- **Profit element** – it is reasonable that profit is taken from the unit price and it is considered that a reasonable amount is between 2.5% to 3.0%. It is also considered that the profit element should not fall below 2.5%;
- **Fixed cost element** – these are the administration and back office costs relating to the operation of the business. These costs are to an extent determined by the business model but it is reasonable to assume that an inflationary increase is applied to these costs;
- **Variable cost element** - these direct staff costs are the key driver. It is reasonable to assume that the costs of staff increase with time. Although it is not the responsibility of the local authority to fund wage increases for service providers it is reasonable to assume that service providers will be affected by increases in cost in the labour market, for example the national minimal wage and changes to legislation which impact on wage costs.

4. Market Factors

4.1 Over recent years Trafford has seen an increase in the number of purchased hours from the external market in line with the strategic priority to support people in their own homes if possible;

| Financial Year | Purchased Hours | Cost | Increase |
|----------------|-----------------|-----------|------------------|
| 2010-2011 | 486,784 | | |
| 2111-2012 | 621,442 | 7,768,025 | |
| 2012-2013 | 657,416 | 8,296.589 | |
| 2013-2014 | 666,204 | 8,534,073 | 36.85% 7.2% 1.3% |

4.2 Demand on home care markets has been the subject of national media coverage in recent months. These national pressures have also been reflected in Trafford and impacted even further at the most critical times of bank holidays and the Christmas period.

4.3 The Council recognise that a number of potential cost pressures impact the Home Care market both locally and nationally. In Trafford this has been mitigated by our current high hourly rate in comparison to other Local Authorities in the region. This will lessen and reduce the impact of cost pressures arising from, factors including:

- The National Minimum Wage
- Reduction in training budgets of local authorities and recruitment of staff
- Auto- enrolment in Pension Schemes

4.4 Similar to that of all care providers the National Minimum Wage (NMW) plays an important part in the calculation of a Fair Price for Care. Care is historically a low-paid job, with wages at or near the NMW, which has historically been:

| Effective From | Adult Rate | % Increase on previous year |
|----------------|------------|-----------------------------|
| 2014 | £6.50 | 3.01% |
| 2013 | £6.31 | 1.94% |
| 2012 | £6.19 | 1.81% |
| 2011 | £6.08 | 2.53% |
| 2010 | £5.93 | 2.24% |

4.5 The Low Pay Commission (LPC) in February 2015 recommended to the government an increase of 3 per cent on the current adult rate. This will see the current rate of £6.50 rise to £6.70 from October 2015. This would support the

Chancellors previous predictions in 2014 of having a minimum wage of £7.00 by 2016. It is proposed any increase in the minimum wage would take effect from 1st October so would only impact on provider costs for half of the 2015-16 financial year.

- 4.6 Trafford expects a rise of 37% (13,500) in people aged over 65 and 64% (3,300) in people aged over 85 by 2030. This includes an increase of more than 1,400 people (55%) living with dementia and more than 6,500 people (38%) over 65 and living with a limiting, long-term illness. (Trafford's Market Position Statement 2014/15). This provides both an opportunity and a challenge for the market.
- 4.7 The home care market in Trafford faces particular challenges in relation to workforce compared to other boroughs in Greater Manchester. Lower unemployment rates and the impact on availability of workforce for low paid caring roles is a factor in Trafford and has been taken into account.

5 Recommendation and Rationale

- 5.1 The recommendation for an inflationary uplift of 1% is made based on balancing the cost pressures on the market against the mitigation identified. The providers who chose to engage with the council on this exercise have requested an uplift to £15.74 for 2015/16. This would equate to a 23% increase in costs to the Local Authority. Any decision on affordability needs to be set in the context of Council wide budget reductions of £21.5million for 2015-16.
- 5.2 The factors that have been taken into account include ;
- Auto-enrolment of Pensions: All staff will be auto-enrolled in a pension scheme in the coming year, and Employers must match contributions
 - Travel time payment: to meet NMW legislation, estimated at 11.4 minutes to every 1 hour of contact time. Potential increase to NMW from 1st October 2015.
 - Training: Previous funding cuts for NVQ/Diploma courses significantly increase Employer contributions.
 - Recruitment: For a sector with high turnover and loss of staff, this is always a significant cost, however this will increase in order to recruit and grow the workforce to meet increasing demand.
 - Affordability: The impact of increased budget pressures for the Council in the context of budget savings of £21.5million for 2015-16 is a major factor to balance against any increase in rate.
 - Benchmarking data shows Trafford's rate of £12.81 is well above regional average and the 5th highest in the North West.
 - Inflation is currently at it is lowest level on record at only 0.3% in January 2015. Bank of England projections suggest it will remain below their target of 2% for at least the next 18 months. There has been a substantial reduction in fuel costs in recent months.

6. Other Options

- 6.1 The providers who engaged in the process requested a 23% inflationary uplift to a rate of £15.74. We do not believe that is affordable or justified given the balance of costs and mitigation set out in this report.
- 6.2 An inflationary increase of up to 3% was considered during the budget setting process in the context of supporting the market balanced against the Council's

financial position. Due to the mitigation set out in this report and the impact in terms of additional financial pressure on Council budgets this option is not recommended.

Key Decision: Yes

If Key Decision, has 28-day notice been given? Yes

Finance Officer Clearance *(type in initials)*..... GB.....

Legal Officer Clearance *(type in initials)*.....HK.....

CORPORATE DIRECTOR'S SIGNATURE *(electronic)*



.....
To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

TRAFFORD COUNCIL

Report to: Executive
Date: 25th March 2015
Report for: Decision
Report of: Executive Member for Economic Growth and Planning

Report Title

**Greater Manchester Spatial Framework Joint Development Plan Document:
Decision Making Process**

Summary

The Greater Manchester Combined Authority (GMCA) agreed that the ten districts should bring forward a Spatial Framework focusing on identifying Greater Manchester's (GM) future housing and employment land requirements based on an analysis of forecasted economic activity.

GM leaders at the Association of Greater Manchester Authorities (AGMA) Executive Board meeting on the 29 August 2014 agreed to the production of a statutory joint Greater Manchester Spatial Framework Development Plan Document (GMSFDPD) for GM. This report considers the necessary resultant steps required in relation to the decision making process and the impact of the preparation of the Trafford Local Plan: Land Allocations document (LAP).

Recommendation(s)

That the Executive: -

1. Note the decision of the AGMA Executive Board (Joint Committee) to produce a Greater Manchester Spatial Framework (GMSF), covering housing and employment land requirements and associated infrastructure,
2. Recommends to the Council that it delegates responsibility for all stages in the production of the GMSFDPD, other than publication/submission and adoption (which will remain the responsibility of each individual GM Council), to the AGMA Executive Board (Joint Committee),
3. Agrees a delay in the production of the LAP until such time that the production of the GMSF is further advanced together with an amendment to the Trafford Local Development Scheme (LDS) indicating this; and
4. Agree the proposed amendment of the LDS to include reference to the production of the GMSFDPD (as set out in Appendix A).

Contact person for access to background papers and further information:

Name: Rob Haslam (Head of Planning Services)

Implications:

| | |
|---|--|
| Relationship to Policy Framework/Corporate Priorities | The GMSF contributes to a number of corporate themes, particularly Corporate Priority: Economic Growth and Development. |
| Financial | Work is underway to identify the level of resource required to undertake the preparation of the GMSF. It is likely that there will be a call on district resources (through either financial and/or staff secondees) to support the small central resource within the AGMA core team, charged with preparing the plan. Additional resources will be required to procure external capacity for specific pieces of work together with costs associated with the consultation and examination stages. At present it is envisaged that these costs will be met through existing resources, but a review may be necessary should AGMA funding not be forthcoming. |
| Legal Implications: | The GM authorities procured legal advice that detailed the GMSF should be produced as a statutory development plan document. Although a non-statutory document would have some material weight, as a written agreement between the 10 authorities, it would not have been independently tested and would therefore be at risk of challenge. It was also considered that there would be a significant risk that the evidence base underpinning the GMSF would be subject to challenge and scrutiny at each individual district's local plan examination. Therefore, in order to manage the scale and distribution of development collectively, to maximise delivery, it is agreed that the most secure route to achieve this would be the preparation of a joint Development Plan Document. Not proceeding with the LAP could increase the risk of challenge in relation to the Council's ability to demonstrate a 5 year housing land supply and consequential pressure for development from landowners. |
| Equality/Diversity Implications | An Equality Impact Assessment will be applied to the preparation of the GMSF. |
| Sustainability Implications | In accordance with Government Guidance and individual district priorities, the underlying principle of the GMSF will be to ensure that development in the conurbation will be sustainable. It will ensure that sufficient land is allocated across Greater Manchester to allow the City Region to develop sustainably. GMSF will also be subjected to independent sustainability appraisal. |
| Resource Implications e.g. Staffing | Work is underway to identify the level of resource |

| | |
|---------------------------------|---|
| / ICT / Assets | <p>required to undertake the preparation of the GMSF. It is likely that there will be a call on district resources to support the small central resource capacity which may include secondment(s) from the Council's Strategic Planning Team.</p> <p>The GMSF will be available to view electronically via the AGMA website.</p> <p>The Plan will not include specific site allocations although may identify broad areas of search; therefore there will be minimal direct impact on land or property owned by the Council or the delivery of its Land Sales' Programme.</p> |
| Risk Management Implications | <p>The GMSF DPD will be a key document in the Trafford Local Plan, providing Greater Manchester's future housing and employment land requirements. If the DPD is not progressed collectively, and in a timely manner, it may impact on the scope and delivery of the Trafford Local Plan Review.</p> |
| Health & Wellbeing Implications | <p>The level of new growth to be proposed in the Plan will need to be supported by the provision of sufficient community infrastructure, including the provision, where necessary of new health and education facilities.</p> |
| Health and Safety Implications | Not applicable |

1.0 Background

- 1.1 GM has a long history of collaboration through AGMA. This has been strengthened by the establishment of the Greater Manchester Combined Authority, Local Enterprise Partnership (LEP), and Transport for Greater Manchester (TfGM) and the GM Combined Authority Devolution Agreement. Policy making is underpinned by the shared ambition to increase the prosperity of the people of GM. Over time GM has become increasingly interconnected, including labour, housing and retail markets, transport networks, cultural attractions, education and training opportunities and the provision of public services. It is becoming increasingly clear from work connected with the Growth Deal and One North that the ability to manage GM's land supply in an effective way is a key lever to maximise growth potential, and in particular to drive housing supply across GM.
- 1.2 It is within this context that the GMCA agreed that a Spatial Framework should be prepared for GM, focusing on identifying future housing and employment land requirements based on an analysis of forecasted economic activity. There needs to be a clear spatial and sectoral understanding of current and emerging occupier demand to support a market facing strategy for housing and employment growth. The Spatial Framework would provide the basis for an informed and integrated approach to spatial planning across the city region, through a clear understanding of the role of our places and the relationships and connections between them.
- 1.3 The GMSF will ensure an appropriate supply of land to meet the market requirements of GM's growth sectors and will support the market to deliver, as well as providing the context districts need to progress their Local Plans. It is clear that there is a need to go

beyond establishing purely the overall housing and economic targets and identify the type of housing and jobs needed, and how, over time, the housing which is provided will retain and attract the skilled workforce needed for the businesses providing the future jobs.

- 1.4 Initially the GMSF was to be prepared as an informal, non-statutory document because of the relative ease of its initial production and future updates. However, legal advice has been received that whilst the evidence base would be appropriate as a framework for future Local Plan work at the district level, and would have “weight” as a written agreement between the 10 authorities, it would be subject to challenge and scrutiny at each district’s examination; this could undermine the GMSF over time. As such given that GM wants to manage the scale and distribution of development collectively, the advice is that the most secure route to achieve this would be the preparation of a joint Development Plan Document. Consequently the AGMA Executive Board has agreed to the production of a statutory joint Greater Manchester Spatial Framework Development Plan Document.
- 1.5 Although the document will be produced collaboratively across GM, with the approval of documentation for the initial consultation stages delegated to the AGMA Executive Board (Joint Committee), the responsibility for the Publication and Submission versions of the GMSF and its ultimate Adoption, will remain the responsibility of each individual Greater Manchester Council. This will ensure the timely production of the plan, but also importantly the ability of each individual Council to retain control over the contents of the GMSF.

