

# FINANCE AND POLICY COMMITTEE

## AGENDA



**Monday 3 July, 2023**

**at 10.00 am**

**in the Council Chamber,  
Civic Centre, Hartlepool.**

MEMBERS: FINANCE AND POLICY COMMITTEE

Councillors Boddy, Brown, Buchan, Feeney, Hall, Harrison, Lindridge, Little, Martin Wells, Morley and Young.

**1. APOLOGIES FOR ABSENCE**

**2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**

**3. MINUTES**

- 3.1 To receive the minutes of the meeting of the Finance and Policy Committee held on 13 March, 2023.
- 3.2 To receive the minutes of the meeting of the Safer Hartlepool Partnership held on 6 March, 2023.

**4. BUDGET AND POLICY FRAMEWORK ITEMS**

- 4.1 Final Outturn 2022/23 – *Director of Finance, IT and Digital*
- 4.2 Medium Term Financial Strategy (MTFS) 2024/25 to 2026/27 – *Director of Finance, IT and Digital*
- 4.3 Hartlepool Enterprise Centre – *Executive Director of Development, Neighbourhoods and Regulatory Services (to follow)*

**5. KEY DECISIONS**

- 5.1 Substance Misuse Needs Assessment and Draft Strategy – *Director of Public Health*
- 5.2 Household Support Fund – *Executive Director, Children and Joint Commissioning Services and Director of Finance, IT and Digital*

**CIVIC CENTRE EVACUATION AND ASSEMBLY PROCEDURE**

In the event of a fire alarm or a bomb alarm, please leave by the nearest emergency exit as directed by Council Officers. A Fire Alarm is a continuous ringing. A Bomb Alarm is a continuous tone. The Assembly Point for everyone is Victory Square by the Cenotaph. If the meeting has to be evacuated, please proceed to the Assembly Point so that you can be safely accounted for.

## **6. OTHER ITEMS REQUIRING DECISION**

- 6.1 Workforce Strategy – *Director of Legal, Governance and Human Resources*
- 6.2 Final Report – Child and Family Poverty in Hartlepool – *Audit and Governance Committee*
- 6.3 Final Report – Final Report – Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions – *Audit and Governance Committee*

## **7. ITEMS FOR INFORMATION**

- 7.1 Council Plan 2021-2024 – Progress Update – *Managing Director*

## **8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT**

For Information:

Dates and times of forthcoming meetings of the Finance and Policy Committee –

Monday 18 September, 2023 at 10.00 am

Monday 27 November, 2023 at 10.00 am

Monday 22 January, 2024 at 10.00 am

Monday 19 February, 2024 at 10.00 am



# **FINANCE AND POLICY COMMITTEE**

## **MINUTES AND DECISION RECORD**

13 MARCH 2023

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

**Present:**

Councillor Shane Moore (In the Chair)

Councillors: Bob Buchan, Jim Lindridge, Andrew Martin-Wells, Melanie Morley and Mike Young.

Also Present: Councillor Carole Thompson as substitute for Councillor Jonathan Brash in accordance with Council Procedure Rule 4.2.

Officers: Denise McGuckin, Managing Director  
Hayley Martin, Chief Solicitor  
Chris Little, Director of Resources and Development  
Craig Blundred, Director of Public Health  
Jill Harrison, Director of Adult and Community Based Services  
Tony Hanson, Director of Neighbourhoods and Regulatory Services  
Kieran Bostock, Assistant Director, Place Management  
Scott Parkes, Consultancy Manager (Environmental Engineering)  
Steve Hilton, Communications and Marketing Team  
David Cosgrove, Democratic Services Team

### **105. Apologies for Absence**

Councillors Moss Boddy, Jonathan Brash, Tom Cassidy, Brenda Harrison and Sue Little.

### **106. Declarations of Interest**

Councillor Andrew Martin-Wells declared a prejudicial interest in Minute No. 109 and left the meeting during its consideration.

### **107. Minutes of the meeting held on 13 February 2023**

Received.

## **108. Equality, Diversity and Inclusion Policy** *(Managing Director)*

### **Type of decision**

Key Decision (test (ii)) Forward Plan Reference No. CE 89/23.

### **Purpose of report**

The purpose of the report was to provide an Equality, Diversity and Inclusion (EDI) update to Finance and Policy Committee, to present the Council's updated EDI policy for approval, to seek agreement for the development of an action plan and associated arrangements for reporting progress to the Committee and to note the intention to develop a single needs assessment process for EDI.

### **Issue(s) for consideration**

The Managing Director reported that the Council's Equality and Diversity Policy was agreed a number of years ago and it was, therefore, timely to review and update it. An officer working group had been established with representation from across the Council and tasked with reviewing the Policy. The updated policy (submitted as an appendix to the report) was agreed by the Executive Leadership Team (ELT) in February 2023 and was now presented for final approval.

In addition to the nine protected characteristics (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation) set out in the Equality Act 2010 our policy also states that our approach to EDI will also give consideration to those who are care leavers and the Armed Forces Community (as established in our Armed Forces Covenant). We will also consider inequality related to poverty and disadvantage recognising that this relates to individuals as well as children and families.

Members welcomed the revised policy and the additions of care leavers and the Armed Forces Community to the statutory nine protected characteristics in the Hartlepool policy. Members requested that the annual monitoring report be submitted to future meetings of the Committee.

The decisions set out below were agreed without dissent.

### **Decision**

1. That the updated Equality, Diversity and Inclusion (EDI) Policy as submitted be approved;
2. That the inclusion of the additional areas for consideration alongside the nine protected characteristics be approved;



3. That the development of an EDI action plan and the reporting of progress annually to Finance and Policy Committee be approved;
4. That the intention to develop a single needs assessment process for EDI be noted.

Councillor Andrew Martin-Wells left the meeting.

**109. A19 / Elwick Road / North Lane Junction and Elwick Road / Hartlepool Western Link Project Compulsory Purchase Order (CPO), Side Roads Orders (SROS) and Slip Roads Order (SLRO)** (*Director of Neighbourhoods and Regulatory Services*)

**Type of decision**

Key Decision – Budget and Policy Framework Reference NRS 01/23

**Purpose of report**

This report provides an update on the A19 / Elwick Road / North Lane Junction and Elwick Road / Hartlepool Western Link Project (the Scheme) and requests approval to the making of the above orders. It also sets out and requests approval for the financial package for the Scheme.

**Issue(s) for consideration**

The Director of Neighbourhoods and Regulatory Services gave a presentation to the meeting setting out the key aspects of the scheme, the Compulsory Purchasing Order proposals and the key timescales and budget for the scheme. Members of Planning Committee were reminded of their responsibilities with regard to predetermination.

In response to Member questions, the Director of Resources and Development stated that costs had increased for the scheme. The report reflected the current forecast with an upper forecast that had additional headroom of 12% which was considered a reasonable risk assessment of current costs. Financially to the Council the upper estimate still made good financial sense with prudential borrowing fully repaid from s106 developer contributions over an anticipated house build out period of 15 years. The Director of Neighbourhoods and Regulatory Services added that specialist independent cost consultants had been engaged during the development of the scheme plan and they were comfortable with the Council's funding package.

The Managing Director wished to record her thanks to the Director of Neighbourhoods and Regulatory Services, the Assistant Director Place Management and the Consultancy Manager for their work in bringing the scheme forward to this stage where plans had now submitted for planning

approval. The Chair echoed the managing Director's comments and looked forward to the commencement of the scheme.

A Member noted some loss of trees and questioned if there was any potential flooding impact from the scheme. The Assistant Director stated that that was an issue for the Planning Committee when considering the application but there would be no impact on Greatham Beck.

The following decisions were agreed unanimously by those present.

### **Decision**

That Finance and Policy Committee requests that Council:

1. Approves the Council entering into an agreement with National Highways pursuant to Section 6 of the Highways Act 1980 ("the Section 6 Agreement") relating to highway works at the A19 / Elwick Road / North Lane junction and the exercise by the Council of all National Highways' powers in respect of the making, publishing and seeking confirmation of the A19 SRO and taking all other related steps necessary to give effect to paragraphs 14.2 and 14.3 below, with delegated authority given to the Director of Neighbourhoods and Regulatory Services ("the Director") in consultation with the Chief Solicitor to reach agreement with National Highways as to the form of such an agreement which shall generally be in accordance with the draft heads of terms attached as an appendix and with delegated authority to the Director in consultation with the Chief Solicitor to agree a commuted sum with National Highways if so required provided that agreement to pay such a commuted sum does not result in any prudential borrowing beyond that already approved by the Council in respect of the Scheme.
2. Approves the Council (both for itself and in exercise of the powers of National Highways delegated pursuant to the Section 6 Agreement) exercising powers under Sections 14, 125, 239, 240, 246, 250 and 260 of the Highways Act 1980, the Acquisition of Land Act 1981 and all other enabling powers to secure the compulsory acquisition of and otherwise deal with all land and rights and interests in and affecting land necessary to construct the Scheme.
3. Without prejudice to the generality of the approval at paragraph 14.1 above, authorises the Chief Solicitor (both for the Council itself and in exercise of the powers of National Highways delegated pursuant to the Section 6 Agreement as relevant) to make:
  - 3.1 The Hartlepool Borough Council (A19 / Elwick Road / North Lane and Elwick Northern Bypass / Hartlepool Western Link) Compulsory Purchase Order 2023 ("the CPO") under sections 239, 240, 246, 249, 250 and 260 of the Highways Act 1980, the Acquisition of Land Act 1981 and all other enabling powers, as

per the details contained in this report and generally in the form set out in an attached appendix to this report to secure the compulsory acquisition of interests in land and new rights shown on the plans attached as an appendix (the CPO and associated plans being subject to any final amendments the Director considers necessary); and

- 3.2 The Hartlepool Borough Council (A19 / Elwick Road / North Lane and Elwick Northern Bypass / Hartlepool Western Link) (Classified Roads) Side Roads Order 2023 ("the SRO") under sections 14 and 125 of the Highways Act 1980 and all other enabling powers, as per the details set out in this report and generally in the forms set out as an appendix (subject to any final amendments the Director considers necessary); and
- 3.3 The Hartlepool Borough Council (A19 / Elwick Road / North Lane and Elwick Northern Bypass / Hartlepool Western Link) Side Roads Order 2023 ("the A19 SRO") under sections 14 and 125 of the Highways Act 1980 and all other enabling powers, as per the details set out in this report and generally in the forms set out as an appendix (subject to any final amendments the Director and National Highways considers necessary);

The CPO and SROs being collectively referred to as "the Orders".

4. Approves the Council entering into an agreement with the Secretary of State for Transport ("SSfT") and / or the Department for Transport ("DfT") to receive authority or delegation of powers to enable the Council to promote a Slip Roads Order or Orders to be made by the SSfT under sections 10 and 41 of the Highways Act 1980 through to confirmation, including preparation and representations at any Public Inquiry and the exercising of those powers if and when authorised or delegated; or whether or not a delegation is obtained pursuant to this paragraph the Council liaising with and assisting the SSfT and / or DfT in respect of publication and promotion of a Slip Roads Order or Orders under Sections 10 and 41 of the Highways Act 1980 in each case for the designation of the new slip roads created as part of the Scheme as trunk roads;
5. In respect of the Slip Roads Order, as necessary:
  - 5.1 Authorises the Director to exercise on behalf of the Council any powers of the Secretary of State under section 10 of the Highways Act 1980 delegated pursuant to an agreement as described in paragraph 14.4 above or otherwise to take such steps as may be necessary to liaise with and assist the Secretary of State as described in paragraph above; or
  - 5.2 In exercise of the powers of SSfT and / or the DfT delegated pursuant to an agreement described in paragraph 14.4 above

authorises the Chief Solicitor to make the Hartlepool Borough Council (A19 / Elwick Road / North Lane and Elwick Northern Bypass / Hartlepool Western Link) Slip Roads Order 2023.

6. Approves in principle the Statement of Reasons ("SoR") for the above mentioned Orders generally in the form of the draft set out in an appendix and authorises the Director to agree the final version of the SoR, and the final form of the Orders including authority to make, if necessary, any amendments to the Orders referred to in the above paragraphs necessary to secure the compulsory acquisition of all interests in land necessary to construct the Scheme.
7. Authorises the Chief Solicitor to seal the Orders and as necessary the Slip Roads Order in their final form.
8. Authorises the Director to take all ancillary and necessary steps, including the publication and service of all statutory notices and presentation of the Council's case at Public Inquiry, to proceed with and secure the confirmation of the Orders and as necessary the Slip Roads Order by the Secretary of State, and making of agreements and undertakings with landowners and other affected parties necessary in order to secure the removal of any objections made to the Orders (where such agreements and undertakings are appropriate), and the vesting of the interests in land and new rights in the Council by way of the making of one or more general vesting declarations under the Compulsory Purchase (Vesting Declarations) Act 1981 or the service of Notices to Treat and Notices of Entry under the Compulsory Purchase Act 1965 and to include authority to request confirmation of the final Orders and as necessary the Slip Roads Order with modifications if, in the light of new information, it appears expedient to ensure the confirmation of the Orders and as necessary the Slip Roads Order.
9. That authority be given to the Chief Solicitor to acquire all third party interests in land and the properties subject to the CPO and as required for the Scheme (whether compulsorily or by agreement).
10. Note the revised Scheme estimate of between £24.497m and £26.094m.
11. Approve a funding strategy for the upper estimated Scheme costs of £26.094m and the funding strategy of application of £8.345m grant funding and £16.429m prudential borrowing repayable from s106 contributions.
12. Note that the annual loan repayments (excluding interest) of using prudential borrowing will be funded from s106 Developer Contributions. Under these arrangements the prudential borrowing of £16.429m will be repaid over a 15 year period.

13. Note that the annual interest cost will be phased over three years commencing in 2024 / 25 until the loan is repaid, this will be funded from Council Tax income generated from approximately 100 housing in 2024 / 25, 100 in 2025 / 26 and 127 in 2026 / 27 (i.e. the Council tax income from a total of 327 houses).

13.1 Agrees the provisional financial package set out in this report; and

13.2 Agree that the Council underwrites all land assembly costs and compensation costs arising from the making and implementation of the Orders in the event that these exceed the anticipated Scheme cost as set out in table 1 (summary of costs and funding) of this report.

Councillor Andrew Martin-Wells returned to the meeting.

## **110. LGA Corporate Peer Challenge – Proposed Action Plan** *(Managing Director)*

### **Type of decision**

Non-key decision.

### **Purpose of report**

To present to members the proposed action plan in response to the recommendations identified through the LGA Corporate Peer Challenge following held in December 2022.

### **Issue(s) for consideration**

The Managing Director reported that as part of the CPC process the Council is required to publish an action plan setting out how it will respond to the recommendations that the Peer Team has made within 6 weeks of publishing the feedback report.

As agreed at Council in January all elected members were invited to share their thoughts on what should be included within the action plan. Those responses had been considered alongside the thoughts of the Senior Management Team (SMT) and the proposed action plan was submitted for members' approval.

Six months after a CPC, the LGA organises a check-in meeting. This is a facilitated session which creates space for the council's senior leadership to explore progress and challenges with the peers, and discuss their next steps. This is due to take place on 30th August 2023.

Some Members indicated that they would wish to reserve any comments on the action plan until Council on 23 March. The Managing Director

commented that any amendments to the action plan may have to come back to this Committee which, with this being the last meeting of the Municipal Year, could mean a significant delay in starting work on the action plan. The Managing Director also reminded Members that the action plan had to be agreed within 8 weeks of the LGA CPC report being published.

### **Decision**

That the proposed action plan produced in response to the recommendations from the Corporate Peer Challenge be noted and referred to full Council for approval.

Councillor Mike Young left the meeting.

## **111. Screen Industries Production Village – Levelling Up Fund** *(Managing Director)*

### **Type of decision**

Non-key Decision.

### **Purpose of report**

The purpose of the report was to update the Finance and Policy Committee on the successful outcome of the Council's bid to the Department of Levelling Up Housing and Communities (DLUHC) 'Levelling Up Fund Round 2' programme and seek approval to accept the £16.45m grant, subject to Subsidy Control regime compliance.

### **Issue(s) for consideration**

The Managing Director reported on the Council's successful bid to the government's £4.8bn 'Levelling Up Fund Round 2' (LUF2) programme, managed by the Department for Levelling Up Housing and Communities (DLUHC) which was designed to invest in 'infrastructure that supports town centre and high street regeneration, local transport projects, and cultural and heritage assets'.

The Screen Industries Production Village project would provide supporting infrastructure within a transformed urban environment, through acquisition and development of flexible spaces for post-production, back-office accommodation and wider support services for the Screen Industries. The intervention would support job creation, productivity growth, enhanced environment and place-making, setting foundations for future market-led intervention in the emerging North-East Screen Industries hub.

The value of the capital grant requested from the LUF2 fund was £16,453,891 with match funding required to deliver the project of £2,114,000, which represents 11% of the overall bid cost with £2m of this being provided by TVCA, allocated in their Quarter 4 Budget Report and

Medium-Term Financial Plan. The remaining £114,000 of match funding is an existing committed allocation to the work in protecting and weatherproofing the Shades building.

The Managing Director highlighted that HBC was obliged to undertake comprehensive Subsidy Control assessment to ensure that in receipt and distribution of public funds, we are fully compliant with the regime and its detailed set of principles, as under the regime awards may be subject to recovery if the declarations were found to be deficient.

The Chair congratulated the officers involved in developing the bid which had been led by the sector to this successful conclusion. This was an extremely exciting development for the town and particularly for the young people that could find jobs in this sector. Members welcomed the news and commended those involved in the successful bid. A Member asked if the issue of childcare for young mothers in further education could be considered around the developments. The Managing Director stated she would refer the comments to the Northern School of Art.

There was no dissent to the following decisions.

#### **Decision**

1. That the contents of the report and the successful outcome of a strong submission to the Department of Levelling Up Housing and Communities be noted.
2. That the acceptance of the £16.45m grant be approved, subject to the Council's completion of the Department of Levelling Up Housing and Communities' Subsidy Control due diligence stage.
3. That a progress report on Levelling Up delivery be provided to the Economic Growth and Regeneration Committee at six month intervals.

## **112. Hybrid Working Policy** (*Chief Solicitor*)

#### **Type of decision**

Non-Key Decision.

#### **Purpose of report**

The purpose of the report was to request Finance and Policy Committee approval for a new Hybrid Working Policy and Procedure.

#### **Issue(s) for consideration**

The Chief Solicitor reported that hybrid working had been critical during the Covid19 pandemic and had had long lasting implications for many

workplaces. The Council had continued with hybrid working on a 'pilot' basis following consultation and a formal review in September 2022. Hybrid working has become a common practice across many employers and has major advantages to support recruitment and retention especially where there are key skills shortages. The flexibility and home/work balance of hybrid working has also proved a major motivator for many employees.

The hybrid working policy now developed for Members approval, had been subject to full consultation with the Trades Unions. The policy would be key in facilitating the move of staff from other buildings into the Civic Centre and would also have IT consequences moving forward.

Members considered it was appropriate for all staff to come into the office two days a week to allow for face to face contact with managers and colleagues. Working from Home did place additional pressures on managers and it was important that all staff were protected through the application of the policy.

There was no dissent to the following decision.

#### **Decision**

That the Hybrid Policy and Procedure as submitted, be approved.