2.0 Scope

- 1.1 The GMSF will express the long term spatial vision for GM and be a pro-active tool for managing growth, providing the ‘roadmap’ for the type of place(s) to be created.
- 1.2 There is a balance to be struck between what is needed at the GM strategic level to support growth and reform objectives and which matters are best addressed at the local level.
- 1.3 It is not possible or desirable to be entirely prescriptive about the scope at this stage. It may be necessary to expand, or reduce, the scope of the GMSF as work progresses, depending on the results of technical assessments, consultation and stakeholder engagement.
- 1.4 At this stage it is proposed that the following principles should underpin the production of the GMSF and as such it should:
 - Address strategic planning and infrastructure matters
 - Add value
 - Leave locally specific /detailed issues to individual district Local Plans
 - Make sense as a standalone document
 - Set out a coherent, understandable spatial strategy, providing clarity regarding GM’s future development
 - Support the delivery of agreed strategic priorities
- 1.5 In addressing matters of strategic importance the GMSF will provide Trafford with an overall structure within which to review its Local Plan; it will enable many of the complex issues, once dealt with at the regional level, to be resolved at the City Region level in collaboration with the other nine GM districts.

2.0 Resources

2.1 Work is underway to identify the level of resource required to undertake this work. It is likely that there will be a call on district resources to support the small central capacity but also there will be a requirement to procure external capacity for specific pieces of work, and there will be costs associated with the consultation and examination processes. Currently, it is envisaged that this resource will be met from the existing Strategic Planning budget (see section 5.0).

3.0 Timescale

3.1 The following timetable assumes that there are no significant delays.

| Stage | Timetable |
|---|---------------------------|
| Initial consultation on the objectively assessed development need (stage completed) | September – November 2014 |
| Consultation on SHMA/principles to underpin option development | July 2015 |
| Consultation on full draft GMSF and period for representations | July 2016 |
| Publication of the GMSF and period for representations | May 2017 |
| Submission of the GMSF to the Secretary of State | September 2017 |
| Examination in public | January 2018 |
| Adoption of the GMSF by GMCA/AGMA | September/October 2018 |

4.0 Implications for the Trafford Local Plan: Land Allocations

- 4.1 Before the announcements around the GMSF, work was well advanced in Trafford on the LAP, and it had been anticipated that the second draft of the LAP would be published for public consultation in January/February 2015. Following the clarification of the scope and role of the GMSFDPD, legal advice was sought to understand the risks of proceeding with the LAP, given the production of the GMSFDPD.
- 4.2 It is considered that there is a possible procedural issue in the Council actively promoting two development plan documents that may be based on different levels of growth, particularly given that it is anticipated that the LAP is scheduled for Examination at a time that the GM DPD would be reaching its pre-submission stage. The advice is that any discrepancy between levels of growth is likely to bring into question the land targets set out in Policy L1 and W1 of the Core Strategy, which form the basis from which the LAP is derived and ultimately that there may be a risk of the LAP being found unsound by the Planning Inspector. This view has been reached in the context of recent decisions in Cheshire East and Doncaster council's.
- 4.3 Not proceeding with the LAP will mean that the Council will not have a complete and up to date development plan and that there would need to be a continued reliance on the Trafford Core Strategy (2012) and those remaining aspects of the Revised Trafford Unitary Development Plan (2006), until such time that the development plan is comprehensively reviewed. It should also be noted that advice suggests it would not be appropriate to publish a first consultation draft of a Revised Trafford Local Plan in advance of the GMSF being "published", prior to its submission for independent examination. The above timetable would suggest this would be around mid-2017.

- 4.4 Not proceeding with the LAP should not prevent development taking place in the Borough until such time that a Local Plan review can take place. The Trafford Local Plan: Core Strategy provides a strategic framework within which decisions can be determined in relation to the five strategic locations, (Pomona, Wharfside, Lancashire County Cricket Ground, Trafford Centre Rectangle (Trafford Quays) and Carrington); Trafford's town centres and its priority regeneration areas, together with other key policies such as affordable housing. Indeed, much of the work carried out to date, in relation to the LAP, particularly that relating to matters such as the Sustainability Appraisal (SA) and transport modelling will have value in determining planning applications in advance of a revised Trafford Local Plan being produced and will provide a good foundation for both the GMSF DPD and a revised Trafford Local Plan.
- 4.5 Not proceeding with the LAP at this stage would also enable Trafford to resource and play a much more active role in the preparation of the GMDPD, which is considered to be vital to ensure that that Plan meets all the Council's expectations and will therefore be deliverable at the local level. At present it is anticipated that the cost of producing the GMSF will be met from the existing Strategic Planning budget, however should additional work be required or funding identified then this position will need to be revisited.
- 4.6 Should Executive agree to the production of the GMSF, procedurally it will be necessary to amend the Trafford Local Development Scheme (LDS), as proposed in Appendix A of this report, detailing the proposed timetable for the production GMSF DPD. Similarly, the LDS will be revised to indicate the position in relation to the production of the LAP.

Other Options

The following alternative options have been considered:

- Continue work on the Trafford Local Plan: Land Allocations based on the targets established within the Trafford Local Plan: Core Strategy alongside the preparation of the GMSF. It is considered that there is possible procedural issue in the Council actively promoting two development plan documents that may be based on different levels of growth and as such there is a possible risk of the LAP being found unsound. This approach would see the LAP prepared following the housing requirement contained within the Core Strategy whereas the Greater Manchester DPD would represent an up-to-date assessment of the full, objective assessment of housing need in accordance with Paragraph 47 of NPPF.
- Carry out a review of the Trafford Local Plan outside, and separate to, the framework of the GMSF. It is considered that undertaking a unilateral review of the Trafford Local Plan would not demonstrate that the authority is meeting its requirements under the duty to cooperate and would also undermine the extensive joint working and collaboration to date across GM. Additionally it is considered that because Trafford has a number of housing market areas within it, crossing district boundaries, to identify the borough's objectively assessed in isolation would undermine the robustness of the LAP and therefore the consideration of its soundness at the examination.
- Support the preparation of the GMSF as an informal planning document. Although this would require fewer resources than the production of a statutory DPD, the legal advice was clear that it would be subject to challenge and scrutiny at each district's examination into their Local Plan DPDs.

Consultation

As detailed in section four of this report, an initial consultation has been held in relation to the objectively assessed development need (both economic and residential). There will be a number of additional periods of consultation prior to the consideration of the Plan by an independent examiner. Although these periods of public consultation will need to comply with regulations governing the production of DPDs, a GM wide statement of consultation on joint development plans is to be produced by the GM Planning and Housing Team. As appropriate/necessary elements of the GM wide consultation statement will be incorporated into Trafford's Statement of Community Involvement, to ensure a proportionate and consistent approach to consultation and engagement on the GMSF across GM.

Reasons for Recommendation

To enable the AGMA Executive Board (Joint Committee) to proceed with the preparation of the draft GMSF DPD up to the point of publication and submission to DCLG.

Key Decision Yes

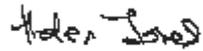
If Key Decision, has 28-day notice been given? Yes

Finance Officer Clearance ... PC.....

Legal Officer Clearance ... JL.....

CORPORATE DIRECTOR'S SIGNATURE.....

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.



Appendix A

GMSF - PROPOSED WORDING FOR TRAFFORD'S LOCAL DEVELOPMENT SCHEME

| | |
|-------------------------|---|
| Role and subject | <p>The GMSF will:</p> <ul style="list-style-type: none"> • set out the long-term spatial vision for the sub region (up to 2035) and the overall strategy for delivering the vision; • identify the overall level of housing and employment development that is envisaged and the geographical distribution of that development; • define the sub region's hierarchy of regional, city and town centres; • identify the main improvements in infrastructure that are required to support that scale and distribution of development; • set out the strategic spatial policies for the sub region; • set out the main development management policies for the sub region, and • support the delivery of other key strategies and plans |
| Coverage | Greater Manchester wide |
| Status | DPD |
| Conformity | With NPPF and having regard to the Greater Manchester Strategy, Greater Manchester Growth and Reform Plan. |

| Stage | Timetable |
|---|---------------------------|
| Initial consultation on the objectively assessed development need | September – November 2014 |
| Consultation on SHMA/principles to underpin option development | July 2015 |
| Consultation on full draft GMSF and period for representations | July 2016 |
| Publication of the GMSF and period for representations | May 2017 |
| Submission of the GMSF to the Secretary of State | September 2017 |
| Examination in public | January 2018 |
| Adoption of the GMSF by GMCA/AGMA | September/October 2018 |

TRAFFORD COUNCIL

Report to: Executive
Council (for information)
Date: 25 March 2015
Report for: Decision
Report of: Leader and
Chief Executive

Report Title

GM Devolution – Memorandum of Understanding

Summary

This report provides information on the Memorandum of Understanding developed between GM local authorities, GM CCGs and NHS England which creates a framework for the delegation and ultimate devolution of health and social care responsibilities to Greater Manchester. It also sets out the actions required by this Council to meet the requirement of the MoU.

Recommendation(s)

The Executive is requested to:

- I. Note the report considered and agreed at the joint GMCA and AGMA Executive Board meeting on 27th February 2015 attached at Appendix A.
- II. Agree and endorse the MOU signed by representatives of AGMA, GM CCGs and NHS England and recognise that it is an important and significant step in the development of a new collaborative partnership for health and social care in Greater Manchester.
- III. Authorise the Chief Executive to bring a report to the Executive in June 2015 setting out how the authority will meet the locality requirements of the MoU.

Contact person for access to background papers and further information:

Name: Jane Le Fevre
Extension: 4215

Background Papers: None

Implications:

| | |
|---|---|
| Relationship to Policy Framework/Corporate Priorities | The proposals would support all key priorities and policies. |
| Financial | None at this stage |
| Legal Implications: | The MoU does not propose any changes in legal responsibilities or accountabilities of any local authority or CCG. It confirms that the NHS Constitution and Mandate will still apply and services will remain as part of the NHS or councils. However it also recognises that this will provide the opportunity for those services to be tailored to meet the needs of the residents of GM and each local district. |
| Equality/Diversity Implications | None as a result of this report |
| Sustainability Implications | None as a result of this report |
| Staffing/E-Government/Asset Management Implications | None as a result of this report |
| Risk Management Implications | None as a result of this report |
| Health & Wellbeing Implications | None as a result of this report |
| Health and Safety Implications | None as a result of this report |

1.0 Introduction

1. As set out in the attached report to AGMA/GMCA the integration of health and social care within and across Greater Manchester has been a major priority of GM's growth and reform strategies for some time.
2. This is also recognised in the Reshaping Trafford Programme and the Trafford Better Care Fund which focus on the integration of health and social care and integrated commissioning at a local level to ensure that services are effectively targeted, thereby reducing dependency and supporting residents to be economically active.

Memorandum of Understanding (MOU)

3. The MOU agreed in February will support and enable the authority, working with its partners, to make this a reality; particularly as it has the support of the Trafford CCG, all of the NHS Trusts and Foundation Trusts that operate within the Borough and the NW Ambulance Service.
4. The local authorities, CCGs and NHS England have agreed that the next step in the process is the development of a Road Map which will set out what is required from all parties to progress to full devolution of NHS England powers and funding to Greater Manchester by April 2016. The Road Map will also include the development of plans for all localities to work with their local CCGs to produce whole system local area plans by April 2016.