### **113. Council Plan 2021-2024 – Progress Update** *(Managing Director)*

#### **Type of decision**

For information only.

#### **Purpose of report**

To provide an update to Finance and Policy Committee on the progress made on the delivery of the Council Plan so far this year and to share with the Committee the latest version of the Strategic Risk Register.

#### **Issue(s) for consideration**

The Managing Director submitted a detailed report updating members on the progress against the Council Plan and highlighting the areas of concern that may impact on future progress, many of which were national issues across the whole of local government.

The Chair welcomed the report as it provided a regular and clear update on the work of the Council across all departments and service areas. It was also important to highlight the areas of concern and to provide assurance where possible.



Members noted and briefly discussed the issues around both child and adult safeguarding and committed to providing whatever support they could. The Managing Director thanked Members for their comments and reported that concerns had been raised with the Department of Levelling Up, Communities and Housing and the Chair added that Members should pursue any avenue to 'bang the drum' for more support for Hartlepool.

### **Decision**

1. That the progress made on the Council Plan 2021-2024 by February 2023 be noted;
2. That the updated Strategic Risk Register as submitted, including the addition of 1 new risk covering 'market failure and sufficiency of provision (children's)', be noted.

## **114. Housing Revenue Account - Revenues and Capital Financial Management Report** *(Director of Resources and Development)*

### **Type of decision**

For information.

### **Purpose of report**

The purpose of this report was to inform Members of:

- i) 2022/23 Forecast HRA Outturn;
- ii) 2022/23 HRA performance; and
- iii) 2022/23 HRA Capital Programme Monitoring.

### **Issue(s) for consideration**

The Director of Resources and Development submitted a detailed report setting out the up-to-date position of the Housing Revenue Account. The Director reported that of the three other Councils in the region that operated a HRA all had increased rents by the government maximum of 7% while Hartlepool's rise had been 5%.

The management of the HRA would still be a challenge moving forward and additional statistical information was being developed for reporting to Members. In response to a Member question, the Director indicated that the new units coming forward would help with income and also by being new would also reduce maintenance needs. Members noted that the forecast £8000 deficit was mainly down to maintenance expenditure and also noted that all the Hill View properties had been let.

### **Decision**

That the report be noted.

## **115. Any Other Items which the Chairman Considers are Urgent**

The Chair noted that this was the last Finance and Policy Committee for the Director of Resources and Development, Mr Chris Little. The Chair thanked Mr Little for his dedicated service to the Council and for all the advice and support he had provided the Chair. The sentiments were echoed by the Members present. The Director thanked the Chair and Members for their comments and in turn thanked the team that had supported him throughout his time at Hartlepool.

The meeting concluded at 12.00 noon.

**H MARTIN**

**CHIEF SOLICITOR**

**PUBLICATION DATE: 23 MARCH 2023**

## **SAFER HARTLEPOOL PARTNERSHIP MINUTES AND DECISION RECORD**

6 March 2023

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

### **Present:**

### **Responsible Authority Members:**

Tony Hanson, Director of Neighbourhoods and Regulatory Services  
Hartlepool Borough Council  
Sylvia Pinkney, Assistant Director, Regulatory Services, Hartlepool Borough Council

### **Other Members:**

Craig Blundred, Director of Public Health, Hartlepool Borough Council  
Sarah Wilson, Office of Police and Crime Commissioner for Cleveland  
Sally Robinson, Director of Children's and Joint Commissioning Services,  
Hartlepool Borough Council

### **Also Present:**

Denise Holian, Office of Police and Crime Commissioner for Cleveland  
Temp Chief Inspector Peter Littlewood, Cleveland Police  
John Lovatt, Assistant Director, Adult Social Care, Hartlepool Borough Council, as  
substitute for Jill Harrison.  
Councillors Sue Little and Carole Thompson

### **Officers:**

Phil Hepburn, Community Safety and Operations Manager  
Rachel Parker, Community Safety Team Leader  
David Cosgrove, Democratic Services Team

## **20. Appointment of Chair for the meeting**

The Principal Democratic Services Officer reported that he had received apologies for absence from both the Chair, Councillor Moore and the Vice-Chair, Superintendent Harrison. Nomination of a chair for this meeting was therefore sought from the Prescribed Members.

Mr Tony Hanson, was nominated and appointed as Chair for the meeting.

Mr Hanson in the Chair.

## 21. Apologies for Absence

Councillor Moore, Elected Member, Hartlepool Borough Council (Chair)  
Councillor Stokell, Elected Member, Hartlepool Borough Council  
Denise McGuckin, Managing Director, Hartlepool Borough Council  
Superintendent Emily Harrison, Community Safety, Cleveland Police  
Steve Turner, Office of Police and Crime Commissioner for Cleveland  
Karen Hawkins, Director of Commissioning, Strategy and Delivery, NHS  
Tees Valley Clinical Commissioning Group  
Angela Corner, Head of Community Resilience, Thirteen Group  
Jill Harrison, Director of Adult and Community Based Services, Hartlepool  
Borough Council

## 22. Declarations of Interest

None.

## 23. Minutes of the meeting held on 17 October 2022

Confirmed.

## 24. Cleveland Online Policing App (COPA) *(Project Manager, Office of the Police and Crime Commissioner for Cleveland)*

### Purpose of report

To provide an outline of the Cleveland Police COPA app for reporting crime.

### Issue(s) for consideration

The representative from the Office of the Police and Crime Commissioner gave a presentation to the Partnership outlining how to sign up for the app, how reporting was undertaken, how reports were monitored and statistical information gathered. It was reported that over 2800 people had now downloaded the app to their phones.

An elected Member commented that they had reported problems with off-road bikes and had been disappointed to get a message back that they would not get a response because it was a weekend. The PCC representative stated that all information was gathered and used to build up intelligence. It may be necessary, however, to change some of the initial messaging on screen so people were more aware of the hours of operation.

The Chair commented that HBC Communications Team could be asked to promote the app further. The PCC representative stated that people without smart phones or who weren't comfortable using technology could

still make reports to the 101 telephone line. The Chair requested that the presentation be shared with partners.

### **Decision**

That the report on the Cleveland Online Policing App be noted.

## **25. Martyn's Law and Publicly Accessible Locations Update** *(Director of Neighbourhoods and Regulatory Services)*

### **Purpose of report**

To provide the Partnership with an update of Martyn's Law previously referred to as the Protect Duty.

### **Issue(s) for consideration**

The Assistant Director, Regulatory Services reported that an initial report was presented to the Partnership in March 2022 detailing the Governments plans, and this report will highlight the duty in more significant detail. In December 2022, the Government announced proposals for new measures to be taken to protect public venues. This had previously been referred to as the Protect Duty, however, it would now be known as 'Martyn's Law' in tribute to Martyn Hett, who was killed alongside 21 others in the Manchester Arena terrorist attack in 2017.

The report updated the Partnership on the scope of Martyn's law and how it would be applied and who it applied to. In preparation for the introduction of Martyn's Law Hartlepool Borough Council had been taking part in the Publicly Accessible Locations Pilot and had been working closely with the Counter Terrorism North East Policing team since 1st April 2022.

By participating in the Pilot Hartlepool Borough Council had established a dedicated overarching Publicly Accessible Locations Group and a number of working subgroups. This preparatory work had given the council a head start on the Martyn's Law requirements. The Council had been risk assessing its premises which may hold "qualifying activities" through a joined-up approach of Council employees and a dedicated Counter Terrorism Security Advisor who is employed by Counter Terrorism Policing North East. The Pilot had placed the Council in a good position for the impending legislative requirements as it had provided a good baseline for greater coordination of security planning, greater awareness and training in counter terrorism.

An elected Member noted that Hartlepool would have a small number of events that would qualify under Martyn's Law and noted that there had been bag searches at the last Waterfront Festival at the Marina. The elected Member asked how many people in general were stopped and searched in Hartlepool on a weekly basis. The Cleveland Police representative stated that the force had become more proactive in its approach to stop and search over recent months and had now made it

mandatory for officers to use body cams when undertaking stop and searches. Around 20 per week were currently undertaken.

There was also regular independent scrutiny of the body cam footage to ensure compliance with the regulations around stop and search. The Chief Inspector undertook to share details of the group that undertook the reviews of the videos with the Partnership as new people for the group were being recruited.

### **Decision**

That the report be noted and that Partners consider the potential financial implications of meeting the legislative obligations.

## **26. Serious Violence** (*Director of Neighbourhoods and Regulatory Services*)

### **Purpose of report**

To provide an update on the Serious Violence Duty, following a previous report which was presented to the partnership in March 2022.

### **Issue(s) for consideration**

The Assistant Director, Regulatory Services reported on the duty around, and the definitions, of serious violence. The Cleveland Specified Authorities Stockton, Redcar and Cleveland, Middlesbrough and Hartlepool have agreed to work jointly through the Cleveland Unit for the Reduction of Violence (CURV) to help meet the legal obligations specified by The Duty. CURV would have a coordinating role, carrying out data analysis, apply for funding streams and submit Home Office returns on behalf of the authorities. This has been supported by the CURV Governance Group.

In order to prepare and implement a strategy to prevent and reduce serious violence in the area, the partnership would collectively develop a strategy which would outline the multi-agency response that the partnership would take to address the drivers identified in the strategic needs assessment and work to prevent and reduce serious violence in the local area.

The strategy would contain bespoke solutions to prevent and reduce serious violence in the area, and would set out how the proposed actions will enhance and complement existing local arrangements responding to serious violence. This must be kept under review, which should be done on an annual basis and updated when necessary.

### **Decision**

That the report be noted.

## **27. Independent Review Of Prevent** *(Director of Neighbourhoods and Regulatory Services)*

### **Purpose of report**

To inform the Safer Hartlepool Partnership of the findings and recommendations of the Independent Review of Prevent.

### **Issue(s) for consideration**

The Community Safety and Operations Manager reported that the Independent Review of Prevent had paved the way for a stronger, more transparent, and proportionate approach to stopping people from being radicalised into terrorism, and recognised the need for Prevent to understand better ideology and the individual agency of people who willingly support terrorism. In total, the review made 34 recommendations that have been accepted by the government. A Summary of the headline recommendations and the Government responses were submitted as an appendix to the report.

### **Decision**

That the report be noted.

## **28. Any Other Items which the Chairman Considers are Urgent**

The Chair ruled that the following item of business should be considered by the Committee.

## **29. Policing Update** *(Director of Neighbourhoods and Regulatory Services)*

### **Purpose of report**

To provide and update on Policing in Hartlepool

### **Issue(s) for consideration**

The temporary Chief Inspector gave an update on Policing in Hartlepool including the following points: -

- 105 engagements in face to face meetings including ward surgeries.
- A 29% increase in neighbourhood patrols.
- Attendance at 103 incidents in November and 60 in December 2022.
- 63 arrests had been made in the last quarter.
- Burglary was down 7% though robbery was up 6%.
- Vehicle crime was up 34%. Criminal damage up 7.9%.
- There were 92 active criminal investigations ongoing.
- In January two individuals had been stopped and arrested for supplying tablets to school children.

- Operation Endurance continued with 8 off-road motorcycles being seized.
- Over £4m of drugs had been taken off the streets across the force area.
- A man had been arrested and charged with over 40 offences of stalking and harassment.

The Chief Inspector reported that the structure of the force was also changing and Hartlepool would have a dedicated Chief Superintendent and Chief Inspector.

A Member of the public questioned the use of civil injunctions particularly following Community Triggers. Officers present confirmed that the use of civil injunctions was embedded with partners and used regularly.

**Decision**

That the report be noted.

The meeting concluded at 11.10 am.

CHAIR



# FINANCE AND POLICY COMMITTEE

3<sup>rd</sup> July 2023



**Report of:** Director of Finance, IT and Digital

**Subject:** FINAL OUTTURN 2022/23

**Decision Type:** Budget and Policy Framework

## 1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives
- where those who are vulnerable will be safe and protected from harm
- of resilient and resourceful communities with opportunities for all
- that is sustainable, clean, safe and green
- that has an inclusive and growing economy
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community

## 2. PURPOSE OF REPORT

2.1 To provide details of the final outturn position for 2022/23 financial year.

## 3. BACKGROUND

3.1 The Council is required to publish an annual statement of accounts in line with statutory deadlines. The deadline for production of the statement of accounts for the current year is the 31 May 2023, having been brought forward from the 31 July the previous year at short notice. This was, despite a consultation where the Local Government Association and the majority of Councils requested it be extended to 30 June 2023. Like a significant number of others, the Council has been unable to achieve this deadline, primarily owing to a delay in confirming balance sheet valuations of pension fund liabilities. The draft accounts were published

on the 16 June and will be presented to Audit and Governance on the 18 July 2023.

- 3.2 The purpose of this report is to provide members with details of the final outturn position, building on the in-year monitoring information received at prior meetings. The outturn position corresponds to the position set out in the statement of accounts.

#### 4. GENERAL FUND REVENUE OUTTURN

- 4.1 The final revenue outturn position is a net overspend of £0.962m after earmarking of reserves for specific purposes. This underspend represents an improved position to that presented at quarter 3 where an outturn of £1.374m overspend was forecast. The bottom line overspend has been funded from the Budget Support Fund as part of year end entries. The position is summarised in the table below with detailed variations presented in Appendices A to D.

Description of Expenditure	2022/2023 Approved Budget £000	2022/2023 Actual Expenditure/ (Income) £000	2022/2023 Variance Adverse/ (Favourable) £000
Adult & Community Based Services	35,535	35,197	(338)
Children's & Joint Commissioning Services	26,636	29,042	2,406
Neighbourhoods and Regulatory Services	18,907	19,801	894
Resources and Development (inc Legal)	5,056	5,009	(47)
Dedicated Schools Grant Related Expenditure	42,169	42,169	0
Housing Revenue Account (HRA)	0	(5)	(5)
<b>Total Departmental Position</b>	<b>128,303</b>	<b>131,213</b>	<b>2,910</b>
Non Departmental Expenditure (inc NI saving)	(11,262)	(11,535)	(273)
Use of Income Reserve	0	(680)	(680)
Use of Inflation Reserve	0	(1,000)	(1,000)
Contribution to HRA Reserve	0	5	5
<b>Final Gap Funded from Budget Support Fund</b>	<b>117,041</b>	<b>118,003</b>	<b>962</b>

- 4.2 Members will be aware that when the 2022/23 budget was set, the Bank of England was forecasting a lower inflationary peak, with a subsequent return to normal inflationary trends during the year. The war in Ukraine and subsequent impact on energy and commodity prices resulted in a peak of inflation at 11.1% in October 2022. These increases, coupled with a higher than expected pay award has placed considerable strain on

the budget throughout the year and this has been documented in the quarterly update reports.

- 4.3 During the latter half of the year energy prices continued to decline aided by above average temperatures across Europe allowing injections into storage where ordinarily there would be withdrawals. However, prices remain above the 2021/22 average.
- 4.4 As part of the MTFS, the Council established an energy cost reserve at year end as part of a twofold strategy for increasing the revenue budget for anticipated long term prices and use of this reserve for the shorter term spike. This foresight has protected the Council in the current year with £0.300m being withdrawn from the reserve at outturn to meet the shortfall in budget. The on-going impact into 2023/24 and beyond will be considered as part of first review and the MTFS respectively.
- 4.5 The 2023/24 budget was set taking account of the inflationary and demand pressures experienced during the year. Where subsequent variances have arisen that have not been reflected in the 2023/24 budget, these will be scrutinised and considered as part of the 2024/25 Medium Term Financial Strategy.
- 4.6 Work has now concluded in signing off all Covid-19 related grant schemes, with the exception of business Covid grants where the government continues to review post payment assurance declarations. Any outstanding balances in relation to Covid schemes will be reviewed in line with grant conditions as part of a Reserves review during the year. With regard to fees and charges there is a degree of hesitancy still for some of these services, which is having a budgetary impact in certain areas. The position will be kept under review.

### **Adult and Community Based Services**

- 4.7 The final outturn reflects some of the approved 2023/24 savings being achieved in the current financial year, one-off DHSC grant funding, current packages of adult social care costs and current income projections for community based facilities. These were one-off benefits in 2022/23.

### **Children and Joint Commissioning Services**

- 4.8 The final outturn mainly relates to an increase in the number of children in our care requiring external residential placements, reflecting the increasing complexity of their needs and the significant fees being charged by the external care market. A budget pressure of £1m for this area has been included within the 2023/24 budget as part of the approved MTFS with further pressures included in the latest MTFS for 2024/25 to 2026/27.

- 4.9 The final outturn also reflected a specific high cost placement of a child in our care which the Council are jointly funding with health until July 2025 when the child turns 18. The Council's share of the costs in 2022/23 were funded from a combination of the overall outturn and from the specific Children In Our Care Reserve.

### **Neighbourhoods and Regulatory Services**

- 4.10 The department overspent by £0.918m. This is predominantly as a result of a number of factors including inflationary pressures on goods, materials and fuel and shortfalls in fee income as well as the pay award adversely impacting overhead recovery in trading areas. There was also an adverse variance in the Passenger Transport service. This reflects a number of issues including an increase in under 16 demand led SEND referrals, which require out of town transport and inflationary pressures in relation to fuel and cost of external provision. However, adverse variances were partly offset by one-off savings in relation to Sustainable Transport and Community Safety and Engagement, increased planning income, favourable conditions throughout the year in relation to floods and water management, and an over achievement of the salary abatement target from vacant posts.

### **Resources and Development (inc Legal)**

- 4.11 The department underspent by £0.047m. This was owing to vacant posts, posts not at the top of the grade and additional grant income offset by reduced income generation and the additional cost of two by-elections.

### **Dedicated School Grant Outturn**

- 4.12 The Dedicated School Grant (DSG) in-year position overspent by £0.496m. After taking account of the surplus carried forward from 2021/22 of £1.230m the overall surplus at the end of the year was £0.734m.
- 4.13 Up until 2022/23, the Council had successfully managed high needs block (HNB) costs within the available annual grant allocation and HNB reserves. This has been achieved despite a significant increase in demands on this service, including the impacts arising from COVID-19. Demands on the service in 2023/24 are forecast to exceed the grant allocation of £18.6m by £2.2m – a deficit of 11.8%. The increase in cost is considered necessary to invest in Hartlepool provision and so avoid placement of pupils with SEND outside the town wherever possible. In time, this approach will reduce costs for independent and out of town provision and provide an improved outcome for Hartlepool children. Schools Forum have agreed to develop an action plan during 2023/24 to address this projected deficit in order to bring DSG HNB spend back in line with the budget over the next three years.

## **Corporate**

- 4.14 The corporate budget is showing an underspend of £0.013m. This reflects inflationary pressures on key contracts offset by additional unbudgeted grant income. In addition there is a £0.260m saving on National Insurance following the reversal in the mini budget of the 1.25% increase originally introduced in July 2022.

## **Reserves**

- 4.15 There has been no significant year end reserves created. Reserves have been established or supplemented within service areas as a result of timing issues to meet known commitments, partnership requirements and as required by grant conditions. This includes increased interest on balances achieved in year and earmarked to support the budget over the medium term. Technical accounting reserves have been established as required.
- 4.16 The full analysis of the Councils reserves position is published as part of the statement of accounts. As noted in paragraph 4.1 the overall overspend of £0.962m, has been funded from the Budget Support Fund

## **5 HOUSING REVENUE ACCOUNT**

- 5.1 Although there was a £0.005m contribution to the HRA reserve as at 31 March 2023, this represents an adverse variance of £0.009m compared to the budgeted contribution of £0.014m. The position is summarised below with details reported in Appendix K.
- 5.2 There were a number of adverse variances in relation to income including loss of rental income from right to buy disposals and the delayed let dates from the original forecast in relation to new Hill View properties.
- 5.3 There were a number of compensating favourable variances in relation to expenditure. These included lower interest payable than budgeted as a result of the phasing of the funding of capital expenditure, and owing to their nature, a proportion of repairs funded from the Major Repairs Reserve rather than the HRA.
- 5.4 The HRA reserve increased by £0.005m to £0.500m. As at 31 March 2023 the HRA stock is 324 properties of which 18 new build homes were added during 2022/23 and 3 properties were disposed of through 'Right to Buy' sales. Further details in relation to capital expenditure are included within Appendix L.

## **6. INCOME COLLECTION AND COLLECTION FUND**

### **Sundry Debts**

- 6.1 The Council raises invoices for circa £36m of sundry debts income for payment of services provided by the Council. The Council's performance in collecting these debts is positive with 96.8% of debts collected within the year they are billed, representing an improved position from 2021/22 (95.1%) as the service recovers from the pandemic. Long term collection remains high with 99.6% (98.7% comparative figures for 2021/22) of sundry debts fully recovered within 2 years.
- 6.2 The Council's financial procedure rules provide that any debt due to the Council of £50,000 or more can only be written-off with the agreement of the Finance and Policy Committee. Robust procedures are followed in order to maximize recovery of all sums due, however, inevitably on occasion write off is required.
- 6.3 A debt in excess of £50,000 is set out at Appendix N for write off approval. **This item contains exempt information under Schedule 12A Local Government Act 1972 (as amended by the Local Government (Access to Information) (Variation) Order 2006) namely, (para 3). Information relating to the financial or business affairs of any particular person (including the authority holding that information).**

### Council Tax

- 6.4 After the award of relevant discounts, exemptions and Local Council Tax Support awards, the Council collected over £51m of current year Council Tax in 2022/23. In year performance has been impacted by the £150 Energy Rebate scheme; in addition to the significant staffing resource impact, reminder and enforcement activity were suspended until August in order to prioritise distribution of the rebate.
- 6.5 The final collection rate for 2022/23 is 92.14% which is an improvement on the 91.61% for 2021/22. It remains significantly lower than the pre-pandemic in-year rates which averaged circa 95%. The performance position demonstrates the scale of the task in recovering from the pandemic, made more challenging by the prevailing economic conditions. However, the improved performance hopefully reflects the beginning of a return to normal trends.
- 6.6 More positively in excess of £2.7m of arrears was collected during 2022/23, which was a further improvement on the £2.5m collected in 2021/22. By way of comparison the three years prior to the pandemic, average arrears collection was £1.6m a year. This demonstrates our continued approach to seek recovery of all Council Tax arrears and provides some reassurance that our long term collection target of 98.5% remains appropriate, if challenging.
- 6.7 Based on the outturn position, the exceptional deficit arising during the pandemic will be eliminated over the three year spreading period that that was allowed by government.

## Business Rates

- 6.8 The government continued to support businesses during the year with further rounds of Covid-19 Business Rates Relief schemes, including for Retail, Hospitality and Leisure. These reliefs result in a reduction in collectable business rates, but with full compensation via a Section 31 grant. This support will continue into 2023/24.
- 6.9 After reliefs, the Council collected circa £32m of current year business rates in 2022/23, of which 50% is retained locally under the current Business Rate Retention system. The collection rate for 2022/23 was 98.17% continuing the improvement seen over the last two years and is now in line with the historic in year collection rates. In addition we continue to make good progress in collecting previous year's arrears. The long term collection rates remain positive with a target of 99% long term collection.
- 6.10 Based on the outturn position, the exceptional deficit arising during the pandemic will be eliminated over the three year spreading period that that was allowed by government, though Business rates remain volatile given the ability of businesses to challenge their rateable value.
- 6.11 The position continues to be closely monitored for signs of financial stress in the business sector. To date we are not experiencing any more payment difficulties from businesses than in previous years. Where difficulties do arise, the team work with the business to tailor payments accordingly, whilst seeking to ensure full recovery of liability.
- 6.12 The Council's financial procedure rules provide that any debt due to the Council of £50,000 or more can only be written-off with the agreement of the Finance and Policy Committee. Robust procedures are followed in order to maximize recovery of all sums due, however, inevitably a number of accounts do become irrecoverable. There are two debts of over £50,000 that are deemed to be irrecoverable due to insolvency and the remaining outstanding sums are now recommended for formal write-off:
- Northumbrian Entertainments Limited, 84 York Road. Debt relating to between November 2009 and February 2021. All efforts have been made to collect this debt and the Council have worked with the liquidators to recover any sums possible. The outstanding balance for write-off is £100,517.71.
  - Brenda Road Properties Limited (BRPL), Brenda Road. Debt relates to between July 2016 and March 2022, though predominantly 2019/20 onwards. The land occupied by BRPL was sold by the owners in March 2022. BRPL had no assets of their own and the company dissolved in October 2022. The outstanding balance for write-off is £55,002.04.

- 6.13 Historical accounting provisions have been created against which these debts can be written off.

## 7. CAPITAL OUTTURN

- 7.1 Details of actual General Fund capital expenditure against the capital programme are provided in Appendices E to J and summarised below. Where applicable expenditure has been re-phased into subsequent years. Resources will be carried forward to fund these commitments.

Department	2022/23 Budget  £000	2022/23 Actual as at 31/03/22 £000	Expend Rephased into 2022/23 £000	Actual plus Rephased Expend £000	Variance from Budget  £000
Capital Investment Programme	15,144	4,458	10,686	15,144	0
Adult & Community Based Services	4,849	1,996	2,853	4,849	0
Children & Community Based Services	9,035	1,358	7,677	9,035	0
Neighbourhood & Regulatory Services	10,849	5,869	4,980	10,849	0
Resources and Development	453	148	305	453	0
Corporate	2,118	764	1,354	2,118	0
<b>Total</b>	<b>42,448</b>	<b>14,593</b>	<b>27,855</b>	<b>42,448</b>	<b>0</b>

- 7.2 The underspend in year is, in part due to initial phasing of spend whereby the budget was allocated fully into 2022/23 on the majority of capital schemes. For major schemes a re-profiling was undertaken as part of the 2023/24 budget setting and work is on-going to re-phase the remainder of capital programme on a more appropriate basis.
- 7.3 A number of schemes have been delayed pending confirmation of funding approval, planning and other preparatory works. The procurement process remains challenging given the wider economic environment and supplier constraints within the construction industry.

### Section 106 Developer Contributions

- 7.4 The level and usage of contributions for housing and non-housing services areas as at the 31 March 2023 is detailed at Appendix M. In total £4.206m of S106 funds are held and fully committed.

### Capital Receipts

- 7.5 Achievement of capital receipts target has continued to be challenging. There remains £0.204m outstanding in relation to the previous target. Land sales in the current year are expected to address this shortfall.

## 8. URGENT DECISIONS



8.1 In accordance with the delegation scheme at Part 3 of the Constitution, the Managing Director exercised two urgent decisions during the final quarter that require reporting to Finance and Policy Committee:

- The Council agreed terms on an option to purchase the freehold of the Corporation Club in order to support land assembly requirements for our Screen Industries Production Village Scheme. This was progressed as an urgent decision to reduce the immediate risk that a required property would become unavailable, and thus impact upon the wider scheme and outcomes.
- The Council acquired Hartlepool Magistrates Courts and Probation building by way of surrender of the lease held by His Majesty's Courts and Tribunals Service (HMCTS). This was progressed as a matter of urgency in order to meet the tight deadline of 31 March 2023 imposed by HMCTS to ensure they had the funding available to meet the surrender terms including the payment of a reverse premium to the Council.

## 9. OTHER CONSIDERATIONS

Risk Implications	No relevant issues
Financial Considerations	The financial implications are fully set out in the main body of the report.
Legal Considerations	No relevant issues
Child / Family Poverty Considerations	No relevant issues
Equality and Diversity Considerations	No relevant issues
Staff Considerations	No relevant issues
Asset Management Considerations	No relevant issues
Environment, Sustainability and Climate Change Considerations	No relevant issues
Consultation	No consultation required

## 10. RECOMMENDATIONS

10.1 It is recommended that Members:

- i) Note the final 2022/23 outturn position of £0.962m overspend and the accompanying financial performance for the year, including decisions undertaken for urgency;
- ii) Note the final 2022/23 outturn in relation to the Housing Revenue Account detailed within Section 5 of the report;
- iii) Note the capital outturn position detailed within Section 7 of the report; and
- iv) Approve the write off as detailed in Section 6 of the report and confidential Appendix N.

## 11. REASONS FOR RECOMMENDATION

- 11.1 To inform Finance and Policy Committee of the Council's 2022/23 financial outturn position.

## 12. BACKGROUND PAPERS

Strategic Financial Management Report – as at 31 July 2022 report to Finance and Policy Committee 28 September 2022.

Strategic Financial Management Report – as at 30 September 2022 report to Finance and Policy Committee 21 November 2022.

Strategic Financial Management Report – as at 31 December 2022 report to Finance and Policy Committee 13 February 2023.

## 13. CONTACT OFFICER

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 Director of Finance, IT and Digital  
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 Telephone: 01429 523093

Sign Off:-

Managing Director	Date: 21/06/2023
Director of Finance, IT and Digital	Date: 21/06/2023
Director of Legal, Governance and HR	Date: 21/06/2023

## ADULT & COMMUNITY BASED SERVICES

## 4.1 Appendix A

### REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2022/23 as at 31 March 2023

Approved 2022/23 Budget  £'000	Description of Service Area	Actual Outturn Variance as at 31 March 2023 Adverse/ (Favourable) £'000	Director's Explanation of Variance
53	Adult Education	22	
20	Archaeology	4	
3	Carers & Assistive Technology	2	
(163)	Coast, Countryside & Heritage	48	This mainly relates to essential maintenance works within cemeteries and crematoria and children's playgrounds and reduced income within outdoor markets.
2,371	Commissioning - Adults	(67)	Mainly relates to early achievement of 2023/24 savings.
1,231	Community Hubs	225	The overspend mainly relates to reduced income from room hire across all sites, including the CECA.
719	Cultural Services	210	Mainly relates to historic income pressures across the Town Hall and Borough Hall.
182	Departmental Running Costs	13	
547	Direct Care & Support Team	(97)	Mainly relates to additional grant funding and reduced Telecare equipment expenditure pending commencement of the new contract for Telecare delivery from April 2023.
0	Employment & Skills	0	
76	General Allotments	3	
582	LD & Transition Social Work	49	Mainly relates to the 2022/23 Pay Award.
2,030	Locality & Safeguarding Team	94	Mainly relates to the 2022/23 Pay Award.
1,054	Mental Health Services	(7)	
1,353	OT & Disability Equipment	20	
1,651	Packages of Care - Mental Health	(43)	
11,826	Packages of Care - Older People	(195)	Early achievement of 2023/24 savings, increased income and a small number of high cost packages ending.
10,238	Packages of Care - Working Age Adults	(810)	
560	Sports, Leisure & Recreation Facilities	232	Income pressures across all service areas combined with the impact of the 2022/23 pay award.
1,202	Working Age Adult Day Services	(41)	Mainly relates to reduced transport and supplies and services costs.
<b>35,535</b>	<b>Adult &amp; Community Based Services Total</b>	<b>(338)</b>	

CHILDREN'S & JOINT COMMISSIONING SERVICES

4.1 Appendix B

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2022/23 as at 31 March 2023

Approved 2022/23 Budget	Description of Service Area	Actual Outturn Variance as at 31 March 2023 Adverse/ (Favourable) £'000	Director's Explanation of Variance
£'000			
134	Access to Education	(23)	Temporary staff savings and reduction in Feasibility Studies.
172	Central Support Services	0	
21,311	Children and Families	3,230	The outturn variance mainly relates to an increase in the number of children in our care requiring residential placements, reflecting the increasing complexity of their needs and the significant fees being charged by the external care market (23/24 pressure included in MTFS). Other reasons include increases in the overall number of children in our care, Special Guardianship and Child Arrangement Orders and the 2022/23 Pay Award. As previously reported, the forecast outturn also includes a specific high cost placement of a child in our care which the Council are jointly funding with health until July 2025 when the child turns 18. In 2022/23 this was funded from a combination of the overall outturn and the specific Children In Our Care Reserve.
1,249	Early Intervention	14	
487	Other School Related Expenditure	(16)	Reduction in premature retirement costs.
2	Play & Care	25	Historic income pressures and the 2022/23 pay award.
356	Raising Educational Achievement	(46)	Temporary staff vacancy savings.
325	Special Needs Services	55	Financial pressure linked to reduced income from school buybacks and agency costs.
296	Standards, Engagement & Development	(38)	Favourable variance mainly relates to increased training/work placement income.
1,276	Strategic Commissioning	(740)	Mainly relates to the receipt of 'one-off' grant funding not expected at the start of the financial year.
417	Strategic Management	(3)	
287	Youth Justice Service	0	
324	Youth Service	(52)	Staff appointments delayed.
<b>26,636</b>	<b>Children's and Joint Commissioning Services</b>	<b>2,406</b>	
<b>Public Health Grant</b>			
4,000	Children's Services	(2)	
2,501	Substance Misuse Services	(271)	Underspend relates to staff vacancies and external rehabilitation placements.
1,483	General Public Health Support Services	(48)	Underspend relates to staff vacancies which have now been filled.
693	Sexual Health Services	(69)	Underspend relates to savings following the re-tender of the Tees-wide contract.
302	Physical Activity	0	
170	Mental Health	(5)	
112	Health Checks	4	
100	Obesity	0	
(9,361)	Public Health Grant	0	
0	Contribution to Ring-Fenced Public Health	391	The under-spend is transferred to the ring-fenced Public Health grant reserve.
<b>0</b>	<b>Public Health Grant</b>	<b>0</b>	
<b>26,636</b>	<b>Children's and Joint Commissioning Services Total (inc Public Health Grant)</b>	<b>2,406</b>	

## NEIGHBOURHOODS &amp; REGULATORY SERVICES

## 4.1 Appendix C

## REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2022/23 as at 31 March 2023

Approved 2022/23 Budget  £'000	Description of Service Area	Actual Outturn Variance as at 31 March 2023 Adverse/ (Favourable) £'000	Director's Explanation of Variance
(208)	Building Team Design	198	The adverse variance relates to a shortfall in fees and the impact of the pay award.
(903)	Car Parking	0	
966	Community Safety & Engagement	(70)	The favourable variance relates to reduced operating expenditure as a result of vacant posts in this area. In addition there has been a freeze on non-essential expenditure in order to offset inflationary pressures within the department.
(50)	Construction Team	462	The adverse variance is predominantly as a result of inflationary pressures, staff vacancies and the pay award adversely impacting overhead recovery.
325	Engineering Services (incl Coastal Protection and Contaminated Land)	(89)	The favourable variance predominantly relates to reduced expenditure in relation to floods and water management owing to favourable conditions during the year.
1,093	Facilities Management	275	The adverse variance reflects the impact of the pay award on both building cleaning and catering and inflationary pressures in relation to food costs and lower uptake of meals compared to pre-covid activity. Includes mitigation from 10p price rise per meal from September.
2,868	Environmental Services	(40)	The favourable variance predominantly reflects one-off grant funding.
2,399	Highways	210	The adverse variance is predominantly as a result of inflationary pressures and a back log of works undertaken to meet relevant
1,619	Passenger Transport	375	The adverse variance reflects a number of issues including an increase in SEND referrals, which require out of town transport, inflationary pressures in relation to fuel and the cost of external provision which typically has increased by 10%. There is currently a national shortage of qualified drivers owing to new licence requirements, which has meant external operators are having to pay more to attract and retain staff. There are also cost pressures as a result of supply chain delays for new vehicles and shortage of adapted vehicles available to purchase.
905	Public Protection	76	The adverse variance relates to a shortfall in License Fee income owing to a reduction in demand as a consequence of the Covid 19 pandemic. A corporate reserve was established in 2021/22 in response to income risks.
138	Road Safety	(4)	
938	Street Lighting	80	The adverse variance predominantly reflects pressures in relation to maintenance.
2,413	Sustainable Transport	(815)	Favourable variance relates to favourable negotiations with operators.
(83)	Vehicle Fleet	138	Supply chain issues have caused delays for vehicle procurement, although this has resulted in lower borrowing costs this has been offset by higher levels of repairs expenditure due to an ageing fleet and high levels of inflation for vehicle parts that has resulted in an adverse variance. The increased need for vehicle repairs has also increased the need for hired in vehicles to keep services operating further exacerbating the outturn position.
5,800	Waste & Environmental Services	279	The adverse variance reflects additional costs as a result of the shutdown of Energy from Waste Facility and a reduction in the income from recycling.
269	Planning & Development	(119)	The favourable variance is largely a result of the fees paid in relation to two large planning applications.
412	Strategic Management & Admin	(62)	The favourable variance is in relation to salary abatement as a result of vacant posts.
<b>18,902</b>	<b>Neighbourhoods &amp; Regulatory Total</b>	<b>894</b>	

## REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2022/23 as at 31 March 2023

Approved 2022/23 Budget	Description of Service Area	Actual Outturn Variance as at 31 March 2023 Adverse/ (Favourable) £'000	Director's Explanation of Variance
£'000			
(16)	Benefits	(4)	
(1,006)	Central Administration Recharges	(10)	
139	Communications and Marketing	87	The adverse variance is owing to a reduction in income generation.
1,022	Corporate Finance	(104)	Favourable variance owing to vacant posts, posts not being at the top of the grade and some supplies and services savings, this is partly offset by a reduction in income generation.
576	Corporate Strategy & Public Consultation	(66)	Favourable variance owing to vacant posts and reduced working hours..
(143)	Council Tax & Housing Benefits Subsidy	102	The grant generates £24m in subsidy, however the grant is reducing along with the current transfer rate of claimants across to Universal Credit. The adverse variance is based on the final claim submitted to DWP.
983	Customer and Support Services	(40)	Favourable variance owing to some supplies and services savings and additional income generation.
325	Economic Growth	(18)	The favourable variance is a result of fewer business grants being awarded in year.
143	Health and Safety	24	The adverse variance reflects a shortfall in fee income.
243	Internal Audit	23	The adverse variance is owing to a new IT package.
68	Procurement	3	
(138)	Registration Services	18	The adverse variance is owing to a reduction in income generation on both birth and death registration resulting from services being transferred to North Tees Hospital.
(87)	Reprographics	52	The adverse variance is owing to a reduction in income generation.
1,062	Revenues	(210)	Favourable variance owing to vacant posts and additional grant which was not expected.
(665)	Revenue & Benefits Central	(5)	
548	Shared Services	2	
(98)	Strategic Asset Management	35	The adverse variance reflects a shortfall in fee income owing to the timing of capital receipts and the reduction in leasing income owing to lets not being renewed.
148	Strategic Development and Sustainability	0	
(17)	Strategic Management and Admin	18	Salary abatement was lower than the target budget.
392	Corporate Management Running Expenses	(50)	The favourable variance is owing to vacant posts and savings on the Corporate Subscriptions budget.
<b>3,479</b>	<b>Resources &amp; Development</b>	<b>(143)</b>	
41	Civic Attendants	4	
163	Democratic	3	
392	Human Resources	44	The adverse variance is owing to a reduction in income generation.
564	Legal Services	13	The adverse variance is owing to additional supplies and services costs.
165	Municipal Elections and Registration of Electors	55	The adverse variance is owing to additional by-elections.
(4)	Other Office Services	18	The adverse variance is owing to a reduction in income generated from Local Land Searches.
97	Scrutiny	(9)	
131	Support to Members	(32)	The favourable variance is owing to a reduction in supplies and services costs.
4	Training & Equality	(1)	
<b>1,553</b>	<b>Legal</b>	<b>95</b>	
<b>5,032</b>	<b>Resources &amp; Development and Legal Total</b>	<b>(48)</b>	