5. It should be noted that the MoU does not propose any changes in legal responsibilities or accountabilities of any local authority or CCG. It confirms that the NHS Constitution and Mandate will still apply and services will remain as part of the NHS or councils. However it also recognises that this will provide the opportunity for those services to be tailored to meet the needs of the residents of GM and each local district.
6. The report to AGMA/GMCA summarises the agreement with NHS England and the governance proposals. It includes the following objectives and principles:
 - Improving the health and well-being of all of the residents of Greater Manchester from early age to elderly, recognising that this will only be achieved with a focus on the prevention of ill health and the promotion of well-being.
 - We want to move from having some of the worst health outcomes to having some of the best.
 - We aim to close the health inequalities gap within GM and between GM and the rest of the UK faster
 - GM will remain firmly within the NHS and social care system, uphold the standards set out in national guidance and continue to meet statutory duties including those of the NHS Constitution and Mandate and those that underpin the delivery of social care and public health services.
 - Decisions will be focused on the interests and outcomes of patients and people in GM and organisations will collaborate to prioritise those interests.
 - Decision making will be underpinned by transparency and the open sharing of information.
 - There will be a principle that 'all decisions about GM will be taken with GM'. This will start on 1st April 2015.

Implications for Trafford

7. As members are aware, Trafford already has a history of strong partnership working between health and social care. We already have in place a S75 agreement between Trafford CCG and the council to ensure integrated commissioning of community based education, health and social care services for children and young people and we have also agreed a new S75 agreement with Trafford CCG to support integrated commissioning of Adult Health and Social Care Services as part of the national Better Care Fund. Our existing S75 partnership agreement with Penine Care also supports the delivery of integrated community based health and social care services for both children and young people and adults.
8. This new development has the potential to extend that joined up approach to the whole of GM and at the same time to broaden it to include the acute and specialist health sectors.
9. Members are requested to endorse the MoU, which will bring devolution of health powers to GM partners and support and enable the authority to progress the integration aspirations as outlined in the Reshaping Trafford Blueprint with pace; and agree that a further report on implementation will be considered at the June Executive.

Finance Officer Clearance ID
Legal Officer Clearance JL

[CORPORATE] DIRECTOR'S SIGNATURE

A handwritten signature in cursive script, appearing to read "Theresa Grant".

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

This page is intentionally left blank

**JOINT GREATER MANCHESTER COMBINED AUTHORITY
& AGMA EXECUTIVE BOARD MEETING**

Date: 27th February 2015

Subject: GM Health and Social Care

Report of: Sir Howard Bernstein, Head of the Paid Service and Steven Pleasant
Lead Chief Executive for Health

PURPOSE OF REPORT

This report provides an analysis of a Memorandum of Understanding that has been developed between GM local authorities, GM CCGs and NHS England in consultation with other stakeholders including GM NHS Providers. The MoU creates a framework for the delegation and ultimate devolution of health and social care responsibilities to Greater Manchester as part of a new partnership between local authorities, CCGs, NHS England and other stakeholders.

A Road Map starting in April 2015 and leading to full devolution in April 2016 is part of the MoU.

RECOMMENDATIONS:

1. To welcome the MoU as representing an important and significant step in the development of a new collaborative partnership model for GM health and social care leading to the full devolution of responsibilities in April 2016.
2. To reinforce the commitment of the GMCA/AGMA to work constructively and in partnership with all NHS stakeholders so that together all organisations create the best possible platform for improving the outcomes for local people and the long term sustainability of the health and social care system.
3. To endorse the MoU and commend it to all ten AGMA local authorities and request that it is considered and endorsed by each authority by 30th March 2015
4. To authorise officers to bring back a report following consultation with NHS colleagues on an Implementation Plan.

CONTACT OFFICERS:

Sir Howard Bernstein,
h.bernstein@manchester.gov.uk

Liz Treacy
l.treacy@manchester.gov.uk

Steven Pleasant
Steven.pleasant@tameside.gov.uk

BACKGROUND PAPERS:

None

INTRODUCTION

1. The integration of health and social care within and across Greater Manchester has been a major priority for some time as it is a key component of GM's growth and reform strategies. This was reflected in the GM Devolution Agreement agreed with the Government in November 2014, which secured access to a range of functions to drive growth and reform, and in which GMCA, working with GM CCGs and other stakeholders, was invited to bring forward a business plan for the integration of health and social care across Greater Manchester.
2. Since that Agreement officers have been working with CCGs, Providers and other stakeholders to bring forward such a plan. Discussions have also taken place with NHS England whose support for such an approach would be crucial. In the light of these further discussions GM local authorities and the full range of NHS stakeholders have been invited to develop ambitious plans for a new partnership between Greater Manchester health and social care bodies and NHS England which would significantly widen the platform for collaboration from that identified in the Devolution Agreement; and crucially, bring into sharp focus and deliver the devolution of all current funding and decision making for health and social care within Greater Manchester.
3. NHS England's 5 Year Forward View, which was published last year, articulates why change is urgently required, what change might look like and how it can be achieved. Collaboration between different stakeholders within the NHS and with social care providers and funders is at the heart of this strategy. NHS England sees GM as a test bed for new approaches to delivering new models of integrated care which reflect the needs of the local population. Through a new partnership approach involving local and national stakeholders greater freedoms and flexibilities and new place-based organisational models can be explored and developed to make the best use of total resources and deliver better outcomes for people. Such an approach will address the fundamental challenges of how the GM health and social care system can become financially sustainable over time, and how health and well being can support and enhance GM's priority of reducing worklessness, supporting people back into employment and providing growth through innovation.

4. A Memorandum of Understanding has therefore been worked up by the GM local authorities and CCGs, with support from GM NHS providers, which responds to this invitation. It is intended to provide the essential broader framework within which NHS England working with a wide GM partnership of local authorities, CCGs and other stakeholders can prepare for the full devolution of relevant NHS funding to GM and for GM to become the trailblazer for the objectives set out in the NHS 5 Year Forward View.
5. The MoU has been in development for several weeks between all of the relevant GM bodies. It has the support of the NHS Providers (NHS Trusts) which is key to the successful delivery of devolution and integration. This report requests the endorsement of GMCA and AGMA to the MOU and requests GMCA and AGMA to recommend the endorsement of the MOU to all ten local authorities in order to progress the Road Map to full devolution which is described within the MoU and which is due to commence from the 1st April 2015. GM CCGs which have agreed the overall direction of the strategy will also be requested to take the MoU through their own decision making processes.
6. It should be noted that, as a MoU, the document sets out the broad principles that the parties have agreed, the objectives, a proposed governance structure and a timeline for implementation all of which are explained in more detail below. It does not make any changes to the statutory accountabilities or duties of local authorities or CCGs nor will the accountabilities or existing financial flows to CCGs or local authorities be affected.

THE CASE FOR CHANGE IN GREATER MANCHESTER

7. Health and social care services represent a significant proportion of the total public services costs incurred in GM and are central to GM's growth and reform agenda. It is estimated that under the "business as usual" model the GM health and social care economy faces a fiscal challenge of £1.1bn pa by 2017/18.
8. The ongoing challenge of securing financial sustainability is made all the more difficult by a number of factors;
 - Artificial barriers between primary care, secondary care, social care, self-care and social support;
 - Hospital services which are fragmented and expensive; and which tend to focus more on organisational priorities than those of the places they are intended to serve.
 - Mental Health services which fail to address community requirements, particularly in supporting people into work;
 - Primary Care Providers who are not empowered or incentivised to make intensive intervention at the earliest stages to prevent ill – health which is resulting in rising levels of health inequalities;
 - Inadequate focus on public health prevention;
 - A social care system that does not link with health providers to support people to independence;

- National Delivery Models which fail to prioritise local partnerships with academic institutions to drive innovation, improvement and large scale change.

The impact of these constraints is intensified by fragmented leadership structures which creates an inability to focus on place, and regulation that focuses on institutional outcomes not systems and communities.

9. GM is seen to have the leadership capacity to develop the partnership structures to create stronger collaboration across public services; the opportunity to place integration of health and social care services at the heart of a wider reform agenda for public services; to create the framework where new incentives and flexibilities can help address many of these challenges; and to harness the activities of academic and research institutions to support the transformation which is required.
10. Through the CA/AGMA and the CCGs working with other stakeholders it has been possible to develop shared priorities for some time; the need to improve the health and well being of the residents of GM from early age to elderly and to move from having some of the worst health outcomes to having some of the best; to close the health inequalities gap within GM and between GM and the UK faster; to contribute to growth and connect people to growth; to address the issue of financial sustainability; to enable effective integrated health and social care across GM; to ensure people are helped to take more control over their own health and care; to redress the balance of care to move it closer to home where possible; forge new partnerships on health based activities within Universities and Science; and strengthen the focus on prevention and public health.
11. It is GM's collective leadership capacity on public services and its active pursuit of clear and shared objectives which the MoU seeks to build upon to address the challenges facing the health and social care system within Greater Manchester.
12. This agreement will address those challenges by bringing both decision making and resources closer to GM residents with more direct local control over services which were previously commissioned nationally or regionally. It will ensure false boundaries between hospital care and neighbourhood care and support are removed to ensure residents receive better joined up care. It will also prioritise early help and support to ensure people are able to take more control over their health and prevent existing illnesses from getting worse. Residents should therefore see better health and social care outcomes and have an improved experience of services across GM.

SCOPE OF MEMORANDUM OF UNDERSTANDING (MoU)

13. A copy of the MoU is enclosed as Appendix 1. Its scope is comprehensive and involves the entire health and social care system in GM as follows;
 - Acute Care
 - Primary Care

- Community Services
- Mental Health Services
- Social Care
- Public Health and
- Health Education

It also encompasses the key enablers of change, including changes to;

- Governance and Regulation
- Resources and Finance
- Capital and Estates
- Workforce, and
- Information Sharing and Systems

14. The scope and nature of the Agreement embodied in the MoU is ground breaking and unprecedented, and provides the health and social sector in GM with the essential platform to optimise our potential and re-shape the way in which health and social care services are delivered to reflect the needs of, and outcomes for, our local populations.
15. The MoU does not change the position of NHS services in GM in relation to the NHS Constitution and Mandate, all of the services will remain firmly part of the National Health Service. The MoU does however set the groundwork for GM to exercise freedoms and flexibilities to provide innovative approaches focused on the needs of the residents of GM.

ROAD MAP TO FULL DEVOLUTION

16. A Road Map will be developed which sets out the key changes which need to be delivered by GM and its national partners to enable the devolution of responsibilities and resources from NHS England to GM in a phased manner. This process will be supported by robust governance arrangements and a clear delivery plan.
17. The Road Map is considered essential to the management of risk and to enable GM to take more control of its own future and responsibilities in a way that is safe for patients and citizens and to ensure that the duties of the NHS constitution and all national accountability arrangements can continue to be delivered.
18. The financial year 2015/16 is depicted as a transition year with actions being planned and agreed with all parties with the objective of achieving full devolution from April, 2016. The Road Map to full devolution includes stepped increases in responsibilities and powers, underpinned by a clear set of financial and performance milestones and trigger points, robust risk and benefit share arrangements and the alignment of formal GM governance arrangements. These governance arrangements will effect a partnership between local authorities, CCGs, other NHS stakeholders – which for the purpose of this report is labelled “GM”

The key milestones include the following;

- April, 2015 ; all decisions about GM will be taken with GM
- April, 2015 ; the process for the establishment of shadow governance arrangements agreed including the Strategic Partnership Board
- By October, 2015 ; initial elements of the Business Case to support the CSR agreed, including a specific investment fund proposal to further support primary and community care
- During 2015; production of the final agreed GM Health and Social Care Strategic Sustainability Plan and related transformation case.
- December 2015; in preparation for devolution, GM and NHS England will have approved details on the funds to be devolved and supported governance, and local authorities and CCGs will have formally agreed the integrated health and social care arrangements.
- April 2016; Full devolution of agreed budgets, with the preferred governance arrangements and underpinning GM and locality S75 arrangements in place.

Workstreams have already been identified to progress all of this work - the principles, initial areas of work and potential achievements will be agreed by the Project Board and published separately.

APPROACH TO GOVERNANCE

19. One of the most significant areas of work will relate to the development of clear, transparent and accountable governance arrangements that reflect the genuine partnership between local authorities and NHS bodies. These will be shaped by CCGs and the local authorities in accordance with existing accountability arrangements whilst recognising that over time different ways of working will be required to deliver the transformation ambitions of GM.
20. To guide this work a number of principles have been agreed. These include the acknowledgement that local authorities and CCGs will retain their statutory functions and that accountability for resources will remain as now for 2015/16 with the partnership between the organisations reflecting the contributions and competencies of all the parties. Importantly, these principles also underline the critical role of inclusivity – commissioners, providers, patients and the public having a role in shaping the future of GM health and social care together.
21. There are currently seen to be several components of new governance arrangements which will be developed over the coming months.
 - Greater Manchester Strategic Health and Social Care Partnership Board (the Strategic Partnership Board)

From April 2015 this Board will be formed to include local authorities and CCGs, Providers, NHS England and the regulatory bodies. It is proposed that this is the body that will include elected member representation from the local authorities. It will oversee the strategic development of the GM health economy, and will have specific responsibilities for the GM Health and Social Care Strategic Sustainability Plan and related investment funding proposals. The intention is that during 2015/16 work will be undertaken to explore with CCGs and Government whether the Board should become a statutory body

as part of the enactment of legislation to give effect to the Devolution Agreement.

- GM Joint Commissioning Board

From April, 2015 a Shadow Board will be created including local authorities, CCGs and NHS England to agree decisions on all GM spend which is currently directly held by NHS England (there cannot however be any change in legal responsibility for decision making or financial responsibility at the present time). NHS England have agreed that the Board will be engaged in all decisions affecting GM health and social care and that financial plans, budget proposals and current performance will be shared across the GM health and social care economy.

During 2015/6 the shadow board will move to a formal structure operating under agreed S75 arrangements; there will need to be agreement reached on details of financial accounting arrangements within the current NHS accountability framework for GM wide funds devolved from NHS England. The intention is to have all of these arrangements in place from April 2016 so that the formal GM Joint Commissioning Board is in place – one of the key triggers to full devolution.

- Locality Arrangements

During 2015/6 each locality (for each of the local authorities in GM) will build on their current integration work and agree a MoU between the local authority and local CCG (s) which fairly reflects the responsibilities of CCG's and local authorities and supports how the parties wish to see working arrangements operate in each locality. This is where appropriate local authority health and social care funding should be pooled; the opportunities for further alignment of CCG resource management arrangements will be explored, and where the details for integrating health and social care, public health / prevention etc will be developed.

There will be 10 plans and it will be important to ensure that all deliver a consistent approach to service delivery and spend across GM. One of the responsibilities of the Strategic Partnership Board will be to work with localities to ensure this is the case so that investment funds held at that level are deployed effectively.

The existing role of local authorities and their local CCGs to determine the priorities and relevant spend for their areas will remain unchanged.

- NHS Providers

During 2015/6 providers will establish an agreed form of arrangements to enable them to provide a collective and positive response to the requirements of the GM Commissioning Board building on previous joint working arrangements. They will contribute to the principle of co-design and act accordingly. They will also develop a formal agreement with the regulatory authorities so that this becomes operational as soon as possible within 2015/16.

The NHS providers have produced a letter confirming their support for the overall strategy and this is enclosed at Appendix 2.

- National Bodies

NHS England will facilitate links with the various national bodies and arrangements for the formal involvement of national bodies other than NHS England will proceed during 2015/6 to ensure these are operational by April, 2016.

SUPPORT ARRANGEMENTS

22. There will be a requirement to establish technical support requirements to enable these new arrangements to function effectively with value for money at the heart of the process.
23. A Programme Board will be established to oversee all the various workstreams. Progressing the workstreams at the pace required will also require considerable investment in capacity by all of the partners to the MoU and it is agreed that a more detailed programme and resourcing plan will be finalised by mid March. This will include the recruitment of a full time Chief Officer and a finance director.

CONCLUSIONS

24. Since the Devolution Agreement was endorsed considerable progress has been made in charting a new strategic direction for health and social care within GM. The MoU appended to this report builds on this and provides an unprecedented opportunity for a new partnership structure not only to take active control over the shape and direction of health and social care within Greater Manchester, but to make significant progress in underpinning the long term financial sustainability of the entire system. In so doing there is potential to oversee the transformation of services, close the inequalities gap within GM and between GM and the rest of the country.

Detailed recommendations appear at the front of this report.

Sir Howard Bernstein
Head of Paid Service.
Greater Manchester Combined Authority
h.bernstein@manchester.gov.uk

Steven Pleasant
Lead Chief Executive, Health.
Steven.pleasant@tameside.gov.uk



Greater Manchester Health and Social Care Devolution Memorandum of Understanding

1 Introduction

The overriding purpose of the initiative represented in this Memorandum of Understanding is to ensure the greatest and fastest possible improvement to the health and wellbeing of the 2.8 million citizens of Greater Manchester (GM). This requires a more integrated approach to the use of the existing health and care resources - around £6bn in 2015/16 - as well as transformational changes in the way in which services are delivered across Greater Manchester.

To facilitate this, the Memorandum of Understanding creates a framework for achieving the delegation and ultimate devolution of health and social care responsibilities to accountable, statutory organisations in Greater Manchester (GM)ⁱ. It sets out the process for collaborative working in shadow form from 1st April 2015 and identifies the areas for further detailed work during the remainder of the year leading to full devolution in April 2016ⁱⁱ. It signposts the medium and longer term outputs and impacts anticipated from this process.

All parties agree to act in good faith to support the objectives and principles of this MoU for the benefit of all Greater Manchester patients and citizens.

2 Parties

The Parties to the agreement are:

- All local authority members of the Association of Greater Manchester Authorities (AGMA) and all Greater Manchester Clinical Commissioning Groups (CCGs) (together known as GM)
- NHS England (NHSE)ⁱⁱⁱ

Letters of support from Greater Manchester NHS Trusts, Foundation Trusts and NW Ambulance Service are annexed to this MoU at Appendix 2.

3 The Memorandum of Understanding

The MoU sets out the ambition for full devolution of funding and decision making^{iv} for health and social care within GM.

It should be read in conjunction with the commitments of the Greater Manchester Combined Authority (GMCA) Devolution Agreement; it builds upon the invitation to GMCA and Greater Manchester CCGs and Trusts to develop a business plan for the integration of health and social care across Greater Manchester. This will include the development of a GM Business Case (known as the GM Strategic Sustainability Plan), a comprehensive strategic plan to underpin a sustainable health and social care system which will inform submissions to the forthcoming Comprehensive Spending Review.

This MoU focuses on the elements of devolution relating to NHSE, the CCGs and AGMA, and their relationship with the GM provider community. It constitutes a roadmap, with initial undertakings which can be agreed by each constituent party now and further anticipated steps which will require ratification in the light of experience and developments in the future.

NHSE will engage with GM, the Department of Health and other national bodies on further phases of the work including on research & development, workforce and estates^v. The outcome of all related discussions with other national bodies on potential areas for devolution and/or changes to their interaction with the GM community will, where relevant, be reflected in separate agreements.

The MoU, in establishing the framework, sets out:

- Context: **why** we are doing this
- Detail: **what** we want to deliver
- The principles we will follow and the processes by which we will implement the changes, with timescales: **how** we will deliver

4 Context and Objectives

The parties share the following objectives:

- To improve the health and wellbeing of all of the residents of Greater Manchester (GM) from early age to the elderly, recognising that this will only be achieved with a focus on prevention of ill health and the promotion of wellbeing. We want to move from having some of the worst health outcomes to having some of the best;
- To close the health inequalities gap within GM and between GM and the rest of the UK faster;
- To deliver effective integrated health and social care across GM;
- To continue to redress the balance of care to move it closer to home where possible;
- To strengthen the focus on wellbeing, including greater focus on prevention and public health;
- To contribute to growth and to connect people to growth, e.g. supporting employment and early years services; and
- To forge a partnership between the NHS, social care, universities and science and knowledge industries for the benefit of the population.

We recognise that integrating health and social care is vitally important for improving the efficiency of our public services and delivering improved health and wellbeing for our population. A digitally integrated health economy with strong partnerships with research institutions and industry can support GM's economic growth strategy. GM has many assets, strengths and capabilities that allow the economy, its residents, industry and commerce to develop and grow. This includes world class academic institutions which deliver health research and innovation as a contributor to growth.

The NHS Constitution sets out clearly what patients, the public and staff can expect from the NHS. GM wants to build upon the rights and pledges of the constitution and provide further opportunities for patients and the public to be involved in the future of their NHS.

The NHS Five Year Forward View articulates why change is urgently needed, what that change might look like and how it can be achieved. It describes various models of care which could be provided in the future, defining the actions required at local and national level to support delivery. Furthermore, it sets out the development of new organisational models. GM is committed to being an early implementer and a test bed for new, innovative approaches of delivering new models of integrated health and social care which reflect the needs of local populations.

GM now needs the freedoms and responsibilities to optimise its potential. This MoU builds on the Devolution Agreement which created the platform for greater freedoms and flexibilities through the invitation to GMCA and Greater Manchester Clinical Commissioning Groups and trusts to develop a strategic plan for the integration of health and social care across Greater Manchester, making best use of existing budgets to transform outcomes for local communities and including specific targets for reducing pressure on A&E and avoidable hospital admissions. This work will now form part of a much broader framework where NHSE are working with GM to prepare for the full devolution of relevant NHS funding to GM and for GM to be a trailblazer for the objectives set out in the Five Year Forward View.

5 Overarching Principles

The agreement is underpinned by the following principles which will support the objective of implementing a strategic sustainability plan for GM to assume full responsibility for NHS funding streams for Greater Manchester:

- GM will still remain part of the National Health Service and social care system, uphold the standards set out in national guidance and will continue to meet statutory requirements and duties, including those of the NHS Constitution and Mandate and those that underpin the delivery of social care and public health services^{vi};
- Decisions will be focussed on the interests and outcomes of patients and people in Greater Manchester, and organisations will collaborate to prioritise those interests;
- In creating new models of inclusive governance and decision-making, the intention is to enable GM commissioners, providers, patients, carers and partners to shape the future of GM together. There will be regular communication and engagement with patients, carers and the public during the different stages of devolution;
- Commissioning for health and social care will be undertaken at a GM level where the GM place-based approach is optimum for its residents, rather than at a regional or national level;
- A principle of *subsidiarity* will apply within GM, ensuring that decisions are made at the most appropriate level;

- Decision making will be underpinned by transparency and the open sharing of information;
- There will continue to be clear accountability arrangements for services and public expenditure;
- The delivery of shared outcomes will drive changes to organisational form where necessary;
- Any changes to accountabilities and responsibilities for commissioning health and care services will be carefully evaluated, agreed with the DH where necessary and phased to achieve the benefits of devolution at the maximum speed consistent with safe transition and strong governance. The risks associated with transition of health commissioning responsibilities to GM will be shared with NHSE;
- There will be a transfer of skills and resources to support the commissioning functions being transferred, and we will ensure that neither duplication of activity nor an increase in total cost arises from these changes;
- The principle of new burdens should also apply, such that where GM is expected to take on a new responsibility during this period, the funding to cover the associated costs will transfer, to the extent where there is such national funding available;
- We commit to the production, during 2015/16, of a comprehensive GM Strategic Sustainability Plan for health and social care. This aligned with the 5 Year Forward View will describe how a clinically and financially sustainable landscape of commissioning and provision could be achieved over the subsequent 5 years, subject to the resource expectations set out in the 5 Year Forward View^{vii}, appropriate transition funding being available and the full involvement and support of national and other partners.
- We will aim to address any funding inequalities for the benefit of all residents in GM;
- A radical approach will be taken to optimising the use of NHS and social care estates^{viii};
- GM will be able to access any new or additional health and/or social care funding streams that become available during the CSR period^{ix};
- There will be a principle that *“all decisions about Greater Manchester will be taken with Greater Manchester”^x*;
- GM will work collaboratively with local non-GM bodies and take into account the impact of GM decisions upon non-GM bodies and their communities.