# CAPITAL INVESTMENT PROGRAMME

# 4.1 APPENDIX E

## CAPITAL OUTTURN REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A Full Budget £'000	B 2022/23 Budget £'000	C 2022/23 Actual as at 31/03/23 £'000	D Expenditure Rephased into 2023/24 £'000	E (C+D) 2022/23 Actual plus Rephased Expenditure £'000	F (E-B) 2022/23 Variance from Budget £'000	Type of Financing	2022/23 COMMENTS
8958	A19/ Elwick Road/ North Lane junction and Elwick Road/Hartlepool Western Link Project	24,497	210	116	94	210	0	MIX	The full budget has been revised based on the current forecast set out in the report to Finance & Policy Committee on 13th March, 2023.
7550	CIP - Waterfront Leisure Centre (Highlight)	21,394	233	36	197	233	0	MIX	Delays in appointing main contractor
7552	CIP - Waterfront Public Realm	2,000	10	10		10	0	GRANT	
7551	CIP - Waterfront Infrastructure	2,256	168	158	10	168	0	MIX	
9101	CIP - Borough Hall Improvement	3,000	200	36	164	200	0	MIX	
9159	CIP - Wingfield Castle works	4,000	234	84	150	234	0	MIX	Details of scheme to be finalised
9161	CIP - NMRN & Museum of Hartlepool	8,500	3,658	3,658	0	3,658	0	MIX	Dive surveys now being carried out (5th June to 9th June). Report expected 16th June in relation to Damboard. Emergency works on Wingfield Castle have been delayed while Beckett Rankine prepare a spec for works following site visit 6th June.
7536	CIP - SEMH Free School Access Road	850	472	9	463	472	0	MIX	
9130	CIP - Business Park Investment	760	751	31	720	751	0	MIX	This scheme is being undertaken in Q1 of 2023/34
TBC	CIP - Waterfront Public Art	780	0	0	0	0	0	MIX	Timetable of this scheme was revised with completion expected Autumn 2023.
TBC	CIP - Mill House Demolition	500	0	0	0	0	0	MIX	These schemes have not yet begun and are awaiting a mandate to commence the scheme.
TBC	CIP - Business Loans Fund	500	0	0	0	0	0	MIX	
TBC	CIP - Shades	4,259	0	0	0	0	0	MIX	
TBC	CIP - Bowling Club Refurbishment	600	0	0	0	0	0	MIX	
TBC	CIP - Brierton Sports Complex	700	0	0	0	0	0	MIX	
TBC	CIP - Headland Sports Hall	200	0	0	0	0	0	MIX	
TBC	CIP - NIP Phase 2	1,000	0	0	0	0	0	MIX	
7447	CIP Cap-Headland Amphitheatre	784	23	23	0	23	0	GRANT	
9165	Towns Fund - Middleton Grange	13,860	3,917	21	3,896	3,917	0	GRANT	
9231	Towns Fund - Waterfront Connectivity	6,200	1,248	14	1,234	1,248	0	GRANT	As detailed in Q3, these schemes had only recently being approved and therefore the budgets were expected to be rephased into 2023/34.
7715	Towns Fund - Wesley Chapel	1,400	1,020	71	949	1,020	0	GRANT	
9234	Towns Fund - Health and Social Care Academy	1,250	1,235	71	1,164	1,235	0	GRANT	
9235	Towns Fund - Civil Academy	2,250	1,703	58	1,645	1,703	0	GRANT	
9247	Levelling Up Production Village	18,568	62	62	0	62	0	MIX	This scheme was approved by Capital Programme Board in April
<b>Major Regeneration Schemes</b>		<b>120,108</b>	<b>15,144</b>	<b>4,458</b>	<b>10,686</b>	<b>15,144</b>	<b>0</b>		

<b>Key</b>		
RCCO	Revenue Contribution towards Capital	GRANT
MIX	Combination of Funding Types	CAP REC
UCPB	Unsupported Corporate Prudential Borrowing	UDPB
SCE	Supported Capital Expenditure (Revenue)	CORP
		Grant Funded
		Capital Receipt
		Unsupported Departmental Prudential Borrowing
		Corporate Resources

ADULT & COMMUNITY BASED SERVICES

4.1 APPENDIX F

CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A	B	C	D	E	F	Type of Financing	2022/23 COMMENTS
		Full Budget £'000	2022/23 Budget £'000	2022/23 Actual as at 31/03/23 £'000	Expenditure Rephased into 2023/24 £'000	(C+D) 2022/23 Actual plus Rephased Expenditure £'000	(E-B) 2022/23 Variance from Budget £'000		
Adult & Community Based Services									
7212	Capital Grants to Care Homes	149	149	17	132	149	0	UCPB	
7234	Chronically Sick and Disabled Persons Adaptations	157	157	13	144	157	0	MIX	
7218	Disabled Facilities Grant	1,618	1,618	1,169	449	1,618	0	GRANT	
7232	Museums Acquisitions	1	1	1	0	1	0	MIX	
7348	Art Gallery	10	10	10	0	10	0	GRANT	
7483	Reinstate 3G Pitch	108	108	1	107	108	0	MIX	Balance of funding to be retained as 'contingency'.
7522	Stranton Cemetery Flood Alleviation	600	240	147	93	240	0	UDPB	
7543	Waverley Allotments (Terrace Car Park)	21	12	0	12	12	0	RCCO	
7576	Seascapes - Seaton High & Lowlight	128	128	10	118	128	0	GRANT	Scheme will complete in 2023/24
7711	Carlton Adventure Centre	400	400	0	400	400	0	MIX	Details of scheme(s) to be finalised
7785	Burn Valley Garden Play Area 2022	29	28	26	2	28	0	GRANT	
7811	Summerhill Cycle Hub	514	166	148	18	166	0	MIX	
7831	Community Hub South - Internal Alterations	88	11	0	11	11	0	MIX	
7990	Boer War Statue - Ward Jackson Park	25	19	19	0	19	0	RCCO	
8103	Swimming Scheme	35	35	0	35	35	0	RCCO	
8108	Centre for Independent Living	146	146	0	146	146	0	RCCO	Funding retained as 'Sinking Fund' to maintain building in future years
8393	Stranton Cemetery Cremators	255	255	239	16	255	0	MIX	
9212	Relocate Cemetery Office	90	90	37	53	90	0	CAP REC	
8088	Community Hub South - Kitchen Replacement	41	41	4	37	41	0	RCCO	
8088	Community Hub Central - Ground Floor Internal Alterations	61	61	34	27	61	0	MIX	
9213	Community Hub Central - Classroom	45	45	45	0	45	0	RCCO	
8534	Church Street Townscape Heritage	264	264	21	243	264	0	RCCO	Grant conditions extended to 2023/24.
8408	Mill House - Equipment Purchase	3	3	0	3	3	0	RCCO	
8409	Sport & Youth Improvements	12	12	0	12	12	0	GRANT	
8634	Playing Pitches - Football Foundation	5	5	0	5	5	0	CAP REC	
8689	Brierton Sports Fields	1	1	0	1	1	0	MIX	
8896	Brierton Tennis Courts	30	30	0	30	30	0	CAP REC	
9232	Playground Equipment - Levelling Up Parks Fund	92	92	21	71	92	0	MIX	
Allot	Waverley Allotments (Adult Education)	53	53	0	53	53	0	RCCO	
Allot	Other Allotment Schemes	190	182	13	169	182	0	UDPB	Details of scheme(s) to be finalised
CR	Crematorium refurbishment	494	487	21	466	487	0	MIX	Scheme expected to commence in 2023/24
Total Adult & Community Based Services		5,665	4,849	1,996	2,853	4,849	0		

Key			
RCCO	Revenue Contribution towards Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
UCPB	Unsupported Corporate Prudential Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
SCE	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources



## CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A Full Budget £'000	B 2022/23 Budget £'000	C 2022/23 Actual as at 31/03/23 £'000	D Expenditure Rephased into 2023/24 £'000	E (C+D) 2022/23 Actual plus Rephased Expenditure £'000	F (E-B) 2022/23 Variance from Budget £'000	Type of Financing	2022/23 COMMENTS
<b>Children's and Joint Commissioning Services</b>									
7384	Devolved Schools Capital	247	201	84	117	201	0	GRANT	Schools Capital funding which includes £123k 2022/23 allocation.
9238	Energy Efficiency Capital Funding	195	195	7	188	195	0	GRANT	Schools Capital funding
7586	Purchase of Computer Equipment - CLC Standards Fund	37	37	0	37	37	0	RCCO	
7355	CECA IT Infrastructure and Technology	42	42	18	24	42	0	GRANT	
7355	CECA TVCA Grant Unallocated	31	31	0	31	31	0	GRANT	
7142	Schools General - Fire Safety Modifications (Conditions)	53	53	0	53	53	0	GRANT	
7142	Schools General - Fire Safety Modifications (Conditions) 22/23	464	464	0	464	464	0	GRANT	Schemes to be identified.
7142	Kingsley - Fire Safety Modifications	319	242	12	230	242	0	GRANT	Scheme on hold.
7142	Throston - Fire Safety Modifications	200	95	17	78	95	0	GRANT	Scheme on hold.
7474	High Tunstall 3G Pitch	24	24	23	1	24	0	MIX	Scheme complete.
7478	High Tunstall Grass Pitch	15	15	0	15	15	0	UDPB	
8906	Brierton Campus Windows	18	18	0	18	18	0	RCCO	Scheme complete.
7521	Two Year Old FNE Capacity Funding	23	23	0	23	23	0	GRANT	
8788	Universal Free School Meals	8	8	8	0	8	0	GRANT	Scheme complete
7568	Lynnfield Primary School Boundary Wall	19	19	19	0	19	0	GRANT	Scheme complete.
7569	Lynnfield Primary School DHW Boiler Renewal	21	9	8	0	8	(1)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
7570	Lynnfield Primary School Heating - Pipework, radiators, fan convectors, air systems	55	33	33	0	33	0	GRANT	Scheme complete.
9163	St Helens Primary School Demolition KS1 and KS2 Chimney	50	49	43	0	43	(6)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
7786	St Helens Primary School Storm Damage to Conservatory	95	13	13	0	13	0	GRANT	
7566	Throston Primary School Heating Renewal	40	18	17	0	17	(1)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
7564	High Tunstall Renew Pool Flooring	11	11	11	0	11	0	GRANT	
9210	Fens Primary School Electrical Rewire	73	73	51	0	51	(22)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
New	Grange Primary School Roofing Works	26	26	18	0	18	(8)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
9207	Grange Primary School Fire Alarm Renewal	60	60	62	0	62	2	GRANT	Scheme complete. Overspend from Unallocated Conditional Funding.
9208	Kingsley Primary School Fire Alarm Renewal	45	45	39	0	39	(6)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
7660	Lynnfield Primary School Toilet Refurbishments	42	42	33	0	33	(9)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
9211	Lynnfield Primary School Gas Main Renewal	40	40	41	0	41	1	GRANT	Scheme complete. Overspend from Unallocated Conditional Funding.
9209	Miers Avenue Children's Centre Boiler Replacement	16	16	13	0	13	(3)	GRANT	Scheme complete. Underspend returned to Unallocated Conditional Funding
7770	St Helens Primary School Main Entrance Access	50	50	9	41	50	0	GRANT	
9148	Springwell Special School Increase Capacity	424	386	310	76	386	0	GRANT	
7661	Catcote Secondary Special School Alternative Provision 6th Form	306	306	36	270	306	0	GRANT	Scheme awaiting pricing and final details.
7560	Free School	26	26	26	0	26	0	GRANT	
7399	Greatham School Led Premises Work	22	22	22	0	22	0	RCCO	
7399	Kingsley School Led Premises Work	15	15	15	0	15	0	RCCO	
9009	Schools ICT	161	161	161	0	161	0	RCCO	
9241	Throston School MUGA	68	68	68	0	68	0	RCCO	
9004	Schools General - Conditions unallocated	112	105	0	158	158	53	GRANT	Funding to be used for 2023/24 Condition Schemes.
9004	Schools General - Contingency	75	75	0	75	75	0	GRANT	
9004	Schools General - Suitability Unallocated (SEMH)	743	743	0	743	743	0	RCCO	Use of funding is being considered in the High Needs Block Review.
9004	Schools General - Special Provision	1,176	1,176	0	1,176	1,176	0	GRANT	Funding to be used in future years
9004	Schools General - Basic Need	916	916	0	916	916	0	GRANT	Funding to be used in future years
7149	Children's Homes	215	215	141	74	215	0	UPDB	
7768	Supporting Treatment and Recovery Together (START) – Hartlepool's Substance Misuse Service	2,800	2,800	0	2,800	2,800	0	UPDB	Scheme awaiting Planning decision.
8072	ICS Case Management Improvement	37	37	0	37	37	0	MIX	
8218	Youth Service Portable MUGA	5	5	0	5	5	0	GRANT	
8946	PH - Stepping Stones Project	38	27	0	27	27	0	GRANT	
		<b>9,458</b>	<b>9,035</b>	<b>1,358</b>	<b>7,677</b>	<b>9,035</b>	<b>0</b>		

<b>Key</b>			
RCCO	Revenue Contribution towards Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
UCPB	Unsupported Corporate Prudential Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
SCE	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources

## CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A Full Budget £'000	B 2022/23 Budget £'000	C 2022/23 Actual as at 31/03/23 £'000	D Expenditure Rephased into 2023/24 £'000	E 2022/23 Actual plus Rephased Expenditure £'000	F (E-B) 2022/23 Variance from Budget £'000	Type of Financing	2022/23 COMMENTS
<b>Finance &amp; Policy Committee</b>									
8306	Schools - Kitchen Refurbishment	261	261	0	261	261	0	RCCO	Funds earmarked for replacement of equipment.
	<b>Finance &amp; Policy Committee Sub Total</b>	<b>261</b>	<b>261</b>	<b>0</b>	<b>261</b>	<b>261</b>	<b>0</b>		
<b>Regeneration Committee</b>									
S106	Developers Contribution Fund	4,400	47	47	0	47	0	GRANT	Further details are set out in Appendix K - some contributions have now been allocated to specific schemes.
	<b>Regeneration Committee Sub Total</b>	<b>4,400</b>	<b>47</b>	<b>47</b>	<b>0</b>	<b>47</b>	<b>0</b>	<b>GRANT</b>	
7222	Sustainable Warmth LAD3 Grant	1,659	1,659	937	722	1,659	0	GRANT	Grant term extended to 2023/24. Funding is for works on Low income households heated by mains gas.
7272	Wheelie Bin Purchase	106	106	106	0	106	0	UDPB	
7333	EDM Seaton Additional Car Parking Facilities	87	87	0	87	87	0	UDPB	All works complete. Slight deviation from outline design that was used to form Business Case owing to omission of Street Lighting. Officers waiting for clarification on whether this is required.
7344	NIP - Hindpool Close Play Area	40	36	0	36	36	0	GRANT	Thirteen funding rephased from 2020/21 - awaiting decision/approval to allocate to new scheme.
7347	NIP - CCTV in Parks	350	60	0	60	60	0	MIX	There are no planned works for the remaining budget.
7436	NIP - Stranton Cemetery Car Park	50	50	0	50	50	0	UDPB	This funding is likely to merge with the wider works at Stranton site.
7437	NIP - Sinking Fund	62	62	0	62	62	0	UDPB	
7440	NIP - Central Park	120	120	29	91	120	0	GRANT	
7466	DSO Vehicle Purchase	7,759	1,453	1,162	291	1,453	0	UDPB	Vehicle procurement has been delayed as a result of supply chain issues following the pandemic, in addition to reduced staffing capacity.
7547	Energy for Waste Costs	89	89	89	0	89	0	UDPB	
7553	Seaton Toilets	435	431	101	330	431	0	MIX	The revised timetable for this scheme is for completion in 23/24
7561	Green Homes Grant - LAD2	663	479	456	23	479	0	GRANT	
7577	Hartlepool North NDIP Study	50	50	0	50	50	0	GRANT	
7878	Community Safety CCTV Upgrade	79	11	2	9	11	0	MIX	
7900	EDM Hartlepool Marina - North Pier	175	175	0	175	175	0	GRANT	Details of scheme to be finalised
7902	EDM Hartlepool Drainage Schemes	36	30	0	30	30	0	GRANT	
8444	EDM Town Wall Strengthening	46	21	0	21	21	0	GRANT	
8578	EDM Management Unit Study	28	28	0	28	28	0	GRANT	
8996	NIP - Improvements to Parks	314	73	0	73	73	0	MIX	Part Thirteen rephased funding.
8997	NIP - Unallocated	16	9	0	9	9	0	UDPB	This is the remaining balance on the Neighbourhood Investment Fund to be allocated to schemes following future approval by Members.
9147	NIP - CCTV in parks, Support	34	28	3	25	28	0	UDPB	
9170	HUG1 Sustainable Warmth LAD3	611	611	106	505	611	0	GRANT	Grant term extended to 2023/24. HUG - Home upgrade for low income households off-gas grid.
9201	Reed St. Depot Relocation	510	394	394	0	394	0	MIX	
NEW	Waste Transfer Station	200	200	0	200	200	0	RCCO	Funding from sale of SITA shares transferred to capital to support future capital scheme..
NEW	Grounds Commuted sum	22	22	0	22	22	0	RCCO	
LTP	Local Transport Plan (LTP) Schemes	2,675	2,340	852	1,488	2,340	0	GRANT	Various Highways & Traffic schemes. Collaborative scheme with another local authority that has been delayed.
TVCA	TVCA Cycleways and Footpath Upgrades	1,561	1,561	1,561	0	1,561	0	GRANT	Consists of various Highways & Traffic schemes.
HIFP	Additional Highway Schemes HIFP	356	356	24	332	356	0	MIX	Further schemes to be agreed.
	<b>Neighbourhoods Committee Sub Total</b>	<b>18,133</b>	<b>10,541</b>	<b>5,822</b>	<b>4,719</b>	<b>10,541</b>	<b>0</b>		
	<b>Neighbourhood &amp; Regulatory Services Total</b>	<b>22,794</b>	<b>10,849</b>	<b>5,869</b>	<b>4,980</b>	<b>10,849</b>	<b>0</b>		

<b>Key</b>			
RCCO	Revenue Contribution towards Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
UCPB	Unsupported Corporate Prudential Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
SCE	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources

## RESOURCES & DEVELOPMENT

## 4.1 APPENDIX I

### CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A Full Budget £'000	B 2022/23 Budget £'000	C 2022/23 Actual as at 31/03/23 £'000	D Expenditure Rephased into 2023/24 £'000	E (C+D) 2022/23 Actual plus Rephased Expenditure £'000	F (E-B) 2022/23 Variance from Budget £'000	Type of Financing	2022/23 COMMENTS
7260	City Challenge Clawback	9	9	0	9	9	0	RCCO	
7623	Corporate IT Projects	12	12	0	12	12	0	MIX	
	Corporate Projects	109	109	0	109	109	0	MIX	Funding held pending scheme confirmation
7220	Private Sector Housing Grants	57	57	15	42	57	0	GRANT	New grants awarded and income recycled from owner
7357	15 Church Street Renovation	1,146	171	38	133	171	0	MIX	Scheme progressing with remaining works to be completed
9240	Beach Huts	95	95	95	0	95	0	MIX	
	<b>Resources &amp; Development Total</b>	<b>1,428</b>	<b>453</b>	<b>148</b>	<b>305</b>	<b>453</b>	<b>0</b>		

#### Key

RCCO Revenue Contribution towards  
 Capital  
 MIX Combination of Funding Types  
 Unsupported Corporate Prudential  
 UCPB Borrowing  
 Supported Capital Expenditure  
 SCE (Revenue)

GRANT Grant Funded  
 CAP REC Capital Receipt  
 UDPB Unsupported Departmental Prudential Borrowing  
 CORP Corporate Resources

## CORPORATE

## 4.1 APPENDIX J

### CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	A Full Budget £'000	B 2022/23 Budget £'000	C 2022/23 Actual as at 31/03/23 £'000	D Expenditure Rephased into 2023/24 £'000	E (C+D) 2022/23 Actual plus Rephased Expenditure £'000	F (E-B) 2022/23 Variance from Budget £'000	Type of Financing	2022/23 COMMENTS
7036	Uncommitted CCF	222	222	0	222	222	0	MIX	
7041	Corporate Planned Unallocated	484	484	0	484	484	0	RCCO	
7065	Fire Risk Assessments	100	85	0	85	85	0	MIX	Scheme on hold.
7072	Seaton Library DDA toilet	37	37	0	37	37	0	UDPB	Scheme on hold.
7200	Civic Centre Capital Project	75	62	0	62	62	0	UDPB	Scheme on hold.
7336	Borough Hall - Upgrade Fixtures and Fittings	8	8	0	8	8	0	MIX	Scheme on hold.
7591	Mill House Capital	126	126	0	126	126	0	MIX	Feasibility complete. Works decision pending
7617	Borough Hall - Lighting and Wiring	40	38	0	38	38	0	RCCO	Scheme on hold.
8970	Historic Quay Dilapidation Work	97	97	0	97	97	0	RCCO	Scheme agreement to be finalised
9034	Carlton - Construction of a Fire Escape	34	34	0	34	34	0	RCCO	Scheme on hold.
7539	Throston Youth Project - Resurface Car Park	63	62	0	62	62	0	RCCO	Scheme on hold.
7812	Masefield Centre SALIX Air Source Heat Pump	65	48	48	0	48	0	GRANT	Scheme complete.
New	Borough Hall - Major Refurb Works	45	45	0	45	45	0	RCCO	Scheme on hold.
7771	Borough Hall - Lighting Replacement	60	60	15	45	60	0	RCCO	Scheme ongoing
9095	Middleton Grange Offices Upgrade Lighting Controls	4	4	4	0	4	0	RCCO	Scheme complete.
9230	Jutland Road Demolition	62	62	62	0	62	0	RCCO	Scheme complete.
7662	Seaton Carew Library Heating Replacement	20	19	19	0	19	0	RCCO	Scheme complete.
7623	Corporate IT Equipment - Laptops	625	625	616	9	625	0	RCCO	
<b>Finance &amp; Policy Committee Total</b>		<b>2,167</b>	<b>2,118</b>	<b>764</b>	<b>1,354</b>	<b>2,118</b>	<b>0</b>		

**Key**  
RCCO Revenue Contribution towards Capital  
MIX Combination of Funding Types  
UCPB Unsupported Corporate Prudential Borrowing  
SCE Supported Capital Expenditure (Revenue)

GRANT Grant Funded  
CAP REC Capital Receipt  
UDPB Unsupported Departmental Prudential Borrowing  
CORP Corporate Resources

## Housing Revenue Account for 2022/23 as at 31st March 2023

## 4.1 Appendix K

2021/22 Outturn £'000		2022/23 BUDGET £'000	2022/23 OUTTURN £'000	Variance £'000	Comments
(1,291)	<b>Income</b>				
	Dwelling Rents	(1,438)	(1,399)	39	Relates to loss of rental income in relation to Right to Buy disposals and delayed let dates compared to forecast in relation to the new Hill View properties.
(24)	Non-dwelling Rents - Other Income	(42)	(28)	14	
(3)	Charges for services and facilities	(3)	(5)	(2)	
<b>(1,318)</b>	<b>Income sub total</b>	<b>(1,483)</b>	<b>(1,432)</b>	<b>51</b>	
	<b>Expenditure</b>				
217	Repairs and maintenance	219	202	(17)	Repairs of capital nature were funded from Major Repairs Reserve.
368	Supervision and management	395	397	2	
38	Rents, rates, taxes and other charges	16	27	11	Reflects liabilities in relation to void properties.
20	Provision for bad or doubtful debts	15	45	30	Greater provision reflects cost of living crisis.
317	Depreciation (Major Repairs Allowance)	346	406	60	Reflects phasing of capital expenditure and need to manage risk in relation to Majors Repairs.
2	Discretionary Housing Payments	0	3	3	
10	Debt Management costs	12	10	(2)	
346	Net Interest payable	466	337	(129)	Reflects phasing of the use of capital funding.
<b>1,318</b>	<b>Expenditure sub total</b>	<b>1,469</b>	<b>1,427</b>	<b>(42)</b>	
<b>0</b>	<b>Contribution to HRA</b>	<b>(14)</b>	<b>(5)</b>	<b>9</b>	Reflects net adverse variances outlined above.
<b>0</b>	<b>(Surplus) / Deficit for the year</b>	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>Movement on the HRA Reserve</b>				
(495)	HRA Reserve Opening Balance		(495)		
0	Contribution (to)/from HRA		5		
<b>(495)</b>	<b>HRA Reserve Closing Balance</b>		<b>(490)</b>		

#### 4.1 APPENDIX L

#### COUNCIL HOUSING CAPITAL MONITORING REPORT PERIOD ENDING 31st March 2023

Project Code	Scheme Title	BUDGET	EXPENDITURE IN CURRENT YEAR				Type of Financing	
		A	B	C	D	E		
		2022/23 Budget  £'000	2022/23 Actual as at 31/03/23  £'000	Expenditure Rephased into 2023/24  £'000	(B+C) 2022/23 Actual Plus Rephased Expenditure £'000	(D-A) 2022/23 Variance from Budget £'000		
7182	Council Housing - Empty Properties Phase 3	2,217	0	2,217	2,217	0	MIX	Old funding approval - individual schemes and business cases require approval
7450	Council Housing - Hill View, Greatham	564	505	59	564	0	MIX	Scheme will complete in 2023/24.
7534	Council Housing - Newmarket, Lynne Street Housing (BHF)	4,952	372	4,580	4,952	0	MIX	Pending confirmation of funding
7620	Council Housing - Brenda Road Phase 1	1,369	1,164	205	1,369	0	MIX	The 18 units are expected to be available to let in 2023/24
8106	Council Housing - New Build	692	0	692	692	0	MIX	Old funding approval - individual schemes and business cases require approval
NEW	Council Housing - Adaptations	65	65	0	65	0	RESERVES	
8799	Council Housing - Major Repairs	210	210	0	210	0	RESERVES	
	<b>Council Housing</b>	<b>10,069</b>	<b>2,316</b>	<b>7,753</b>	<b>10,069</b>	<b>0</b>		

SECTION 106 DEVELOPERS CONTRIBUTIONS as at 31st March, 2023

4.1 Appendix M

	Affordable Housing Contributions ****	Cycleway	Highways	Bus Stop	Green Infrastructure	Maintenance	Play	Off Site Recreational **	Public Art	Sports	Ecological Mitigation *****	Traffic Calming	Education	Coastal	Health	Restoration - Security Bond ***	Other Service Areas Total
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Committed Balance Remaining (A+B-C) 1st April, 2022 *	0	219	660	30	180	0	133	157	5	127	148	15	881	22	41	100	2,718
Amounts Received in Year 2022/23 (B)																	
Wynyard Park - Wellington Gardens	144									5			52				0
Acland Homes - Worset Lane					2		3										62
Aldi Stores - Brenda Road					21												21
Barratt - Quarry Farm			660							26			160				846
Thirteen Housing, Brierton Lane														7			7
Duchy Homes - Wynyard Park	99	97											109				206
Countryside Properties - Wynyard Park		368															368
Dere Street Homes - Wynyard Woods	1									2			3				5
Keepmoat -								35									35
Port Homes														7			7
Raby Road					4					3							7
Taylor Wimpey - North Pentagon	350	48											70				118
Total income	594	513	660	0	27	0	3	35	0	36	0	0	394	14	0	0	1,682
Adjustments				(15)										13			(2)
Sub Total - revised Balance	594	732	1,320	15	207	0	136	192	5	163	148	15	1,275	49	41	100	4,398
Actual Expenditure as at 31st March 2023 (C)																	
Adjustment - Housing balance	594		43														43
Summerhill										14							0
Haswell Allotment					1												14
Brierton Lane - Karbon Homes					2												1
Bus stop				15													2
Brierton Sports Centre - Karbon Homes										10							15
Coastal Footpath					20												10
Coastal Footpath Newburn Bridge & Marina - Niramax					1												20
Coastal Mitigation issues on the coastline														11			1
Bridleway, Brierton Lane - Persimmon					2		1										11
Offsite sports facilities								38									3
Golden Flatts					3		1										38
Brougham							2										4
Hart Village												6					4
Ecological Enhancements, Rural West Ward - Bellway											20						6
Ecological Enhancements, Burn Valley											4						20
Sub Total Expenditure	594	0	43	15	29	0	4	38	0	24	24	6	0	11	0	0	194
Forecast Committed Balance Remaining (A+B-C) 31st March, 2023 *	0	732	1277	0	178	0	132	154	5	139	124	9	1275	38	41	100	4,204

\*Balances relate to amounts received and earmarked for purposes specified in developer agreements, but not yet transferred to a budget/scheme. However further expenditure is in the process of being planned and committed.

\*\* To be used in vicinity of the Britmag site including but not limited to Central Park.

\*\*\* Held as security in case of any remedial action required during the operational life of the Wind Turbine.

\*\*\*\* All affordable housing contributions are earmarked for additional HRA houses.

\*\*\*\*\* This includes £27k for 'Dog Control orders' however if the measures are not needed then the funds are repayable.

Off Site - part of these contributions are included in the Capital NIP scheme Budget Project 7440

Sports also includes contributions for Playing Pitches, Tennis Courts and Bowling Greens

# FINANCE AND POLICY COMMITTEE

3<sup>rd</sup> July 2023



**Report of:** Director of Finance, IT and Digital

**Subject:** MEDIUM TERM FINANCIAL STRATEGY (MTFS)  
2024/25 TO 2026/27

**Decision Type:** Budget and Policy Framework

## 1. COUNCIL PLAN PRIORITY

<b>Hartlepool will be a place:</b>
- where people are enabled to live healthy, independent and prosperous lives
- where those who are vulnerable will be safe and protected from harm
- of resilient and resourceful communities with opportunities for all
- that is sustainable, clean, safe and green
- that has an inclusive and growing economy
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community

## 2. PURPOSE OF REPORT

- 2.1 The purpose of this report is to provide an update on the Council's financial position and enable Members to approve the timetable for the 2024/25 budget.

## 3. BACKGROUND

- 3.1 The current MTFS position was presented to Finance and Policy Committee and the 2023/24 budget was approved by Council in February 2023 as part of the annual budget process. The MTFS does not stand still and continuously evolves based on latest information, intelligence and changing circumstances, including the outturn budget position.



- 3.2 The updated MTFS position covers a three year position 2024/25 to 2026/27. However, in consideration of the position over this period, it is important to recognise that the Council needs to be sustainable beyond the 3 year period. Decisions taken should reflect the position beyond the medium term to the longer term. Based on current information, there is no indication that the overall pressures facing the Council will reduce. Whilst we continue to make the case for additional funding and await the long delayed fair funding review, we cannot say with any certainty that funding will increase in the short to medium term. Fundamentally, the financial position is challenging and is likely to remain so.
- 3.3 Historical context to the financial challenges facing the Council is included at Appendix A. This includes the change in the Council's funding since 2013/14 when the current funding system was implemented, the Council Tax Base position and our Council Tax relative to others in the region. This information will be provided in a similar format for future meetings, to ensure members and readers are aware of the overall financial environment and constraints the Council operates under.

#### 4. BUDGET PRESSURES

- 4.1 The Council must plan for a range of spending pressures and commitments in setting its budget over the MTFS period. At this stage it is proposed to include incremental provision in budget planning for items shown in the table below, with commentary provided in subsequent paragraphs.

	2024/25 £m	2025/26 £m	2026/27 £m	Total £
<b>Spending Pressures</b>				
Pay and Price Inflation	5.865	3.825	3.016	12.706
Energy	0.000	0.000	0.000	0.000
Children's Social Care	1.500	1.000	0.500	3.000
Waste Disposal	0.000	2.000	0.000	2.000
SEND Passenger Transport	0.200	0.000	0.000	0.200
Capital Financing	0.150	0.150	0.150	0.450
<b>Total Spending Pressures</b>	<b>7.715</b>	<b>6.975</b>	<b>3.666</b>	<b>18.356</b>

#### Pay and Price - Pay Award

- 4.2 A national pay offer for 2023/24 was made by employers on the 23 February 2023. The offer equated to £1,925 per employee regardless of grade up to spinal point 43, with 3.88% above this point. This was similar to the 2022/23 offer which was accepted. An offer of 3.5%, subsequently accepted, was made to Chief Officer grades. This pay award equates to a blended rate of approximately 6%. The Council had allowed for 5% resulting in an in-year shortfall for 2023/24 which will need to be permanently addressed in 2024/25 budget plans.

- 4.3 The pay offer has been rejected by all the three main unions covering local government employee, with strike ballots on-going.
- 4.4 In addition to addressing the 2023/24 gap as set out above, the MTFS allows for the pay awards reflecting an assumption of a return to longer term normal inflation levels and accompanying pay demands. An allowance of 3% has been made for 2024/25, reducing to 2% for subsequent years. However, there remains a risk that pay awards will be higher, including for 2023/24 and assumptions will be kept under review.

### **Pay and Price - General Price Inflation**

- 4.5 There remains a strong inflationary pressure on all council services as a result of the current high levels of inflation. Provision was allowed for within 2023/24 budgets to reflect prevailing rates, albeit with the assumption of a sharp drop off during 2023/24, which is yet to materialise. The Bank of England monetary report published in May 2023 forecasts inflation dropping to around 5% by the end of this year, with further reductions during 2024, meeting the 2% target by late 2024.
- 4.6 General contract inflation is included within budgets at 2% over the period. Members will note that provision for 2024/25 is lower than the forecast inflation at that time, meaning budget holders will need to carefully manage spend. Given the stubbornness of inflation, as with pay award assumptions, rates will be kept under close review during the budget planning process. Bespoke inflation is included for specific contracts where individual indices are used.
- 4.7 A small number of minor pressures identified during routine budget monitoring have been included within pay and price provision.

### **Pay and Price – Adult Social Care Contracts**

- 4.8 The net budget for Adult Social Care packages of care is approximately £30m and annual increases to care home fees and home care rates are determined using an established formula. The annual inflation uplift is based on a range of factors and recent increases have been driven predominantly by increases in the National Living Wage (NLW) and the level of inflation, which is expected to remain high until later in the year.
- 4.9 The NLW currently stands at £10.42 an hour and is expected to increase to between £10.90 (4.6%) and £11.43 (9.7%) to meet the government target of two-thirds of median hourly pay by October 2024.
- 4.10 A prudent, but reasonable assessment of fee uplifts has been included within the MTFS, however, this remains an area of risk until uplifts are agreed based on confirmed data. Effectively every 1% increase or decrease in fees has a c£0.300m impact on the budget position.

### **Pay and Price - Income**

- 4.11 For budget planning purposes it is assumed that all discretionary fees and charges will increase in line with the inflation assumptions for general contract inflation. Actual increases to fees and charges will be applied using prevailing CPI at the time of uplift.

### **Energy Inflation**

- 4.12 The unprecedented increase in energy prices experienced over the past year has had a significant impact on residents, businesses and public bodies alike. Responding to this challenge, the Council progressed a twofold strategy of increasing the revenue budget for anticipated long term prices coupled with use of an energy reserve for the shorter term spike. This approach served the Council well during 2022/23 with £0.300m being drawn down from the reserve.
- 4.13 The Council purchases its energy via the regional North East Purchasing Organisation (NEPO), with a forward purchasing strategy in place where it is deemed prudent. Based on energy purchased to date and market forecasts, energy prices have peaked in 2023/24 and will reduce for 2024/25, albeit to a level above that experienced in 2021/22 (pre Ukraine conflict).
- 4.14 At this stage it is too early to firm up the position in relation to the MTFS period, not least as only one third of 2024/25 energy has been purchased. Whilst there is the potential for a reduction in budgets in 2024/25, there are also concerns prices could increase later in the year due to increased competition from Asia for Liquefied Natural Gas. To that end, at this stage it is prudent to apply normal inflation increases only to the energy budget with the position updated later in the year as the position becomes clearer.

### **Children's Social Care**

- 4.15 The number of children in our care within external placements has increased over the past few years and as at June 2023 there were 35. More fundamentally, the increasing complexity of children's needs and finite capacity in the residential market is leading to ever increasing prices being charged for accommodation. The average weekly cost of a placement has increased by over 45% over the last three years. Our highest external placement cost is in excess of £13,000 per week.
- 4.16 The Council has sought to mitigate this pressure through promotion of in-house fostering and the opening of new Local Authority run homes within Hartlepool. Despite this approach, the budget remains under significant pressure, with an overspend reported as part of the 2022/23 outturn and, despite increased budget provision, an overspend also likely in 2023/24. At this stage additional provision of £3m, phased over the three year period, has been included within the MTFS. It is not clear whether this increase will be sufficient given the challenging market conditions.

### **Waste Disposal**

- 4.17 Members will be aware that Hartlepool has entered into a partnership with six other Local Authorities in the region to procure a new Energy from Waste facility. The procurement process is on-going, with an anticipated go-live date during 2026. The Council has benefitted from very competitive gate fees with the current incumbent, however, these fees are forecast to step up significantly for the 2025/26 year as part of the contract extension arrangement. Provision of £2m is included within the budget for this increase. The budget will be realigned for subsequent years once the outcome of the procurement exercise is complete.
- 4.18 Following the introduction of the Environment Act 2021 there is a requirement to introduce separate collections for food waste. Hartlepool has dispensation to delay introduction until the new waste disposal contract commences. The budget impact will be considered alongside any changes to gate fees under the new contract.