6 Scope

The parties will work together during 2015/16 (the Build-Up Year) to agree the mechanisms and timescales to devolve powers and resources from NHS England and local authorities to GM to achieve the aims and achievements set out below.

The scope is comprehensive and will involve the whole health and care system:

- Acute care (including specialised services^{xi});
- Primary care^{xii} (including management of GP contracts);
- Community services;
- Mental health services;
- Social care;
- Public Health^{xiii};
- Health Education*
- Research and Development*

*subject to discussion with the relevant bodies

The key enablers of transformation will include changes to:

- Governance and regulation;
- Resources and Finance;
- Capital and Estate;
- Workforce;
- Communication and Engagement;
- Information sharing and systems, including the potential for digital integration across GM.

A road map will be developed which sets out the key changes to be delivered by GM and its national partners, and specifically for the devolution of responsibilities and resources from NHS England to GM in agreed phases of change. This will be supported by robust governance arrangements and a clear delivery plan.

By working together, NHS England and GM will be able to fully understand and manage risk together. GM will take more control of its own future and responsibilities, in a phased way that is safe for patients and ensures the duties in the NHS constitution and all national NHS accountabilities continue to be delivered.

7 Roadmap

A significant amount of work will be completed during 2015/16, which is recognised as a Build-Up Year. A clear roadmap and supporting delivery plan will be developed and agreed with all parties with the objective of achieving full devolution from April 2016. The roadmap from delegation to full devolution will include stepped increases in responsibilities and powers, underpinned by a clear set of financial and performance milestones and trigger points, robust risk and benefit share arrangements and aligned development of GM governance arrangements. It will specifically enable regular reviews of progress against the key milestones drawn from the agreed aims and achievements:

- April 2015- *“All decisions about Greater Manchester will be taken with Greater Manchester”*;
- April 2015- Process for establishment of shadow governance arrangements agreed and initiated;
- By October 2015 – Initial elements of the Business Case to support the CSR agreed, including a specific investment fund proposal to further support primary and community care;
- During 2015 – Production of the final agreed GM Strategic Sustainability Plan and related transformation funding case;
- December 2015 – In preparation for devolution, GM and NHSE will have approved the details on the funds to be devolved and supporting governance, and local authorities and CCGs will have formally agreed the integrated health and social care arrangements;
- April 2016 – Full devolution of agreed budgets, with the preferred governance arrangements and underpinning GM and locality S75 agreements in place.

A programme of work will be agreed by the parties and completed between now and October 2015. This will include consideration of the legislative framework and any changes required to implement GM NHS devolution and ensuring the work programme as a whole is fully aligned with the CSR process.

In addition to the work already being undertaken between parties, a number of additional high priority workstreams have been identified:

- Governance;
- Resource and Finance;
- Clinical and Financial Sustainability;
- Primary Care;
- Specialised Services;
- Capital and Estates;
- Research and Innovation.

Additional workstreams and cross-cutting themes will be identified and agreed between the parties over the coming weeks, and these are likely to include:

- Prevention and Wellbeing
- Integrated Care
- Information and Data Sharing;
- Workforce.

8 Governance and financial pathway

General

The governance arrangements will be based on the principle of *subsidiarity*, i.e. that decisions will be taken at the most appropriate level. The governance arrangements will be shaped by the CCGs and local authorities in accordance with existing accountability arrangements, whilst recognising that different ways of working will be required to deliver the transformational ambitions of GM. These arrangements will be underpinned by the following principles:

- GM NHS will remain within the NHS and subject to the NHS Constitution and Mandate;
- Clinical Commissioning Groups and local authorities will retain their statutory functions and their existing accountabilities for current funding flows;
- Clear agreements will be in place between CCGs and local authorities to underpin the governance arrangements;
- GM commissioners, providers, patients and public will shape the future of GM health and social care together;
- All decisions about GM health and social care to be taken within GM and by GM as soon as possible;

- Accountability for resources currently directly held by NHS England during 2015/16 will be as now, but with joint decision making with NHSE in relevant areas to reflect the principle of “all decisions about GM will be taken with GM”;
- There will be a new partnership reflecting the contributions and competencies of all parties.

The governance arrangements will be regularly reviewed to ensure the programme aims are delivered within the required timeline.

April 15 to April 16

Greater Manchester Strategic Health and Social Care Partnership Board (GMHSPB)

- In order to fulfil the ambition of Greater Manchester there is need to build upon the existing partnership arrangements and strengthen them both at local and GM level. A key step in facilitating the latter will be the development of a new body, the GMHSPB;
- **From April 2015** the GMHSPB will oversee the strategic development of the GM health and care economy, and will specifically steer the development of the GM Strategic Sustainability Plan and related investment funding proposals, which will be underpinned through local area plans. Commissioners and providers will be represented, plus NHS England and potentially other national bodies (e.g. Monitor/TDA);
- **During 2015/16** the process will be progressed through the GM devolution agreement for the formal establishment of the GMHSPB **by April 2016** with the same membership and function.
- A Chief Officer will be appointed to lead, manage and deliver the programme with appropriate staffing.

GM Joint Commissioning Board

- **From April 2015** there will be a Shadow Joint Commissioning Board (JCB) of GM local authorities, CCGs and NHSE. The shadow JCB will discuss and agree recommended decisions on all GM wide spend, but there will be no change in legal responsibility for decision making or financial accountability^{xiv};
- The shadow Joint Commissioning Board will be engaged in all decisions affecting GM health and social care;
- Financial plans, budget proposals and current performance will be shared across the GM health and social care economy;
- **During 2015/16** the Shadow JCB will move to formal JCB operating under agreed s75 arrangements, and agreement will be reached on the financially accountable body within the current NHS accountability framework. An approved form of governance and fundholding will be agreed;
- **From April 2016** a Joint Commissioning Board of local authorities, CCGs and NHSE will be in place.

Locality arrangements

- **During 2015/16** each locality will agree an MoU between the local authority and CCG(s) to support the locality working arrangements, which accurately and fairly reflects their respective responsibilities for health and social care in their areas
- Opportunities for further alignment of CCG resource management arrangements will be explored;
- Each locality will continue to build on existing arrangements (e.g. Better Care Fund) and agree a local area plan for integration of health, social care and public health/prevention to be implemented **from April 2016**. Local area plans will be the focus for joining up health and social care services and ensure a consistent approach to service delivery and spend across GM.

Providers

- **During 2015/16** providers will establish an agreed form of arrangements to enable them to provide a collective and positive response to the requirements of the shadow JCB, building on previous experience of successful joint working across the conurbation;
- They will support the proposals to include in the GM devolution arrangements a clear principle of co-design and act accordingly;
- They will develop with Monitor and TDA^{xv} a Memorandum of Agreement to underpin the operation of the provider element of the governance structure, to be formalised as soon as possible in 2015/16.

National Bodies

- Arrangements for formal involvement of national bodies other than NHSE in the development and ongoing delivery of the programme will be discussed and agreed with those bodies **during 2015**, with initial agreements on any changes to arrangements for 2015/16 being agreed **by April 2015**.

April 2016 Onwards

Our shared aim is to proceed to full devolution of relevant budgets and commissioning responsibilities as outlined below by 2016/17. This will include NHSE delegating or devolving all relevant funds to appropriate bodies in GM. These changes will require formal decision-making by relevant statutory bodies in the light of progress, learnings and developments in the Build-Up Year (2015/16).

Greater Manchester

- GMHSPB will set GM strategies and priorities. It will drive and facilitate the implementation of GM strategic priorities in the context of the NHS five year forward view and the GM Strategic Sustainability Plan^{xvi};

- It will provide system-wide management to ensure the strategic priorities are achieved;
- It will support locality health and social care plans to be strategically aligned and determine any allocations required of the available investment funds;
- GM Joint Commissioning Board will commission GM-wide services.

Local

- Local HWBs will agree strategies and priorities for delivery of integrated health and social care (including prevention) within their districts and in the context of the GM wide strategy and local priorities;
- GMHSPB will work with local areas to ensure strategic coherence and consistency across Greater Manchester;
- NHSE, CCGs and local authorities will pool relevant health and social care funds to a local Joint Commissioning Board, building from existing arrangements (e.g. Better Care Fund);
- Each local area will commission services in line with the relevant local area plan (e.g. Integrated Care).

Appendix 1 includes a draft Governance Overview.

Support Services

GM CCGs, working together with wider partner colleagues, will determine the scale, style and configuration of technical commissioning and business support services and ensure that they align with the wider three-level business strategies within GM to further support the devolution programme. In doing so, they will ensure that transition plans maximise value for money and that future arrangements fulfil the principle regarding transfer of skills and resources set out in section 5 above.

Delivery

A Programme Board will be created to oversee the development of the programme through the agreed workstreams and milestones.

9 NHS England Support to GM

NHSE will actively lead and facilitate the links to other national bodies/ALBs (e.g. DH, Monitor, TDA and HEE) to help all key bodies align to achieve the outcomes described in this MoU.

In this context, NHSE is committed to working with GM in pursuit of the following:

- GM to be responsible for designing and creating the provider structure and form to support its commissioning intentions in collaboration with the relevant regulators/ALBs^{xvii};
- GM to play a clearly defined leadership role in the oversight of its provider community^{xviii}, working in close partnership with Monitor, TDA and CQC;
- GM to be responsible for determining its skilled workforce, capacity, education and training needs^{xix}.

10 GM Commitments to NHS England

GM will:

- Continue to deliver the NHS Constitution and Mandate requirements and expectations;
- Commit to the production, during 2015/16, of a comprehensive GM Strategic Sustainability Plan for health and social care (as described above);
- Seek to play a leading role in designing and delivering innovative new models of care as set out in the Five Year Forward View. It will use the opportunities resulting from its GM-wide scale and integration to create ground-breaking innovation in areas of mutual GM/NHSE strategic focus to be agreed and to be an exemplar for the national whole system efficiency initiative;
- Ensure clear accountability, exemplary governance and excellent value for money in relation to the health funds delegated or devolved to it.

11 Delivery

11.1 Programme Governance

Section 8 outlines the proposed governance arrangements to support the Build-Up Year and subsequent years. However, it is recognised that additional programme governance will need to be put in place to support the key workstreams. A Health and Social Care Devolution Programme Board will provide overall strategic oversight and direction to the programme. It is anticipated that the Board will consist of:

- AGMA/CA Sir Howard Bernstein, Steven Pleasant, Liz Treacy
- CCGs: Dr Hamish Stedman, CCG Clinical Leader, Ian Williamson, Su Long
- Trusts Provider Representatives
- NHS England Simon Stevens, Paul Baumann, Graham Urwin
- Department of Health John Rouse

Further discussions will take place to finalise and confirm the membership. The Programme Board will provide strategic management at programme and workstream level. It will provide assurance to the parties that the key objectives are being met and that the programme is performing within the boundaries and principles set by this MoU. It will ensure that the transition from the current system architecture is managed effectively, ensuring that associated costs are minimised, risks are understood and managed and that appropriate governance and accountability is maintained.

The Programme Board will have responsibility for the creation and execution of the plan and deliverables, and therefore it can draw technical, commercial, legal and communications resources as appropriate into the Programme. The Chief Officer referred to in section 8 above will be accountable to the Programme Board. The first meeting of the Programme Board will agree the key workstreams of the programme.

11.2 Governance Principles for the Programme Board

- Provide strategic oversight and direction;
- Be based on clearly defined roles and responsibilities at organisation, group and, where necessary, individual level;
- Align decision-making authority with the criticality of the decisions required;
- Be aligned with Project scope and each Programme Phase, recognising that changes will be agreed over the life cycle;
- Leverage existing organisational, group and user interfaces;
- Provide coherent, timely and efficient decision-making in respect of the programme
- Reflect the key features of the wider programme governance arrangements set out in this MoU.

11.3 Support Structure

The Programme will need to be supported by full time resources in order to be delivered within the required time scales. This will include a full time Chief Officer, a full time Finance Director and such other staff as the parties agree.

11.4 Resources

It is anticipated that all parties will contribute to the resourcing of the programme in cash and/or in kind. Furthermore, it is recognised that the identified key workstreams will also require additional funding to support the transformation process. A programme and resourcing plan will be agreed with all parties by 13th March 2015.

12 Parties' commitments to patient engagement

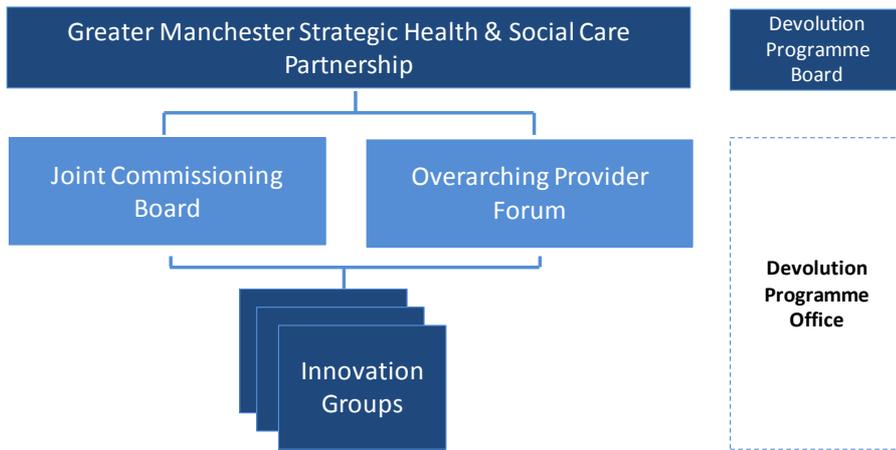
All parties acknowledge their various requirements to engage with patients, service users, carers and members of the public at relevant points and will cooperate to do so in a co-ordinated way.

13 Roles and Responsibilities

Following signature, GM partners will formally ratify this MoU through Boards and Councils and consult on its content with stakeholders as appropriate.

Appendix 1: Proposed Governance

The proposed governance structure below will exist in shadow form from April 2015, with the final structure being determined during the Build-Up year.



Proposed Membership:

| | |
|---|--|
| Greater Manchester Strategic Health & Social Care Partnership | 12 CCGs, 10 LAs, Providers, NHS England, Regulators, Healthwatch, GMCVO |
| Joint Commissioning Board | 12 CCGs, LA, NHS England |
| Overarching Provider Forum | Acute, Community, Mental Health, Ambulance, Primary Care (LMCs) Social Care, Public Health, |
| Innovation Groups | Joint Commissioner and Provider – Task & Finish Groups to support identified workstreams |
| Devolution Programme Office | TBC |

Note: role of third sector and private sector providers in the arrangements outlined above remains to be determined.

All parties welcome the principles set out in this MoU and recognises the benefits it will bring to the patients and citizens of Greater Manchester. The following explanatory notes are provided for further clarity.

Explanatory Notes:

ⁱ This will mean NHS England, CCGs and local authorities delegating relevant commissioning functions to joint commissioning boards, in line with the Government's policy of promoting joint commissioning between the NHS and local government. As stated elsewhere in this MoU, NHS England and CCGs, as statutory NHS organisations, would remain accountable for meeting the full range of their statutory duties.

ⁱⁱ This will require collaboration with national government, led by the Department of Health, to ensure that the proposed new arrangements continue to support the accountability of CCGs and NHS England for improving quality and health outcomes, delivering core operational standards, and ensuring the effective use of NHS resources. There will need to be agreement as to the precise scope and extent of the commissioning functions that can lawfully be delegated.

ⁱⁱⁱ The NHS Commissioning Board operates under the name of NHS England (NHSE) and will be referred to as such throughout the remainder of this document.

^{iv} All references to "devolution" of responsibilities or funding to GM would currently imply, in formal terms, the delegation of commissioning functions and associated financial resources to joint commissioning boards set up under section 75 of the 2006 Act.

^v This recognises, in particular, that some of the areas described in the MoU go beyond the statutory powers of NHS England and CCGs, and are often commissioned nationally.

^{vi} The proposed new commissioning arrangements will need to support CCGs and NHS England in continuing to meet the full range of their statutory responsibilities. There will need to be continued reporting against relevant national performance metrics to enable CCGs and NHS England to be held to account for core operational standards, progress in improving quality and outcomes and in other areas in a manner which is consistent and comparable to the rest of the NHS.

^{vii} Funding for the NHS beyond 2015/16 will be agreed at the next spending review.

^{viii} Options for more radical approaches in relation to NHS estates will need to be considered through engagement with relevant national partners.

^{ix} Access to any new NHS funding streams will clearly depend on the extent to which those funding streams are made available to the GM CCGs (or to NHS England) and their relevance to the delegated commissioning functions.

^x Where national policies apply, decisions about the implementation of those policies that are made about Greater Manchester will be made with Greater Manchester. As set out in the MoU national government will continue to set overall policy for health services, including setting the Mandate for NHS England. National policies, inspection regimes, guidance and regulations, and the standing rules for NHS commissioners will continue to apply to the whole NHS, including GM. Where there are decisions that cannot legally be delegated, these will continue to be taken by the relevant bodies.

^{xi} This refers to those specialised services that can be commissioned appropriately and effectively at a Greater Manchester level.

^{xii} Any delegation of primary care commissioning responsibilities will need to be consistent with the relevant enabling legislation. The main focus will be on primary medical care, i.e. general practice (GP) services.

^{xiii} This covers those public health services for which local authorities are responsible, subject to the statutory ringfence, together potentially (and subject to discussion with the Department of Health) with those public health services commissioned by NHS England on behalf of the DH.

^{xiv} Any changes to the underlying statutory accountabilities of NHS England and CCGs would need to be agreed with DH taking into account the advice of the National Audit Office. In the absence of such changes, then the intention is that the relevant joint commissioning boards will exercise functions on behalf of NHS England and CCGs.

^{xv} This remains subject to further discussion with Monitor, TDA and the Department of Health.

^{xvi} These strategic priorities will also need to reflect the Government's Mandate to NHS England and other relevant national policies.

^{xvii} The relevant provider Boards (or equivalent) will remain ultimately responsible for decisions on provider structure and form, but GM will work with existing providers – and with any potential new providers of health and care services – to help shape the provider response to local commissioning intentions.

^{xviii} This will ensure that the role of GM commissioners in shaping and stimulating the development of local provider arrangements complements the role of the relevant regulatory bodies.

^{xix} There will be further discussion with Health Education England about how best to take this forward.

Simon Stevens
Chief Executive
NHS England

25 February 2015

Dear Simon

Greater Manchester Devolution

We are writing as the Chief Executives of the Acute Trusts in Greater Manchester to confirm our support for the proposal to devolve greater decision-making authority and responsibility from central government to Greater Manchester.

It is important to recognise that a number of processes for working collaboratively across the GM footprint are already in place, and this includes the regular monthly meeting of the Greater Manchester Acute Chief Executives. The group is long established, having been in existence for more than ten years, and has its own chairmanship and secretariat functions. Over the years the GM Acute Chief Executives group has come to be recognised as the legitimate source of advice and opinion from the Acute providers in Greater Manchester, and in this respect the group has developed close working relationships with GM Commissioners and other key players in the GM health and social care system.

The GM Acute CEOs group has played a significant role in a number of important strategic programmes in the past, including in the areas of women's and children's service (the "Making it Better" project), service performance (eg facilitating agreement on cancer breach sharing) and specialist cancer services (functioning as a reference group for Manchester Cancer). The group also now plays an important role in the "Healthier Together" programme, which is overseeing the restructuring of acute and emergency care in Greater Manchester.

Much of the work of the GM Acute CEOs group has been undertaken through a period when the prevailing ethos did not encourage Acute providers to work collaboratively, or to cooperate to achieve strategic change and improved outcomes for service users across the wider conurbation. Our experience is that collaborative working is essential to how an integrated community like Greater Manchester can grow and develop, not least in respect of health and social care. Devolution offers the possibility to build on and formalise many of the vibrant working arrangements that have already been established, such that strategic change can be progressed more rapidly and more effectively.

The GM Acute CEOs' group recognises and supports the need to maintain the formal distinction between commissioners and service providers. We believe this is required to ensure clarity of purpose, not least for the Boards of provider organisations. We are also clear that the Memorandum of Understanding that is intended to underpin the health and social care aspects of GM devolution will be focused on the commissioner responsibilities, and needs to reflect the devolution of powers and resources from NHS England to GM CCGs and local authorities.

Having noted this, we strongly welcome the inclusion in the proposed GM health and social care governance arrangements of a formally established Provider Forum, and the centrality of a Co-design approach to the strategic transformation agenda. The Provider Forum will ensure that the voices of service providers can properly be heard on all relevant service

issues, not just in the context of major service change programmes. Emphasising a Co-design principle from the outset will ensure that whilst there is still an important role for competition between providers (as appropriate), there are clearer mechanisms for cooperation between providers and with commissioners, to achieve the best outcomes for the people of Greater Manchester.

The new arrangements will also require the development of a new set of relationships with the regulatory and inspection bodies within health and social care, including Monitor, the Trust Development Authority and the Care Quality Commission. It has been proposed that a Memorandum of Agreement should be developed to define the new relationship. The GM Acute CEO's group strongly welcomes this proposal and would want to play an important role in developing this agreement. The key objective of the agreement must be to create a GM sub-regional focus for the regulatory and inspection functions, whilst maintaining proper consistency. This will allow the regulators to gain a far clearer understanding of the strategic and transformational agenda in Greater Manchester, and to provide advice and support that facilitates rather than impedes change.

The health and social care system in Greater Manchester faces many challenges, but the conurbation is strong and robust, and has many effective, high quality provider organisations. There is considerable potential to make faster and more substantial progress with transformational change across the conurbation, and GM devolution can support this. The GM Acute CEOs' group supports the principle of GM devolution, and the approaches that are being developed to future governance arrangements. These approaches must be developed to facilitate an effective role for provider organisations, including working in an increasingly collaborative manner, in concert with commissioners, and with integrated input from sector regulators and inspectors.

In summary, the Greater Manchester Acute CEOs' group:

- supports the principle of Greater Manchester Devolution
- committed to collaborative working, which is increasingly delivering greater benefits and faster progress than competitive approaches
- believes there is considerable potential to build on previous experience of successful joint working across the conurbation
- strongly supports the proposals to include in the GM Devolution arrangements a clear principle of Co-design
- strongly supports the proposed creation of a Provider Forum to act as a conduit for provider engagement and participation
- strongly supports the approach to developing a new relationship with regulatory and inspection bodies, and would want to contribute to establishing a Memorandum of Agreement that would ensure a clear sub-regional focus for these functions
- strongly supports information sharing

We hope that this letter will be a constructive and useful contribution to the development of the Greater Manchester Devolution proposals.

Yours sincerely



Mrs Ann Barnes

Chief Executive, Stockport NHS FT



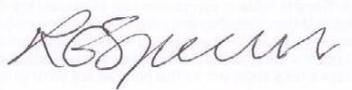
Dr Jackie Bene

Chief Executive, Bolton NHS FT



Sir Mike Deegan

**Chief Executive, Central Manchester
University Hospitals NHS FT**



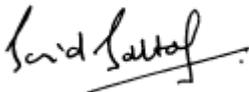
Mr Roger Spencer

Interim Chief Executive, The Christie NHS FT



Dr Gillian Fairfield

**Chief Executive, Pennine Acute Hospitals
NHS Trust**



Sir David Dalton

Chief Executive, Salford Royal NHS FT



Mrs Karen James

Chief Executive, Tameside Hospital NHS FT



Dr Attila Vegh

**Chief Executive, University Hospitals of South
Manchester NHS FT**



Mr Rob Forster

**Acting Chief Executive, Wrightington, Wigan
and Leigh NHS FT**

Cc David Bennett – Chief Executive, Monitor
David Flory – Chief Executive, Trust Development Agency
David Behan – Chief Executive, Care Quality Commission



OUR REF: BW/SS_GMDevo/correspondence
YOUR REF:
DIRECT TEL: 01204 498406

Headquarters
Ladybridge Hall
399 Chorley New Road
Heaton, Bolton
BL1 5DD

Tel: 01204 498400
Fax: 01204 498423

www.nwas.nhs.uk

26 February 2015

Mr Simon Stevens
Chief Executive
NHS England

Dear Mr Stevens

Re: Greater Manchester Devolution

Subsequent to the release of the letter from the Chief Executives of the Acute Trusts in Greater Manchester and discussion at our Trust Board yesterday, I wish to confirm NWAS support for the proposal to devolve greater decision-making authority and responsibility from central government to Greater Manchester.