### **SEND Passenger Transport**

- 4.19 The Council has a duty to ensure suitable travel arrangements are in place for children under 16 with a special educational need or disability (SEND). The increase in SEND referrals generally is leading to increased demand for transport provision. This increased demand coupled with increasing fuel and supplier costs, is resulting in a subsequent budget impact that now requires addressing.

### **Capital Financing**

- 4.20 A recurring annual saving of £2m has previously been taken over a 12 year period (2017/18 to 2028/29) following a change to the Council's Minimum Revenue Provision policy. This saving unwinds to £1m, with a reduction in 2029/30 of £0.6m and a further £0.4m in 2030/31. To avoid these cliff edge impacts on the MTFS, it is proposed to step increases to the budget from 2024/25 of £0.150m per year. This will ensure adequate provision is built up over a medium term period, whilst also providing temporary flexibility to fund the capital programme, including supporting the temporary borrowing required for the Elwick Road scheme.

## **5. GOVERNMENT FUNDING**

- 5.1 The Local Government Finance Settlement 2023/24 continued the trend of one-year settlements for councils which continues to hamper financial planning and financial sustainability. It provided Hartlepool with a 10.2% increase in Spending Power, albeit predicated on full use of Council Tax and ASC flexibility. The settlement was supported by a policy statement which provides some information in relation to the 2024/25 settlement and this has been used as the basis for current assumptions on government funding increases. There is no indication of increases beyond 2024/25;

where it is deemed reasonable to do so, a basic inflationary uplift has been applied.

- 5.2 Whilst the settlement was better than initially expected, disappointedly the government confirmed that the long awaited fair funding review and a reset of the business rates retention system will not now take place for at least two years, i.e. 2025/26 at the very earliest. This review was first promised in 2016 and is envisaged to create a fairer formula for the allocation of government funding. Whilst there is no certainty, the Council has a reasonable expectation of additional funding through this review, not least due to our relative position on Business Rates.
- 5.3 A key safeguard in the Business Rate system is that any accumulated growth in the system should have been redistributed into a new baseline funding position for each Council. Councils that are significantly above the current baseline will lose funding to be redistributed to those councils closer to the baseline or below the baseline. Hartlepool is one of a small number of Councils below our baseline position, in part due to the reduced valuation of the Nuclear Power Station since the business rates system was introduced.
- 5.4 Until a baseline reset is undertaken accumulated growth and therefore funding resides with those authorities generating the growth rather than it being redistributed to Councils based on need, such as ours.

### **Revenue Support Grant (RSG)**

- 5.5 The government has indicated that this grant will increase by September 2023 CPI. The increase currently applied is based on the Bank of England inflation projections for the year, and the expectation amongst some commentators that inflation rates will begin to reduce more significantly in late Summer.

### **Social Care Funding**

- 5.6 The final local government settlement 2023/24 provided for additional social care funding. These grants will continue in 2024/25 and although no individual authority allocations have been announced the national funding totals have increased.
- 5.7 Social Care Grant – this grant can be used to support both children's and adult social care and included repurposed funding previously earmarked by the government for Adult Social Care Charging Reforms that has been released to allow councils to meet their mounting social care pressures. The grant is forecast to increase nationally by £0.612bn in 2024/25. The MTFS includes an assumption of how much additional funding the Council will receive to help support the budget pressures across both children's and adult social care. At this stage it is unclear how the charging reforms, which have been delayed until October 2025, will subsequently be funded.

- 5.8 ASC Market Sustainability & Improvement Grant – is intended to enable Councils to make improvements in adult social care, particularly to address discharge delays, social care waiting times, increasing fee rates and workforce pressures. This is a ring-fenced grant for adult social care, requiring a number of conditions to be met, and will be retained by the Adult & Community Based Services department to support meeting the objectives of the grant.
- 5.9 ASC Discharge Fund – is provided to Councils to “ensure those people who need to draw on social care when they are discharged from hospital can leave as soon as possible, freeing up hospital beds for those who most need them”. This funding has to be pooled into the Better Care Fund.
- 5.10 The improved Better Care Fund has no increase applied in the budget model as per the current year and government indications.

### **Public Health Funding**

- 5.11 The Council received its allocation for the Public Health grant on the 15 March 2023, after the budget had been set. The allocation was slightly above anticipated within the budget and has been allocated to Public Health priorities. Indicative allocations were also provided for 2024/25 which provided for a 1.32% increase in the grant. This has been included in budget assumptions.

### **New Homes Bonus (NHB)**

- 5.12 As with the previous year, the 2023/24 New Homes Bonus grant included no legacy year payments, reflecting an anticipation that government will phase this grant out. The government have indicated their intention to consult on NHB during the year. A number of Local Authorities have taken the prudent view to remove NHB from budget planning. At this stage it remains in our MTFS at £0.447m pending greater certainty of government intentions. Whilst NHB may end, any replacement funding model may benefit Hartlepool. The position will be kept under review.

### **Business Rates Top Up Grant**

- 5.13 The Business Rates multiplier and Top Up grants have historically increased in line with September CPI inflation. At this stage is assumed the same approach will be adopted and as such the Top Up Grant has been increased in line with RSG increases detailed above.

### **Extended Producer Responsibility for Packaging (EPRP)**

- 5.14 The Government has indicated that the EPRP scheme will go live during 2024/25. The scheme has started information gathering from suppliers and councils on the quantity and type of waste that is being collected. The government will fund councils according to a formula using this information and other factors such as variations in cost of collection. The total cost will

be collected as a levy by DEFRA on suppliers, with Councils expected to start receiving funding in October 2024, backdated to the beginning of 2024/25.

- 5.15 The current estimate is that it will raise around £1.2bn across the UK when fully in place, albeit it may take a few years to reach that sum. As such there is a reasonable expectation of a significant sum due to the Council, which may support the waste budget pressures outlines in section 4. Pending further details, no funding is included within the MTFS. The position will be reviewed later in the year when more clarity may be available.

## **6. LOCAL FUNDING**

### **Business Rates**

- 6.1 Under the current Business Rates funding regime, the Council retains locally 49% of Business Rate income. Inherent in the system is an annual uplift usually based on September CPI and this has been factored into the position. All other assumptions impacting Business Rates have remained unchanged i.e. provision for Appeals, uncollectable debt and discretionary reliefs will remain broadly consistent.
- 6.2 There remains a risk that the Council will enter a safety net position during the coming year. In simple terms this comes about if the collectable business rates falls below 92.5% of the baseline. A Rateable Value challenge has been lodged by EDF for the Power Station in line with Valuation Office Agency (VOA) procedures. If successful this could be back dated to September 2021. Should this challenge be agreed or we deem it likely to succeed then the 2023/24 outturn position will necessitate safety net intervention. Funding will be provided by government to support the Council in such a scenario, albeit there will be an increased cost of circa £1.1m a year until any reset is enacted. A reserve is held to mitigate this possibility.
- 6.3 Generally, the impact of inflationary cost pressures and reduced consumer demand may impact on the collectability of business rates. The position will be kept under review and adjusted should the need arise.

### **Council Tax**

- 6.4 The Council has a track record of Council Tax base growth in recent years. Whilst new build continues to be positive, the position is coming under increasing pressure from exemptions and discounts, including the Single Person Discount (SPD). Hartlepool is not unique in facing these pressures. Regarding SPD, the Council is undertaking an enhanced review later this year to support efforts to reduce any fraud or error in the system.

- 6.5 Whilst housing growth continues to look positive, there remains a risk that the wider economic environment may have a detrimental impact on growth as well as collectability of Council Tax should household incomes continue to come under strain. At this stage growth of 200 is allowed for in the budget model for 2024/25, increasing to 300 a year 2025/26 onwards.
- 6.6 Indications are that the same Council Tax and ASC referendum limits will apply for 2023/24 and 2024/25, although these will require an annual decision by government. Council Tax decisions will be made later in the budget process. Given the Government's position, the current assumption for presentation purposes is that the maximum allowable Council Tax increase will be applied.

## 7. RESERVES

- 7.1 The Council holds reserves for a variety of purposes, including those allocated for known commitments and risks, including capital schemes, the MTFS budget position, our insurance fund and business rates appeals risks. The reserve position has been volatile in recent years given the covid-19 pandemic and the significant inflationary and demand pressures currently being experienced. The only unallocated reserve is our general fund reserve, which serves as a reserve of last resort.
- 7.2 Reserves have fallen over the 2022/23 financial year, albeit by less than forecast. To a certain extent this reflects timing of spend, but also our budgetary control arrangements, in addition to proactive Treasury Management that enable the Council to take advantage of positive investment rates. Details of reserves held can be found within the draft statement of accounts.
- 7.3 The use of one-off reserves to balance the on-going revenue budget position is not a financially sustainable basis to set our budget. The volatility of local government finances over recent years has necessitated we do so, but in a planned and carefully managed way. A budget support fund is available to smooth the budget deficits over a number of years, as well as to meet one-off costs associated with generating on-going efficiencies.
- 7.4 For budget setting 2023/24 £2.471m of balances were used to support the overall budget position. The one-off nature of balances means that the budget position is detrimentally hit in subsequent years as their use unwinds. The £2.471m unwinds as per the table below

	2024/25 £m	2025/26 £m	2026/27 £m	Total £
Temporary Use of Reserves (BSF)	1.471	0.000	0.000	1.471
Temporary Use of Investment Income*	0.000	0.500	0.500	1.000
<b>Budget Impact of Use of Reserves</b>	<b>1.471</b>	<b>0.500</b>	<b>0.500</b>	<b>2.471</b>



\*the current budget is predicated on use of £1m investment income in 2023/24 and 2024/25, £0.500m in 2024/26 and £nil in 2026/27.

- 7.5 Over the coming months a comprehensive review of reserves will be undertaken covering all reserves and known pressures. The review of reserves will be reported as part of a future MTFS update to F&P. There is currently no assumption of any new use of these reserves during the MTFS period 2024/25 to 2026/27.

## 8. STRATEGY FOR BALANCING THE BUDGET POSITION

- 8.1 Based on the position outlined in sections 3 to 7 above, the consolidated budget position over the 3 year MTFS period is shown below. The gap to be addressed for 2024/25 is £2.845m, with a three year gap of £7.957m. As Council Tax decisions will be made at a later date, the position for 2024/25 includes a memo item to highlight the increase in the gap up to £5.256m should no increase be applied. For every 1% Council Tax not applied, the Council loses circa £0.500m of income.
- 8.2 The position presented has an element of uncertainty and risk given both the current economic uncertainty, but also the medium term duration. Appendix B provides greater detail of the main risks and associated sensitivities impacting on the position.

	2024/25 £m	2025/26 £m	2026/27 £m	Total £
<b>Spending Pressures</b>				
Pay and Price Inflation	5.865	3.825	3.016	12.706
Energy	0.000	0.000	0.000	0.000
Children's Social Care	1.500	1.000	0.500	3.000
Waste Disposal	0.000	2.000	0.000	2.000
SEND Passenger Transport	0.200	0.000	0.000	0.200
Capital Financing	0.150	0.150	0.150	0.450
<b>Total Spending Pressures</b>	<b>7.715</b>	<b>6.975</b>	<b>3.666</b>	<b>18.356</b>
Government Grant Changes	(2.495)	(0.641)	(0.653)	(3.789)
<b>Gap Before Local Funding</b>	<b>5.220</b>	<b>6.334</b>	<b>3.013</b>	<b>14.567</b>
Business Rates	(1.077)	(0.452)	(0.461)	(1.990)
Council Tax – Base Increase	(0.386)	(0.578)	(0.578)	(1.542)
Council Tax – Core Increase	(1.427)	(1.543)	(1.623)	(4.593)
Council Tax – ASC Increase	(0.984)	0.000	0.000	(0.984)
Council Tax – Collection Fund Deficit	0.028	0.000	0.000	0.028
<b>Gap Before Current Use of Reserves</b>	<b>1.374</b>	<b>3.761</b>	<b>0.351</b>	<b>5.486</b>
Temporary Use of Reserves (BSF)	1.471	0.000	0.000	1.471
Temporary Use of Investment Income	0.000	0.500	0.500	1.000
<b>Bottom Line Gap to be Addressed</b>	<b>2.845</b>	<b>4.261</b>	<b>0.851</b>	<b>7.957</b>
<b>Memo Item</b>				
Gap to be Addressed (no C Tax Increase)	4.272			
Gap to be Addressed (no C Tax or ASC Precept Increase)	5.256			

- 8.3 The recent peer review highlighted the need for a more medium term strategic and transformational approach to financial planning and not an annual “salami-slicing” exercise. Inevitably there are challenges to adopting such an approach, not least the need to identify and confirm savings for the 2024/25 budget i.e. before transformation will likely be delivered, but also the capacity to deliver such a programme across the organisation.
- 8.4 Balancing the need for a more strategic approach, with the need for immediate savings, four workstream themes are proposed to focus delivery of savings and transformation of services. In developing themes under a transformation umbrella, the aim is to continuously deliver savings over the 3 year period and beyond and not rely on an annual call for savings. Any transformation will be aligned to the priorities set out in the Council Plan.

### **Nuts and Bolts**

- 8.5 It is important as a Council we get the basics right. This is especially the case operating post covid-19 which has brought about a seismic shift in the way we operate, with a hybrid working environment and increasing move towards paperless offices. It is also important to ensure financial and operational discipline and best practice is maintained in this new environment to ensure efficient and effective working.
- 8.6 Whilst there will inevitably be an element of overlap with other workstreams, there are likely four distinct areas that will require focus;
- Procurement – a data led review of our approach to procurement, including use of purchase cards, to ensure an organisationally consistent approach, identifying areas for procurement consolidation in order to generate greater economies in the procurement process.
  - IT – recognising the rapid transformation of the IT environment to make best use of cloud technology, ensuring a stronger corporate gateway to IT development and reviewing hardware and software requirements in the context of hybrid working and increasing use of digital solutions.
  - Energy – aligned with our net zero ambitions seeking opportunities to minimise our energy usage, including taking a longer term view where required to reduce our exposure to energy cost risk and achievement of savings beyond the MTFS period.
  - Use of Property and Assets – continuing to review our asset estate in response to increased home and hybrid working, whilst seeking to identify surplus land and property for sale or alternative usage.

### **Digital**

- 8.7 The covid-19 pandemic significantly changed the Council's operations, with an ever increasing acceptance and embracing of digital and on-line solutions. Building on our strong track record of promoting digital services and channel shift it is proposed to develop a Council Wide digital strategy, promoting a digital first mind-set, and a push to streamline data input by customers through to back office systems (i.e. eliminate back office double keying). Promoting high use of O365 functionality and intelligent use of data should also support this work stream.

### **Service Reviews**

- 8.8 A continued programme of activity to review front line and back office service provision, ensuring that it aligns to the priorities set out in the Council Plan and is provided in the most appropriate way. This may include considerations such as:
- Is the service focused on need rather than want?
  - Do we have the data to support our understanding of the service need?
  - Where the service is demand led, can we manage that demand better?
  - Is it appropriate for the Council to provide the service or is there scope for alternative or partnership provision; and
  - Where provided in house, are we providing the service in the most efficient and effective way possible.
- 8.9 Where additional capacity is required to support this workstream, focus will be given to areas most likely to provide financial savings or reduce cost pressures on the budget.

### **Commercial**

- 8.10 The Council has some good examples of trading and municipal enterprise, not least the decision to re-open the Housing Revenue Account. This workstream will work towards ensuring a consistent, corporate approach across the Council to maximise income opportunities and push forward greater commercialism where there is a clear rationale and business case to do so.
- 8.11 The approach from government over the past decade has been to push councils to greater reliance on locally raised income, including through Council Tax and Business Rates. The Council has seen positive Council Tax Base growth and this looks set to continue. The Council, working with partners as required, will continue to promote inward investment to support regeneration and economic development in order to also drive Business Rate growth.

### **Use of Reserves**

- 8.12 As previously set out the use of one-off reserves to balance the on-going revenue budget position is not a sustainable approach to setting the budget. Whilst it shunts the budget gap back a year, it presents a danger that the Council simply utilises one-off money on delaying decisions. In addition this approach reduces the scope for the Council to invest and innovate in order to generate recurring savings. However, the budget position, coupled with high inflationary pressures and future uncertainty on government funding may necessitate use of reserves over the period.
- 8.13 The aim of setting the Council's budget is that it should be sustainable over the medium term period, with recurring spend funded by recurring income. Decisions on use of reserves should be made consistent with that aim. As such it is proposed that any use of reserves should be done on a diminishing basis over the period so that by year 4 of the current cycle the budget is sustainable.
- 8.14 The Council holds a Budget Support Fund to help to smooth the budget position over the MTFS period as well as to meet any one off costs associated with budget reductions e.g. redundancies. The current position of the Budget Support Fund is set out in the table below. The position reflects the need to use £1.471m to balance the 2023/24 budget position and use of Interest on Balances over the period as agreed as part of the annual budget setting process.

	<b>Core £m</b>	<b>Interest £m</b>
Balance as at 31 March 2023	9.417	1.131
Add		
Interest on balances earned over period (forecast)	0.000	1.369
Less		
Use of reserve to support 2023/24 budget	(1.471)	(1.000)
Use of reserve to support 2024/25 budget	0.000	(1.000)
Use of reserve to support 2025/26 budget	0.000	(0.500)
Use of reserve to fund capacity to deliver savings	(1.000)	0.000
Use of reserve to fund costs associated with savings	(2.000)	0.000
<b>Forecast uncommitted balance over the period</b>	<b>4.946</b>	<b>0.000</b>

- 8.15 It is proposed to earmark £3m of the Reserve for the following purposes:
- **Capacity to Deliver Savings - £1.000m**  
The transformational approach outlined within the report will undoubtedly require capacity to deliver, including one off improvement spend. Earmarking this sum over the period will allow flexibility to support this agenda. Use will require a clear rationale connected to transformation or a sound business case for any invest to save spend.
  - **Costs Associated with Savings - £2.000m**  
Over the period there may be redundancy or other one off costs associated with proposed savings, where staffing levels are reduced. Whilst the aim will always be to manage this through workforce planning this is not always possible. A pay-back period of 3 years will

continue to be in place. Holding a prudent sum back will ensure these can be funded should the need arise.

- 8.16 Following the earmarking of funding outlined above, there is £4.946m remaining in the Budget Support Fund to support the MTFS position over the medium term and beyond.

## 9. BUDGET TIMETABLE

- 9.1 The following table details the key tasks and indicative reporting timescales

Timescale / Committee	Task / Report
Finance and Policy Committee – July	MTFS update and commencement of 2024/25 budget process
Finance and Policy Committee – September	Local Council Tax Support 2024/25 scheme options report
Finance and Policy Committee - November	<p>MTFS Update report including:</p> <ul style="list-style-type: none"> <li>• Updated position based on latest intelligence and inflation rate</li> <li>• Consideration of savings proposals</li> <li>• Review of reserves</li> </ul> <p>Local Council Tax Support Scheme feedback on consultation and recommendations to Council.</p> <p>Set Council Tax Base</p>
Individual Policy Committee – November / December	Consideration of savings proposals referred from Finance and Policy Committee
Full Council - November	Local Council Tax Support Scheme consideration of recommendations from F&P.
Finance and Policy Committee - January	<p>MTFS Update report including:</p> <ul style="list-style-type: none"> <li>• Updated position based on provisional Local Government Finance Settlement latest intelligence and inflation rate</li> <li>• Consideration of feedback from policy committee on savings proposals</li> <li>• Determine budget proposals (including Council Tax and ASC precept) to be referred to full Council.</li> </ul>
Full Council - January	MTFS Update referral from F&P committee including budget proposals and agreement on Council Tax and ASC precept

Audit and Governance - February	Treasury Management strategy report
Finance and Policy Committee – February	MTFS Update report for any minor changes between provisional and final Local Government Finance Settlement, plus Statutory Council Tax calculations  Capital Plan
Full Council - February	Approve final budget and Statutory calculations

## 10. LEGAL CONSIDERATIONS

10.1 The following issues are relevant in relation to this report:

- the Local Government Finance Act 1992 requires local authorities to set a balanced budget – this report starts the budget process and further reports will enable budget proposals to be approved and then referred to Council to meet this requirement;
- the Local Government Act 2003 requires local authorities to consider the advice of their Section 151 Chief Finance Officer (the Director of Finance, IT and Digital) when making budget decisions. This advice must include details of the robustness of the estimates made for the purposes of the calculations and the adequacy of the proposed financial reserves. These requirements will be addressed in future reports.

## 11. OTHER CONSIDERATIONS

Risk Implications	These are outlined in Appendix B and will be further considered as MTFS and savings proposals are developed and will be reported to future meetings.
Financial Considerations	As set out in the main body of the report
Child / Family Poverty Considerations	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings, with impact forms completed as appropriate.
Equality and Diversity Considerations	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings, with impact forms completed as appropriate.

Staff Considerations	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings if appropriate.
Asset Management Considerations	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings if appropriate.
Environment, Sustainability and Climate Change Considerations	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings if appropriate.
Consultation	Will be addressed as MTFS and savings proposals are developed and will be reported to future meetings. This will include member, Trade Union, staff, Business and public consultation if applicable.

## 12. RECOMMENDATIONS

### 12.1 It is recommended that Members:

- i) Note the report;
- ii) Note the initial assessment of the forecast budget gap and proposed approach to address this gap in Section 8. This includes the earmarking of part of the BSF to support the delivery of budget proposals;
- iii) Note the risks and scenarios outlined in the report which may impact upon the financial position presented as part of future MTFS updates; and
- iv) Note the proposed budget timetable.

## 13. REASON FOR RECOMMENDATIONS

- 13.1 To enable the Finance and Policy Committee to approve the proposals to progress the development of the MTFS.

## 14. BACKGROUND PAPERS

The following background papers were used in the preparation of this report:-

- Finance and Policy Committee - Medium Term Financial Strategy (MTFS) 2023/24 to 2024/25 – 23<sup>rd</sup> January 2023;

- Council - Medium Term Financial Strategy (MTFS) 2023/24 Statutory Budget and Council Tax determination – 23<sup>rd</sup> February 2023.

## 15. CONTACT OFFICER

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Telephone: 01429 523093

Sign Off:-

Managing Director	Date: 21 June 2023
Director of Finance, IT and Digital	Date: 21 June 2023
Director of Legal, Governance and HR	Date: 21 June 2023





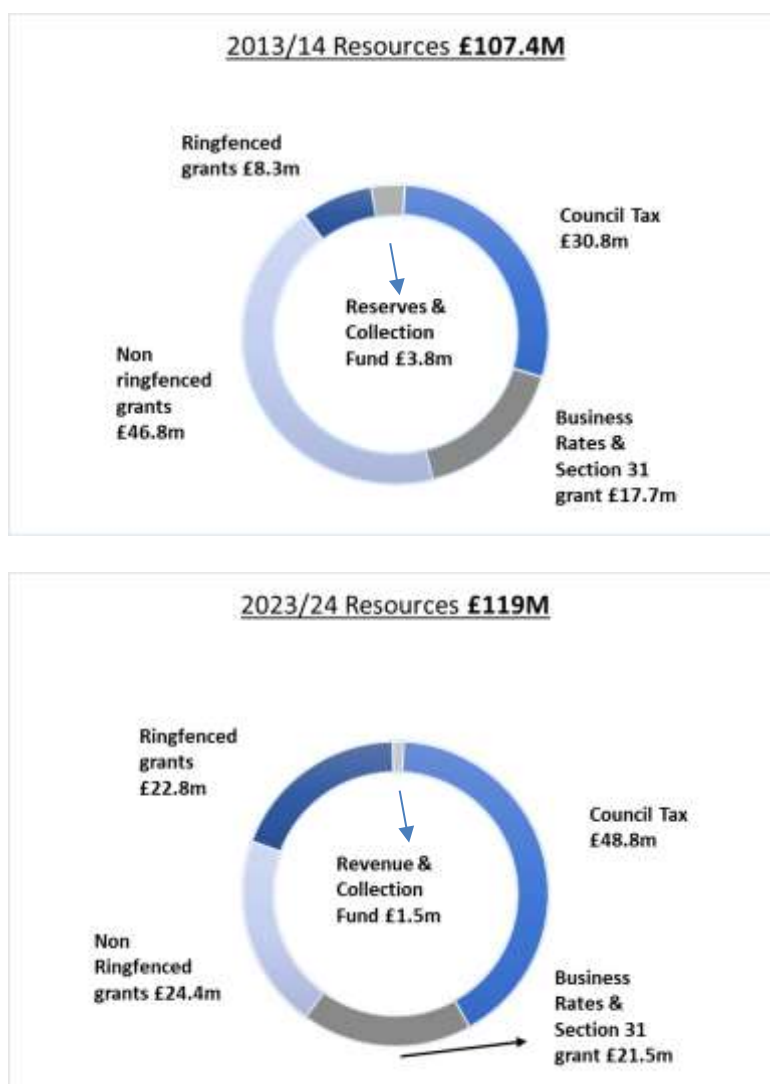
## Appendix A

## Funding Changes since 2013/14

1.1 Since 2013/14 the national funding regime has seen three key changes:

- A significant reduction in Government non ring-fenced Grants (i.e. Revenue Support Grant and Top Up grant);
- An increase in Government ring-fenced Grants, including the transfer of Public Health responsibilities and funding and various Adult Social Care grants; and
- Increased reliance on Council Tax to fund local services, which includes the introduction of the Adult Social Care (ASC) precept in 2016/17 and annual increases in this funding source up to and including 2022/23.

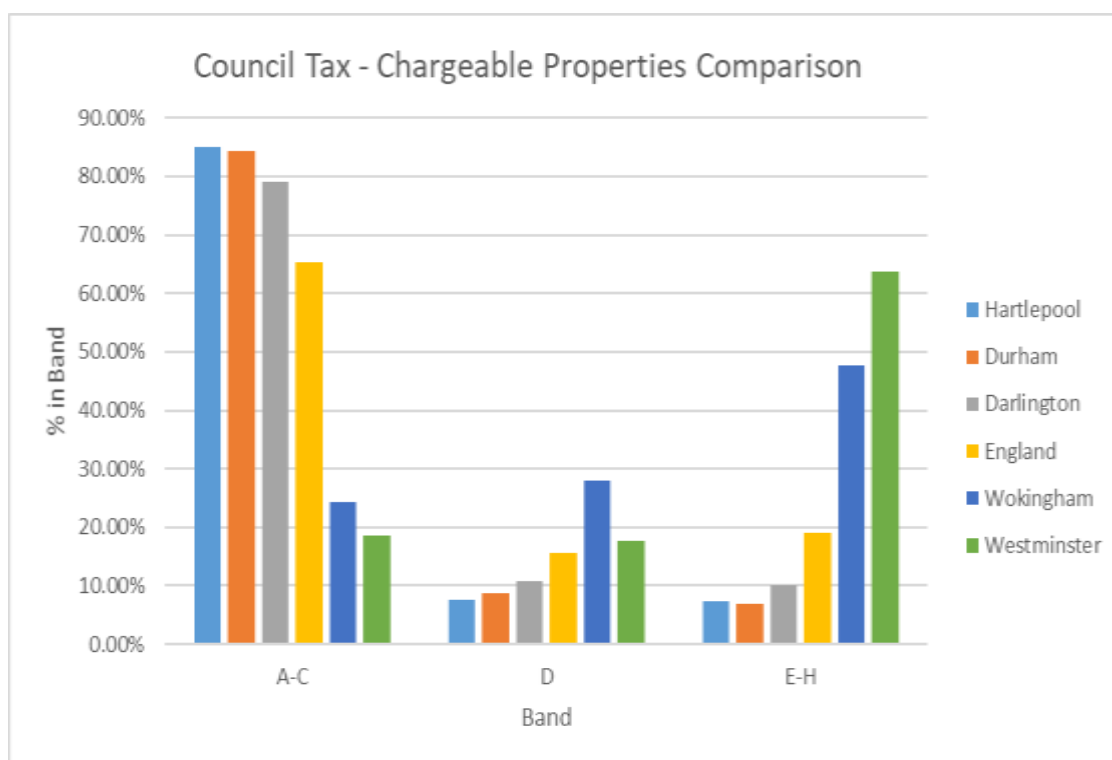
1.2 The impact on Hartlepool funding is summarised below:



### 1.3 Increasing reliance on Council Tax is a doubled edged sword as it means:

- Areas with a low council tax base (i.e. higher than average proportion of properties in Council Tax bands A and B – which includes Hartlepool and the other North East councils) raise less additional income for each 1% Council Tax increase than areas with a higher tax base – with lower demands on services. This means Council Tax increases offset less of Government funding reductions in areas with a low Council Tax base than is the case in more affluent areas;
- As a result councils with a low Council Tax base have to make greater service reductions and it becomes increasingly difficult for the public to understand the services Council Tax pays for.

### 1.4 In order to demonstrate the “low tax base” conundrum, comparison with two high base Local Authorities, two neighbouring Local Authorities and the English average is shown in the graph below. The graph clearly demonstrates the extent of shift required to equalise the tax base position with the national average, but also the sheer differential with more prosperous Local Authorities.



### 1.5 Whilst current and planned developments within Hartlepool are expected to continue the recent strong growth in Band E to H properties, it is clear that Hartlepool will continue to be a low tax base authority for the foreseeable future. Given since 2010 central government funding has moved away from needs based funding, there is less compensation funding for Hartlepool despite its low tax base.

- 1.6 The funding changes and low tax base have contributed to Hartlepool having a Council Tax level that sits slightly above the regional average, when parish councils are included as shown below.

Council Area	Band A* £	Impact of individual Parishes
Northumberland	1,386	*Within a number of Council areas, including County Durham, parish councils provide a number of services that are provided by Hartlepool Borough Council. Whilst the Band A rate shown here is an average for the area, there are often large variations dependent on the parish precept levied. As an example, the following Band A is paid in these County Durham areas: £1,473 Horden £1,453 Peterlee
Gateshead	1,381	
Durham	1,297	
Hartlepool	1,286	
Newcastle	1,280	
<b>Average</b>	<b>1,257</b>	
Middlesbrough	1,255	
Stockton-on-Tees	1,245	
North Tyneside	1,234	
South Tyneside	1,220	
Redcar and Cleveland	1,216	
Darlington	1,189	
Sunderland	1,092	

## Appendix B

## MTFS 2024/25 to 2026/27 Initial Risk Assessment

Key risks or issues that may impact on assumptions made and impact 2024/25.

Issue and Risk	Reasonable Upside Scenario 2024/25	Reasonable Downside Scenario 2024/25	Rationale
Inflation proves stubborn and reduces at a slower rate than anticipated.	£nil	£1.000m	Reasonable assumptions based on latest forecasts have been made for inflation during the period. There is no upside scenario likely, whereby inflation fell more rapidly. Downside scenario based on additional inflation risk on general and ASC inflation.
Inflation proves to be higher than expected in September 2023 for grant increase.	£0.400m	£nil	Inflation could prove to be “sticky” over the coming months and be higher than expected in September. However, this could lead to higher contract inflation pressures. The reasonable upside assumes an additional 1% inflation
Pay Awards are higher than assumed	£nil	£1.000m	Provision included in the MTFS based on pay offer and historic norms. No contingency is built in for higher award. The reasonable downside scenario assumes a revised and improved offer for 2023/24 and an extra 1% for 2024/25.
Interest Rates	£0.500m	£nil	Should interest rates remain high and borrowing decisions can be delayed on the approved capital programme, there may be an opportunity to generate additional temporary Treasury Management returns.
Government Grant Changes - NHB	£nil	£0.447	There is a reasonable likelihood that NHB will be discontinued by government. The current assumption is that this will be replaced on a broadly like for like basis, however, there is no guarantee this will occur.
Extended producer Responsibility for Packaging	£1.000m	£nil	The government has committed to introduce this in 2024/25. As the financial resource allocated to councils cannot be determined it has not been included in the MTFS. The £1.000m figure suggested as potential upside currently has no firm basis to inform it.
Council Tax Base	£0.100m	£0.200m	A slowdown in the housing market and / or increased discounts or exemptions may impact on the assumptions included on Base growth.
Collection Fund	£nil	£0.500m	The wider economic conditions may have a detrimental impact on collection of both Council Tax and Business Rate.
Income Budget		£0.500m	The wider economic conditions and the recovery from the Covid-19 pandemic has created uncertainty over the achievability of key income budgets, including car parking.
Capital Programme Borrowing Costs	£nil	£nil (2024/25, but may impact later years)	Increased cost and/or interest rates may impact on borrowing costs. The impact is mitigated by pro-active Treasury management strategy and planned delay in borrowing decisions.
Social Care Charging Reform	£nil	£nil	Risk as to how this reform is now funded when government introduce the reform.

# FINANCE AND POLICY COMMITTEE

3<sup>RD</sup> JULY 2023



**Subject:** HARTLEPOOL ENTERPRISE CENTRE

**Report of:** Executive Director of Development, Neighbourhoods and Regulatory Services

**Decision Type:** Key Decision – Budget and Policy Framework (General Exception Applies)

## 1. COUNCIL PLAN PRIORITY

**Hartlepool will be a place:**

- That has an inclusive and growing economy.

## 2. PURPOSE OF REPORT

- 2.1 To provide information requested by Council on 23<sup>rd</sup> March 2023 in relation to the proposed asset transfer of the Hartlepool Enterprise Centre (HEC) and to consider the options proposed in the report.

## 3. BACKGROUND

- 3.1 The 2023/24 Medium Term Financial Strategy (MTFS) included a proposed savings of £23k under the heading '*Closure HEC*' with the description of the saving '*aiming to achieve asset transfer*'.
- 3.2 A key rationale for the saving proposal was the identified need for significant capital expenditure which cannot be funded from existing grant regimes, which are available to third sector organisations, but are not accessible to Councils. Additionally, the Council could not fund the capital expenditure from either:
- Borrowing as the resulting interest and repayment costs would increase the budget deficit; or
  - By borrowing and increasing rents to meet the resulting interest and repayment costs as this would undermine the ability to provide low rents for start-up businesses.

- 3.3 In October 2022 the Council had received an unsolicited approach from a third sector organisation to purchase the HEC. The organisation already operates another business centre / business incubator facility in the Borough. The proposal was for an “asset transfer” (not a Community asset Transfer) as they indicated they would require the freehold interest to secure grant funding. They suggested a significant indicative purchase price and subsequent investment in the Centre, which they indicated would both be eligible for grant funding. They also confirmed the intended use was as a Business Centre.
- 3.4 On the basis of the identified capital investment required in the Centre and interest expressed by one organisation the proposal was included in the MTFS. Once the MTFS was approved the property was then marketed on the basis of what was considered the most appropriate way to secure more than one interest party and the continued operation of the Centre.
- 3.5 The savings proposal was included in the overall MTFS report referred from Finance and Policy Committee, and then approved by Council on 23<sup>rd</sup> February 2023. At the Council meeting on 23<sup>rd</sup> March 2023 the following issue was raised in relation to the minutes of the previous Council meeting:

- COUNCIL MINUTE 116. QUESTIONS FROM MEMBERS OF THE COUNCIL ON THE MINUTES OF THE PREVIOUS MEETING OF THE COUNCIL

*With reference to minute 105 – Medium Term Financial Strategy 2023/24 to 2025/26 – clarification was sought from an elected member regarding proposals which had been agreed by Full Council in relation to the Hartlepool Enterprise Centre.*

*The Managing Director responded that this issue had been brought to her attention earlier in the week, by the Leader of the Council. It was clarified that the objective of the proposals in relation to the Hartlepool Enterprise Centre had been to secure the future of the centre and capital investment.*

*The Council’s Community Asset Transfer policy does not permit the freehold sale and only in exceptional circumstances leases in excess of 35 years. This would not enable third sector organisation to access funding as funders required the security of the organisations owning the freehold. Therefore, in order to ensure barriers to accessing funding were minimised, the Hartlepool Enterprise Centre had been advertised on a normal sale basis as a going concern business centre.*

*The Leader of the Council had asked the Managing Director to pause the process and investigate the issue.*

- 3.6 This next sections of the report provide further information in relation to the Community Asset Transfer policy and the outcome of the subsequent investigation.

#### 4. COMMUNITY ASSET TRANSFER POLICY

- 4.1 There is often confusion between the terms “*Community Asset Transfer*” and an “*Asset Transfer*”, generally by freehold sale, at whatever level of financial consideration approved by the Council.
- 4.2 The Council’s policy on Community Asset Transfers enables them to take different forms – long lease, short lease, management agreement or licence to occupy – and are usually at less than market value either at reduced cost or free of charge, although the policy states this to be assessed on a case by case basis. The level of subsidy is determined by the social, economic, or environmental benefits generated by the transfer.
- 4.3 The policy is designed to be as flexible as possible when designing lease clauses to maximise the benefit achieved for both the third sector organisation and the Council. Lease periods are also based on the anticipated requirements of charitable funders and only in exceptional cases would a lease for longer than 35 years be granted where the business case demonstrates special circumstances or requirements from funders/lenders.
- 4.4 The policy does not generally permit the freehold sale of properties unless in exceptional circumstances, although it does allow transfers as a result of unsolicited approaches.
- 4.5 However, in relation to this property it was appropriate to advertise the property to provide the opportunity for greater interest, although it is important to note that any transfer/sale would include a restrictive covenant to ensure its continued use as a Business Centre.

#### 5. OUTCOME OF INVESTIGATION

- 5.1 Following Council’s approval on 23<sup>rd</sup> February 2023 of the MTFs, officers commenced with the implementation of the approved savings, including the proposal relating to the HEC. Officers were aware of a number of potential interested parties and also a requirement of ownership of the freehold being a condition for one funding organisation to secure grant funding.
- 5.2 On the basis that the existing Community Asset Transfer policy does not allow the sale of the freehold, unless in exceptional circumstances, the property was advertised for sale as a going concern. This proposal would also protect staff employment within the centre as TUPE regulations would apply. The headline sales information clearly stated:
- For Sale – Hartlepool Enterprises Centre;
  - For sale as a going concern;
  - Multi-let 47 unit business centre; and
  - Offers over £600,000 invited.