We would echo many of the comments made in the GM Acute CEOs' letter, particularly in terms of recognising and supporting the need to maintain the formal distinction between commissioners and service providers. Although the Memorandum of Understanding is intended to underpin the health and social care aspects of GM devolution by focusing on the commissioner responsibilities, formally establishing a Provider Forum is vital for a consistent approach to the strategic transformation agenda. I believe that it is imperative that NWAS are also deemed to be included in this forum alongside the Acute providers.

This is particularly important as NWAS is a regionally commissioned service for the provision of 999 Emergency and Urgent Care across the whole of the North West and is not constrained within the Greater Manchester footprint, unlike the Acute providers and the other two blue-light services.

Yours sincerely

Mr Bob Williams
Chief Executive Officer

cc Ann Barnes, Chief Executive Stepping Hill Hospital. Acute Provider CEO Group Chair.
Warren Heppolette, Strategic Director – Health & social Care reform, Greater Manchester.

Simon Stevens
Chief Executive
NHS England

20 February 2015

Dear Simon

Greater Manchester Devolution

We are writing as the Chief Executives of the Mental Health and Community Trusts in Greater Manchester to confirm our support for the proposal to devolve greater decision-making authority and responsibility from central government to Greater Manchester.

It is important to recognise that a number of processes for working collaboratively across the GM footprint are already in place, and this includes the extensive involvement of provider organisations in strategic planning processes such as the “Healthier Together” programme, which is overseeing the development of integrated care and the restructuring of hospital services in Greater Manchester.

As providers of community and mental health services, we would make the following comments on the new and emerging arrangements;

- The national drive for parity of esteem for mental health will need to be embraced and even further advanced in the proposed devolution arrangements
- We welcome the proposal for an independently chaired provider forum to ensure an equity of voice in health and social care planning

There has been a considerable amount of positive joint working in the past, and this has often been undertaken when the prevailing ethos did not encourage providers to work collaboratively, or to cooperate to achieve strategic change and improved outcomes for service users across the wider conurbation. Our experience is that collaborative working is essential to how an integrated community like Greater Manchester can grow and develop, not least in respect of health and social care. Devolution offers the possibility to build on and formalise many of the vibrant working arrangements that have already been established, such that strategic change can be progressed more rapidly and more effectively.

The need to maintain the formal distinction between commissioners and service providers is still recognised and supported. We believe this is required to ensure clarity of purpose, not least for the Boards of provider organisations. We are also clear that the Memorandum of Understanding that is intended to underpin the health and social care aspects of GM devolution will be focused on the commissioner responsibilities, and needs to reflect the devolution of powers and resources from NHS England to GM CCGs and local authorities.

As noted, we strongly welcome the inclusion in the proposed GM health and social care governance arrangements of a formally established Provider Forum, and the centrality of a Co-design approach to the strategic transformation agenda. The Provider Forum will ensure that the voices of service providers can properly be heard on all relevant service issues, not just in the context of major service change programmes. Emphasising a Co-design principle from the outset will ensure that whilst there is still an important role for competition between providers (as appropriate), there are clearer mechanisms for cooperation between providers and with commissioners, to achieve the best outcomes for service users.

The new arrangements will also require the development of a new set of relationships with the regulatory and inspection bodies within health and social care, including Monitor, the

Trust Development Authority and the Care Quality Commission. It has been proposed that a Memorandum of Agreement should be developed to define the new relationship. We strongly welcome this proposal and would want to play an important role in developing the agreement. The key objective of the agreement must be to create a GM sub-regional focus for the regulatory and inspection functions, whilst maintaining proper consistency. This will allow the regulators to gain a far clearer understanding of the strategic and transformational agenda in Greater Manchester, and to provide advice and support that facilitates rather than impedes change.

The health and social care system in Greater Manchester faces many challenges, but the conurbation is strong and robust, and has many effective, high quality provider organisations. There is considerable potential to make faster and more substantial progress with transformational change across the conurbation, and GM devolution can support this. We support the principle of GM devolution, and the approaches that are being developed to future governance arrangements. These approaches must be developed to facilitate an effective role for provider organisations, including working in an increasingly collaborative manner, in concert with commissioners, and with integrated input from sector regulators and inspectors.

In summary, as the Chief Executives of the Mental Health and Community Trusts in Greater Manchester, we:

- support the principle of Greater Manchester Devolution
- recognise that collaborative working is increasingly delivering greater benefits and faster progress than competitive approaches
- believe there is considerable potential to build on previous experience of successful joint working across the conurbation
- strongly support the proposals to include in the GM Devolution arrangements a clear principle of Co-design
- strongly support the proposed creation of a Provider Forum to act as a conduit for provider engagement and participation
- strongly support the approach to developing a new relationship with regulatory and inspection bodies, and would want to contribute to establishing a Memorandum of Agreement that would ensure a clear sub-regional focus for these functions.

We hope that this letter will be a constructive and useful contribution to the development of the Greater Manchester Devolution proposals.

Yours sincerely



Mr Simon Barber

Chief Executive, Five Borough Partnership NHS Foundation Trust



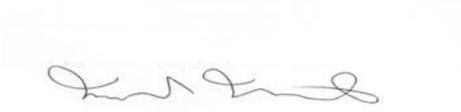
Dr Kathleen Fallon

Chief Executive, Bridgewater Community Healthcare NHS FT



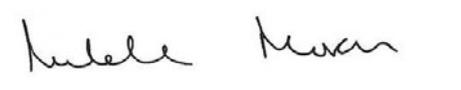
Mrs Beverley Humphrey

Chief Executive, Greater Manchester West Mental Health NHS FT



Mr Michael McCourt

Chief Executive, Pennine Care NHS FT



Mrs Michele Moran

Chief Executive, Manchester Mental Health and Social Care NHS Trust

Cc David Bennett – Chief Executive, Monitor
David Flory – Chief Executive, Trust Development Agency
David Behan – Chief Executive, Care Quality Commission

This page is intentionally left blank

TRAFFORD BOROUGH COUNCIL

Report to: Exective 25 March 2015
Council 25 March 2015
Report for: Decision
Report of: The Executive Member for Finance and the Director of Finance

Report Title

OLD TRAFFORD LODGE HOTEL REDEVELOPMENT ASSISTANCE

Summary

Lancashire County Cricket Club (LCCC) has recently made an approach to the Council to request loan finance for a proposed replacement of the existing Lodge facilities with a new purpose built 150 room hotel.

Initial due diligence work has been undertaken including a hotel demand study by GVA which has been positive about the proposal and also a financial assessment by KPMG with further financial due diligence work to be undertaken around the updated financial forecasts.

The redevelopment is estimated to cost £12m and funding has been secured from a retail bond of £3m and approved conditional funding from the GM Combined Authority (GMCA) of £5m. GMCA funding is conditional on further due diligence being completed by KPMG on the updated financial forecasts of LCCC and also the Council agreeing a loan to the club for the balance of the funding of £4m.

Recommendation(s)

The Executive is requested to:-

1. approve a loan of £4m to Lancashire County Cricket Club for its planned redevelopment;
2. delegate authority to the Director of Legal and Democratic Services in conjunction with the Deputy Chief Executive and Director of Finance to agree and complete all documentation;
3. request the Council to approve:
 - a. the addition of £4m to the Capital Programme in 2015/17 by way of prudential borrowing;
 - b. approve the updated prudential indicators as detailed in Appendix 1.
4. deem the decision as urgent and therefore not subject to call-in.

Contact person for access to background papers and further information:

| | | | |
|------------|------------|-------------|---------------|
| Name: | Ian Duncan | Helen Jones | Jane Le Fevre |
| Extension: | 1886 | 1915 | 4215 |

| | |
|---|---|
| Relationship to Policy Framework/Corporate Priorities | Economic Growth and development |
| Financial | <p>The loan advance of £4m would be classed as capital expenditure. This would be financed by borrowing.</p> <p>LCCC would be charged a commercial rate of interest rate on the loan. This would be more than the Council's own borrowing costs and therefore a surplus will accrue to the Council, as detailed in the report.</p> <p>Other revenue streams have been agreed with LCCC as outlined in the report.</p> <p>A one-off arrangement fee of 1% will be charged to LCCC.</p> |
| Legal Implications: | Agreement of the terms of the loan and conditions will be included in a new legal agreement with LCCC. |
| Equality/Diversity Implications | N/A |
| Sustainability Implications | N/A |
| Risk Management Implications | There are risks associated with the proposal. Mitigation against the risks are set out in the report. |
| Staffing/E-Government/Asset Management Implications | N/A |
| Health and Wellbeing Implications | N/A |
| Health and Safety Implications | N/A |

Other Options Considered

Alternative funding sources have been considered by LCCC and these are detailed in the report. The Council could decide not to approve the loan support but this would mean the conditional funding approved by the Combined Authority would be withdrawn, putting the overall development at risk.

Consultation

Not Applicable

Reasons for Recommendation

The new proposals at LCCC would complete the redevelopment at the cricket club and provide significant benefits in terms of economic regeneration and additional local jobs.

Key Decision

This is a key decision currently on the Forward Plan: No

Finance Officer ClearanceID.....

Legal Officer ClearanceJL.....

CORPORATE DIRECTOR'S SIGNATURE



To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

Background

Proposal

1. LCCC is considering the opportunity to replace its existing 68 room lodge accommodation with a new 150 bed branded franchised hotel to complement the redeveloped ground. The Club has commissioned an external economic impact assessment which concludes that the redeveloped hotel will create 76 new jobs in Trafford and additional GVA impact of £2.3m per annum.
2. The estimated capital cost of the scheme is £12m and the Council has been approached to provide an element of loan support towards the financing of the project. This report details the benefits of the scheme that will be realised both locally and regionally and outlines the financial implications for the Council and how they will be covered by the cricket club. The project benefits include:-
 - Creating new jobs, the skill sets for which are accessible by the wider local community;
 - Enhancing the profile of the cricket ground as a globally renowned sporting arena reflecting positively on the city and local community;
 - Providing dining and retail conveniences lacking in the local area; and
 - Creating the opportunity for attracting both national and international conferences to Manchester by supporting and growing the potential already in place and provided by the existing world class facilities at Emirates Old Trafford.
3. Specialist advice has been procured from KPMG and GVA to provide due diligence reports to support the viability of the proposal, with a hotel demand study concluding positively about the scheme. The GVA report executive summary includes the following key points and strengths for the location:-
 - The benefit from multiple tourism and business drivers – Trafford Park and Media City;
 - The position proximity to Old Trafford football ground in addition to the cricket ground providing a large base for sports tourism;
 - The market area demonstrates strength and the ability to absorb new hotel supply;
 - Old Trafford Metrolink is very close to the site providing easy access to the site;
 - Accessibility from core transport arteries;
 - A strong brand;
 - A stable growth trend;
 - Historic performance of existing hotel;
 - Strong base of conference and events business at the Club;
 - The area is subject to a number of regeneration schemes which is expected to business tourism, e.g. the Quays.
4. The project is an important part of the Club's strategic approach to improve its financial returns on its off-field activities so that it is much less reliant on the less certain fortunes of success on the playing side of the business.

Financing of the Project

5. The estimated capital cost of the scheme is £12m, including contingencies and the Club has actively explored a number of options in determining what sources of funding are available to support the project. These included additional bank funding but given the existing exposure their existing bankers have with the Club they consider the existing leverage is at a level where they cannot go higher. This also, realistically, rules out any other senior debt from an alternative mainstream Bank. This is not uncommon following the banking crisis. The Greater Manchester Pension Fund has been considered but an indicative offer of a £5million loan was rejected because the fees were significant, the interest rate was excessive at 9% (pension fund is seeking equity returns) and the repayment terms did not suit the needs of the Club's financial model. Therefore because of the lack of appropriate finance LCCC has approached the GM Combined Authority (GMCA) and the Council to seek loan assistance towards the scheme to complement the £3m already secured from a retail bond in October 2014.
6. On 27 February 2015 GMCA approved support toward the scheme of £5m comprising up to £1.5m from Regional Growth Funds (RGF) and the balance from Growing Places funding. RGF is to generate private sector investment to create sustainable growth and Growing Places Fund was established by the government to invest in infrastructure to generate economic growth, build houses and create jobs. Both were established as the market would not have generated this investment quickly enough; banks still appear nervous in their approach to lending. This hotel proposal meets these objectives.
7. These funding sources normally involve an element of support from the respective district, in the form of underwriting, but in order to reduce the exposure to the Council, officers have been successful in negotiating with GMCA who are willing to advance the Growing Places portion of the funding direct to the Club; the funding from the RGF and Growing Places Fund will be a loan made by GMCA. Also any interest payments due to the Council would rank ahead of the CA support.
8. The CA support is conditional on further due diligence work to be undertaken by KPMG on the financial forecasts and also on the Council agreeing loan support of £4m, being the balance of the funding.
9. The assumptions by LCCC for debt repayment include for:-
 - **Retail Bond** - £3m at a 5% interest rate plus 2% retail discount, launched in October 2014 to be repaid after five years.
 - **Growing Places/RGF** - £5m to be drawn between Sept 2015 - Sept 2016, interest to be charged at 4.5% above the European Reference Rate (currently would result in a interest rate to LCCC of 5.52%) and secured as a second charge over the Club assets and ranked similar to any advance from the

Council. Full repayment to be made by December 2021 with a series of bullet repayments from December 2018.

- **Prudential Borrowing** - £4m to be drawn down across 2016/17 and 2017/18, secured as a second charge (see above) and repaid over 10 years. The period of the loan is commented upon below.

LCCC Financial Projections

10. The projections have already been subject to due diligence work undertaken by KPMG with previous projections showing an increase in Events income and Hotel revenues with significant increases in Net Income (EBITDA) projections for the period 2015 – 2019. Since then the English Cricket Board has made announcements on international cricket matches over the next few years and LCCC has been successful in securing a number of lucrative matches, including the Ashes in 2019. This gives more certainty to future years' projections which show a marked increase on previous years. Net revenues from the existing Lodge have been approximately £0.5m a year and these are projected to rise considerably. EBITDA (net income) is forecast to grow over the medium term which should allow debt costs to be afforded.
11. The financial projections include for the repayment of interest on the entirety of the debt and retail bond. At the time the projections were made, no repayments were included in respect of the Council debt until at least 2021 although the projections indicate that resources will be available for debt repayment from 2017.
12. The above figures include for repayment of the retail bond and GMCA debt of £3m and £5m respectively; the maximum loan period for GMCA loans is 5 years. The redevelopment could not stand to repay the entire project finance within a five year period and therefore a loan of 10 years is requested from the Council.
13. These updated financial projections will be the subject to further due diligence by KPMG and this is a requirement of the funding from the CA and also the Council.

Negotiations with LCCC

14. Since GMCA made its loan offer, negotiations have taken place between officers of the Council and LCCC. The main heads of terms agreed include:
 - a) within two years of the completion of the projects LCCC will secure naming rights of the Cricket School for 10 years in the minimum net sum of £50k per annum. The annual receipt will be paid over to the Council for support youth outreach provision. If naming rights are not secured, LCCC will pay the Council £25k per annum for 10 years. Until such time as the naming rights are sold, the Council can require that the naming rights are assigned to the Council free of charge; the Cricket Centre will be named "Trafford Council Cricket Centre";

- b) the Club will be released from its obligation under the Funding Agreement made between the Council and the Club and dated 30 November 2010 as varied by the MOU made between the Council and the Club and dated 19 October 2011 to complete the extension to the Cricket Centre and will instead be obliged to maintain the Cricket Centre in good condition such that will ensure that it is fit for purpose and so that the Club will be able to continue to deliver its S111 obligations in relation to community and educational users;
- c) the Club will increase the current provision in the S111 Agreement in relation to the Players and Media Centre for the duration of the loan and will make available free of charge (but otherwise on the same terms and conditions as other users) the Players & Media centre for 50 days per year (an equivalent of 1 day per week (other than Christmas and Easter)) to be used as the Council sees fit for the benefit of the community or for educational purposes. This facility could be used to enhance Gorse Hill Studio offer and other schools. The additional obligations will cease at the termination of the loan and thereafter the Club will comply with the obligations in relation to the Players and Media Centre as set out in the S111 Agreement;
- d) the Club will provide or fully fund the provision of an individual to support delivery of projects at Gorse Hill Studios 1 day per week – with a mentoring/support agreement in place similar to Stretford High School. This obligation will apply throughout the term of the loan;
- e) the Club will make The Point and the Pavilion available to the Council free of charge (but otherwise on the same terms and conditions as other users) for 3 days each per year (in relation to The Point this will be in addition to the 1 day a year which it will continue to provide free of charge for the Council's annual staff awards ceremony);
- f) the Club will provide to the Council free of charge 100 tickets for each cricket match (domestic or international) hosted at the Ground, such tickets to be used by the Council for Community invitations or sold to raise funds for youth outreach work;
- g) The Club will provide to the Council free of charge a hospitality table for 10 guests each year at a day of international cricket of the Council's choosing to be used by the Council to support inward investment to the Borough;
- h) The Club will pay to the Council all income from advertising generated from a specified high level perimeter board (to be agreed between the Council and the Club) during all domestic and international cricket matches together with 50% of any future revenue from all new commercial advertising opportunities at the Ground;

- i) the existing provisions in the S111 Agreement with regard to the payment to the Council of a portion of the net annual receipt from International matches will be varied under the proposed agreement to:-
 - a. provide for the payment to the Council of an annual sum equivalent to 5% of the net annual receipt from International matches in each corresponding year up to a maximum of £100k in each year except those years when the Club hosts the Ashes Tests when the maximum payable will be £150k but with a guaranteed minimum payment of £35k in each year when there are no test matches or £75k in each year when the Club hosts any test match; and
 - b. to delete the provision in the S111 agreement which requires only 50% of that sum to be paid to the Council such that the whole of the sum realised is paid to the Council.
- j) The Legal Charge will be for a term of 10 years and will be a second charge secured against the Ground. The Club will secure a Deed of Priority in order to ensure that the proposed Second Charge in favour of the Council cannot be postponed to further borrowing under the First Charge;
- k) that once the GMCA loan has been repaid, the club will use 100% of profits received as a result of the Club overachieving against the operating forecasts which have been agreed by the Council in relation to the business case for these development proposals and the loans to repay the outstanding amounts due to the Council in respect of the loan to secure earlier repayment of the loan.

Financial Impact on the Council

- 15. If the Council was minded to approve the support towards the scheme it would involve additional borrowing of £4m. The Council is able to borrow from the Public Works Loans Board, part of the UK Debt Management Office and the current borrowing rate is 2.65%. This will result in an annual interest cost of £106k.
- 16. The Club will be charged a commercial rate of interest (see para 9). This will result in a payment of approximately £221k, which is £115k per annum more than the Council's cost of borrowing.
- 17. The Council currently earns an average return on its cash holdings of 0.7%. The Director of Finance will determine, as part of the usual treasury management operations, whether to borrow from the PWLB or call on the Council's cash holdings. Therefore the actual return to the Council could be higher than outlined in para 16.
- 18. There are risks attached to any lending and therefore it would be prudent to set aside the return on interest to help protect the Council from any default. The need for this provision would be kept under review each year.

19. Whilst the Council would not be required to budget for principal repayments, in accordance with the policy on Minimum Revenue Provision (MRP) included in the Treasury Management Strategy, it must be cognisant of the risk of granting a 10 year loan. So that risks of the two funding bodies are shared it has been agreed with the GM Combined Authority for each body to take an equal share second charge on the assets of the Club behind their current bankers.
20. Para 14 outlines other funding streams to be paid to the Council. In addition an arrangement fee of 1% i.e. £40k has been agreed with the Club.

Prudential Indicators

21. The Council support would be classed as capital expenditure and as such the decision would need to be taken in line with the Prudential Code. These indicators are designed to support and record decisions taken on affordability and sustainability. There is also a requirement to impose *limits* on the Council's treasury management activities to ensure decisions are made in accordance with professional good practice and risks are appropriate (These are included in the Treasury Management Strategy Report). The Director of Finance will monitor these and report on them at appropriate times. Details of the updated indicators are included at Appendix 1.

Conclusion

22. The hotel redevelopment offers an opportunity for first class conference facilities to be available within the borough and complement those available in the centre of Manchester. Importantly it also helps LCCC to secure their future by having less reliance on success on the playing field, ensuring that international cricket will feature in the North West region for a long time to come. The importance of such facilities to the sub-region are reflected in the GM Combined Authority offer of a £5m loan to LCCC. If the Council is unable to complete the funding package with a loan of £4m then the redevelopment would not be able to proceed.
23. Due diligence has been carried out by KPMG and GVA on the viability of the proposed development. Greater financial certainty exists than in previous years following the English Cricket Board's (ECB) allocation of future international cricket matches.
24. There are risks attached to the provision of a loan but these are mitigated by: a second charge over the assets of LCCC; a commercial rate of interest being applied to the loan; additional income streams being negotiated with the Club and; due diligence work by KPMG and GVA.

Urgency

25. It is not possible for this decision to be subject to call in because negotiations with LCCC have only recently concluded. The decision cannot reasonably be deferred because the GMCA has agreed to provide a further loan but it is

conditional on Trafford Council agreeing its loan; GMCA must commit its funding by 31 March 2015. If call in was to apply the GMCA will not be able to commit its funding by 31 March 2015.

Appendix 1

Prudential Indicators – Estimates 2015/18

| Capital Prudential Indicators | 2014/15 Estimate £m | 2015/16 Estimate £m | 2016/17 Estimate £m | 2017/18 Estimate |
|---|---------------------------|---------------------------|---------------------------|---------------------|
| Capital Expenditure | 42.9 | 41.8 | 25.2 | 16.7 |
| Capital expenditure - the table above shows the estimated capital expenditure to be incurred for 2013/14 and the following three years. (incs £1.6m in 2016/17 & £2.4m in 2017/18 in respect of Lancashire CCC) | | | | |
| Capital Financing Requirement as at 31 March | 139.7 | 138.4 | 139.8 | 137.2 |
| Capital Financing Requirement (CFR) - this reflects the estimated need to borrow for capital investment (i.e. the anticipated level of capital expenditure not financed from capital grants and contributions, revenue or capital receipts). | | | | |
| Financing Cost to Net Revenue Stream | 7.0% | 7.3% | 7.1% | 7.2% |
| Financing costs to net revenue stream - this indicator shows the trend in the cost of capital (borrowing and other long term obligation costs net of investment income) against the Council's net revenue stream. | | | | |
| Incremental Impact on Band D Council Tax (£) | 0.00 | 0.00 | 0.00 | 0.00 |
| Incremental impact on band D council tax – reflects the incremental impact on the Council Tax arising from new borrowing undertaken in order to finance the capital investment decisions taken by the Council during the budget cycle. The figures above, reflects the movement away from borrowing to grant funding for future years spend. The advance to LCCC would be classed as a service debt arrangement and would not have an impact on council tax. | | | | |

All the prudential indicators are monitored on a regular basis. If the situation arises that any of the prudential indicators appear that they will be breached for a sustained period, then this will be reported to the Council at the earliest opportunity.

This page is intentionally left blank

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted

This page is intentionally left blank

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted

This page is intentionally left blank