- 5.3 This approach was designed to minimise barriers to third sector organisations accessing funding, to provide a clear baseline to assess any bids received and to ensure continued use as an operational business centre.
- 5.4 Four initial enquiries were received prior to the pause requested by Council on 23<sup>rd</sup> March 2023, with two from Hartlepool third sector organisations, one from a Hartlepool based business and one from a business outside Hartlepool. As these are initial enquiries it was not possible to assess the potential quality of bids, or how they would meet the Council's objectives of retaining the HEC as a going concern business centre.
- 5.5 The initial enquiries indicate that the proposed valuation included in the sales documentation was not acting as a barrier, or that only one third sector organisations would be interested.
- 5.6 The marketing of the HEC generated questions from Members and lead to the decision of Council on 23<sup>rd</sup> March 2023. It would appear that the information reported to Finance and Policy Committee (and then referred to Council) led Members to believe this was a Community Asset Transfer and would not result in a significant potential capital receipt. This position has resulted in Members asking whether they have approved a Community Asset Transfer or a traditional sale. It is accepted that the position could have been set out more clearly.
- 5.7 The response to this question is that officers acted to implement the approved recommendation in a way that achieves the best outcome for the Council, including achieving best value in light of our current financial position, and importantly the retention of the HEC as a going concern. In reaching this decision officers also took account of information received from one Third Sector organisation regarding the grants available to the sector. It is not unreasonable to assume that these grants would also be available to other Third Sector organisations if they presented a business case which meets the funder's requirements.
- 5.8 It is also not unreasonable for the Council to seek to secure a capital receipt from the sale of the HEC, while retaining as a going concerns, as grant funders may be supporting new build proposals in other areas which may cost more than paying for, and improving, an existing building.

## **6. PROPOSALS/OPTIONS FOR CONSIDERATION**

- 6.1 The following table sets out options for consideration by Finance and Policy Committee to determine the most appropriate one to be recommended to Council:

Options	Advantages	Disadvantages
1. Recommence existing sale on current proposed terms	<ul style="list-style-type: none"> <li>Continuation of HEC as a business centre</li> <li>Potential to achieve capital receipt</li> <li>Potential for third sector to secure investment and improvement of the centre</li> </ul>	
2. Highlight existing Community Asset Transfer policy to make it clear that “in exceptional cases” the freehold can be sold if supported by a business case that demonstrates this is the only way to access funders or lenders investment to improve the property, and an asset lock / overage clause is in place to protect the value of the asset transferred by the Council	<ul style="list-style-type: none"> <li>Potential for third sector to secure investment and improvement of the centre</li> <li>Third sector needs to secure less funding than option 1</li> </ul>	<ul style="list-style-type: none"> <li>Reduced or no capital receipt for the Council</li> </ul>

6.2 For the reasons set out above, Members are recommended to proceed with option 1.

## 7. OTHER CONSIDERATIONS/IMPLICATIONS

<b>Risk Implications</b>	There is a financial risk associated with not delivering the budget savings, while there is a reputational risk if the Council is not seen to achieve best value for an asset.
<b>Financial Considerations</b>	The proposed option enables the Council to implement the approved recommendation in a way that achieves the best outcome for the Council, including achieving best value, and more importantly the continuation of the HEC as a operating managed workspace business centre, while also supporting the Council's MTFS.

<b>Legal Considerations</b>	The proposed option to advert the property provides the opportunity for greater interest, although it is important to note that any transfer/sale would include a restrictive covenant to ensure its continued use as a Business Centre.
<b>Child and Family Poverty</b>	No relevant issues
<b>Equality and Diversity Considerations</b>	No relevant issues
<b>Staff Considerations</b>	This proposed option will protect the staff employed within the centre as TUPE regulations would apply.
<b>Asset Management Considerations</b>	The proposed option would remove an asset from the Councils register in terms of maintenance liabilities, while also generating a capital receipt.
<b>Environment, Sustainability and Climate Change Considerations</b>	There is an identified need for significant capital expenditure which cannot be funded from existing grant regimes, which are available to third sector organisations, but are not accessible to Councils.
<b>Consultation</b>	Internal consultation has been undertaken with those members of staff potentially affected by these proposals and the relevant unions.

## 8. CONCLUSION

- 8.1 The final MTFs proposals were consolidated at pace given the increased uncertainty on the 2023/24 budget position, not least due to late changes to Government funding. The HEC saving decisions were made with the best intention for the overall Council budget, although it is accepted that members needed more clarity on the proposal so as to ensure they were prepared when challenges regarding perception arose.
- 8.2 These issues will be addressed when future savings proposals are reported to Members as it will be essential that there is a clear understanding of the decisions being made in view of the extremely challenging financial position facing the Council in 2024/25 and beyond.

## 9. RECOMMENDATIONS

9.1 It is recommended that Members:

- (i) Note the outcome of the investigation and the action to be taken in 2024/25 and future years to ensure there is a clear understanding of the savings proposals brought forward;
- (ii) Approve the proposal that option 1 (detailed in the table in paragraph 6.1 of the report) is recommended for referral to Council.

9.2 However Members may wish to consider option 2 as an alternative.

## 10. REASONS FOR RECOMMENDATIONS

10.1 To address the decision of Council to investigate the proposed HEC budget savings and to recommend the most appropriate option to be referred to Council as the marketing of the HEC enables the Council to implement the approved recommendation in a way that achieves the best outcome for the Council, including achieving best value, and more importantly the continuation of the HEC as a Business Centre, while also supporting the Council's MTFS.

## 11. BACKGROUND PAPERS

- 11.1 Council – 23<sup>rd</sup> February 2023 – Medium Term Financial Strategy 2023/24 to 2025/26
- 11.2 Council – 23<sup>rd</sup> March 2023 – Minutes

## 12. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 26/06/2023
Director of Finance, IT and Digital	Date: 27/06/2023
Director of Legal, Governance and HR	Date: 26/06/2023

# FINANCE AND POLICY COMMITTEE

3 JULY 2023



**Subject:** SUBSTANCE MISUSE NEEDS ASSESSMENT AND DRAFT STRATEGY

**Report of:** Director of Public Health

**Decision Type:** Key (General Exception applies)

## 1. COUNCIL PLAN PRIORITY

### Hartlepool will be a place:

- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.

## 2. PURPOSE OF REPORT

- 2.1 To share the draft Substance Misuse Strategy, ask for comments and seek approval from Finance and Policy Committee for final sign off of the strategy.

## 3. BACKGROUND

- 3.1 The misuse of drugs and alcohol is one of the highest risk factors for ill-health across the UK with an estimate of 1 in 11 adults aged 16-59 having taken a drug in the last year, with 1.1 million adults having taken a class A drug . In the same year, it is estimated 358,000 hospital admissions were attributed to alcohol use, 6% higher than the previous year. Drug and alcohol use can lead to a number of physical and psychological conditions, such as liver disease, cardiovascular complications, high blood pressure, depression and anxiety.
- 3.2 The costs of alcohol and drug misuse to society are significant. Estimates show that the social and economic costs of alcohol-related harm amount to £21.5billion, while harm from illicit drug use costs £10.7billion. However, it is said £4 social return is made for every £1 spent on treatment and support services.

- 3.3 The reasons why an individual may increase their alcohol use, or take illicit drugs can vary. However, research has shown that adverse childhood experiences (ACE) are prevalent amongst those who take substances. Drugs and/or alcohol may also be used to help manage with emotional distress or traumatic experiences. Therefore, it is important that safe and effective treatment is available for those who need it.

#### 4. PROPOSALS/OPTIONS FOR CONSIDERATION

- 4.1 We are seeking approval from the Finance and Policy Committee for final sign off of the draft Substance Misuse Strategy for Hartlepool (**Appendix 2**). The Strategy has been informed by the Hartlepool Substance Misuse Needs Assessment findings (**Appendix 1**) and has been developed following a consultation event and engagement with service users through the local recovery groups as well as consultation with partners. The following theme areas have been identified and are based on the findings from the needs assessment:

- Prevention and early intervention
- Reducing drug and alcohol related harms
- Supporting wider health needs
- Reducing drug and alcohol related crime and disorder

- 4.3 The draft strategy will inform the development of an action plan which will set out under each theme the detail of how we will deliver this priority area, who will deliver, timescales and be informed by indicators in order to measure success through an outcome framework. This will be shared with Finance and Policy Committee at a later date for approval.

- 4.4 Governance of the strategy implementation will be through the Substance Misuse Strategy Group.

#### 5. OTHER CONSIDERATIONS/IMPLICATIONS

<b>RISK IMPLICATIONS</b>	<p>The delivery of the strategy will be through the substance misuse strategy group and report to the Health and Wellbeing Board against progress on an annual basis.</p> <p>This strategy will provide a focused effort to provide a partnership approach to addressing the risks associated with substance misuse and support those people into recovery and see a reduction in the impact of substances on people's lives including increasing the numbers of people into treatment and a reduction in drug and alcohol related deaths.</p>
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<b>FINANCIAL CONSIDERATIONS</b>	Currently prevention and treatment activities are funded through the Public Health grant and Supplemental Substance Misuse Treatment and Recovery Grant (SSMTRG) investment.
<b>LEGAL CONSIDERATIONS</b>	None Noted
<b>CHILD AND FAMILY POVERTY</b>	Attached – Appendix 3
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	Attached – Appendix 4
<b>STAFF CONSIDERATIONS</b>	None noted
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	None noted
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS</b>	None Noted
<b>CONSULTATION</b>	<p>A partnership meeting has been established to develop and collate the needs assessment which has included the following representatives:</p> <ul style="list-style-type: none"> <li>o Office of Health inequalities and Disparities (OHID)</li> <li>o Adults and Children's social care teams</li> <li>o Adults and Children's safeguarding</li> <li>o Police</li> <li>o Office of the Police and Crime Commissioner for Cleveland</li> <li>o Neighbourhood Safety Team</li> <li>o Tees Esk and Wear Valley Mental Health Services</li> <li>o Supporting Treatment and Recovery Together (START) – Community drug and alcohol provider</li> <li>o Public Protection and Licensing</li> <li>o Housing Support Teams</li> <li>o Domestic Violence Service</li> <li>o Commissioning Support</li> <li>o NHS including Alcohol Care Teams, North East Ambulance</li> <li>o Stockton and Hartlepool NHS Trust</li> <li>o Lived Experience Recovery Groups</li> </ul>

	<ul style="list-style-type: none"> <li>o National Probation Services</li> <li>o VCSE</li> </ul> <p>A partnership event was facilitated by Public Health with partners to share the final needs assessment data and develop the priorities and actions and inform the development of the draft strategy attendees included representatives from the above.</p>
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## 6. RECOMMENDATIONS

- 6.1 That Finance and Policy Committee approve the Substance Misuse Strategy for Hartlepool.

## 7. REASONS FOR RECOMMENDATIONS

- 7.1 Having a strategy in place in Hartlepool:
- Focuses on prevention and the wider determinants of health to impact positively on the NHS and social care system by enabling early identification, help and support.
  - Supports joint cross sectoral action to deliver an increased focus on the prevention of issues relating to substance misuse
  - Encourages collaborative work across organisational boundaries and disciplines to secure place based improvements that are tailored to local needs and assets.
  - Builds the capacity and capability across our workforce to reduce the harms related to substance misuse

## 8. BACKGROUND PAPERS

- 8.1 None.



**9. CONTACT OFFICERS**

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Sign Off:-

Managing Director	Date:
Director of Finance, IT and Digital	Date: 13 June 2023
Director of Legal, Governance and HR	Date: 12 June 2023

# Hartlepool Drug and Alcohol Strategy 2023-2028

HARTLEPOOL BOROUGH COUNCIL

CLAIRE ROBINSON

ABIGAIL REAY

## Foreword – Director of Public Health

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Substance misuse is one of the most challenging health issues we face in Hartlepool. The personal, social and economic impacts of substance misuse are great and it is a key driver of health inequalities in the borough. The Health Needs Assessment for substance misuse has outlined that Hartlepool is experiencing more significant issues and higher numbers of people using substance than the England average. It also demonstrates the increasing harms caused by substances with high numbers of drug and alcohol related deaths.

Addressing these issues will take a partnership approach. As this strategy outlines, we are committed to tackling the challenges posed by this in partnership with all responsible agencies and partners. This partnership working, will use an asset based approach to develop those programmes of work required to address our key vision of reducing the harms associated with substance use.

We will achieve this through a clear focus on 4 key areas:

- Prevention and early intervention
- Reducing drug and alcohol related harms
- Supporting wider health needs
- Reducing drug and alcohol related crime and disorder

By focusing on a place based approach to delivering interventions to support these key areas we will ensure that Hartlepool residents receive the treatment and recovery support they need to move on from alcohol and substance addiction. We will also ensure that we will reduce the number of people becoming addicted to substances through high quality prevention work. This will then have a clear impact on reducing inequalities in the borough.

A lot of excellent work is currently happening in this space in Hartlepool. This strategy will build on the work of our communities, services and residents to make a real difference to the lives of our population.



**Craig Blundred** | Director of Public Health

Hartlepool Borough Council

## Foreword – Council Leader

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I am delighted to introduce the Substance Misuse Strategy for Hartlepool. This Strategy is a five year strategic plan for tackling the harms associated with substance misuse.

Alcohol & Drug misuse is an issue that requires a long term and varied approach. Partnership working is essential if we are to tackle the broad range of issues that affect many aspects of people's lives. If we work together we can protect people from the harms associated with substance misuse and help everyone to improve their health and support them to make healthier choices as well as ensuring that we address the wider determinants of health that strongly influence this agenda.

This strategy will build on and extend current work and outlines ambitious strategic aims including: the importance of prevention and early intervention and supporting those in treatment services with a focus on recovery and supporting people back into society by improving their chances of sustaining positive changes. The strategy also identifies the need to work with partners to increase efforts to reduce or disrupt supply. However the most important aspect of this strategy is to be responsive and reflect the local need and assets of Hartlepool. We should always be ready to help those in need as we often do not know the stories that go behind the decisions that those who become addicted to substances have.

The Strategy will be implemented through the Substance Misuse Strategy Group who will work together on the priorities set out in this strategy to achieve real change for Hartlepool residents. I support the intentions set out in this Strategy so let us all come together as a community to help and support, by getting behind this strategy for the betterment of our town and its people.



**Mike Young** | Council Leader

Hartlepool Borough Council

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# Introduction

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## National and Regional picture

Across the UK, the misuse of drug and alcohol is one of the highest risk factors for ill-health with an estimate of 1 in 11 adults aged 16-59 to have taken a drug in the last year, with 1.1 million adults to have taken a class A drug<sup>1</sup>. In the same year, it is estimated 358,000 hospital admissions were attributed to alcohol use, 6% higher than the previous year<sup>2</sup>. Drug and alcohol use can lead to a number of physical and psychological conditions, such as liver disease, cardiovascular complications, high blood pressure, depression and anxiety. Drug and alcohol use can also lead to high crime rates and increased rates of domestic violence.

The costs of alcohol and drug misuse to society are significant. Estimates show that the social and economic costs of alcohol-related harm amount to £21.5billion, while harm from illicit drug use costs £10.7billion. However, it is said £4 social return is made for every £1 spent on treatment and support services<sup>3</sup>.

### Dame Carol Black Report: Phase 1 and 2

Dame Carol Black was commissioned by the Home Office and the Department of Health and Social Care to undertake a 2-part independent review of drugs, to inform the government's strategy on tackling the harms associated with drugs and alcohol<sup>4</sup>. Part one was published on 27 February 2020 and provides analysis on the challenges posed by drug supply and demand. Part two was published on the 8 July 2021 and focused on drug treatment, recovery and prevention.

The key areas include:

- Centralised reform of leadership, funding and commissioning
- Rebuilding services
- Increased focus on primary prevention and early interventions
- Improvements to research and how science informs policy, commissioning and practice

### From Harm to Hope: A 10-year drugs plan

Following Dame Carol Black's two tier review of drugs policy and subsequent report published in 2021, the Government have launched their ambitious plan to tackle the misery and harm caused by illegal drugs<sup>5</sup>. From harm to hope was launched in December 2021 and sets out the government's three priorities to:

- Break drug supply chains
- Deliver world-class treatment and recovery services
- Achieve a shift in the demand for recreational drugs

The strategy is underpinned by the investment of over £3 billion in the next three years.

# Local Picture

## Drug and Alcohol use across Hartlepool

Hartlepool has some of the most deprived areas in England, with more than half of the town (52%) being in the most deprived quintile in England. Several of the areas of high deprivation are areas where the significant proportion of the substance misuse caseload in Hartlepool are located (Victoria and Burn Valley Wards). This is the same for both children and adults.

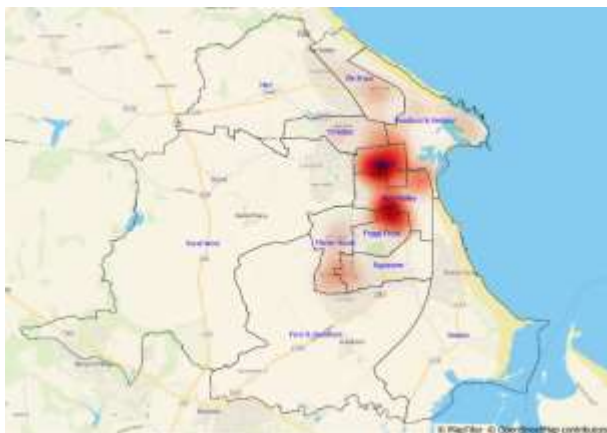


Figure 1: Adult Substance Misuse Referrals

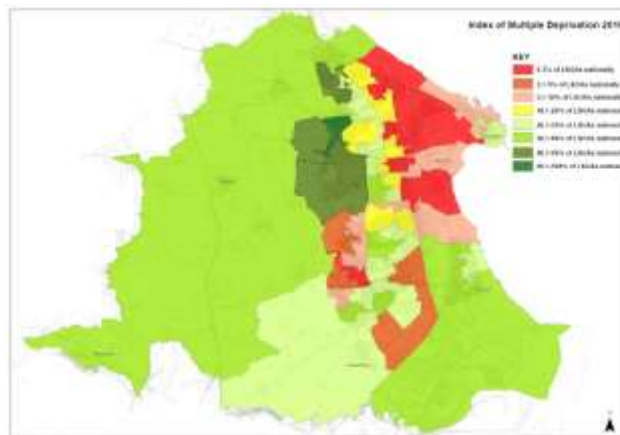


Figure 2: Areas of deprivation across Hartlepool

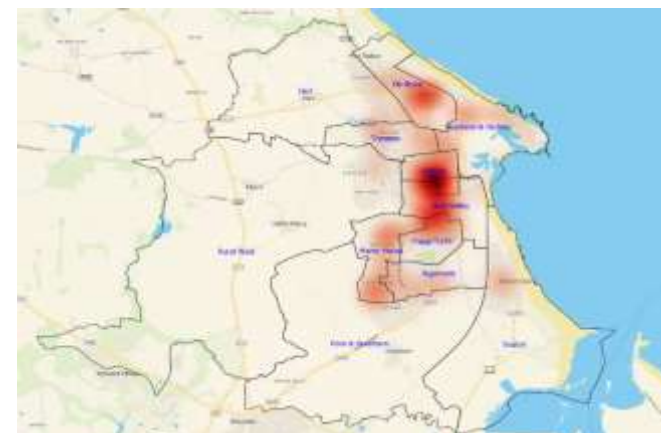


Figure 3: Children and Young People Substance Misuse Referrals

In regard to substance use, alcohol and opiates appear to be the most prevalent substance within the substance misuse treatment population. This is similar to the UK average however, Hartlepool has almost double the amount of opiate use compared to the rest of the UK. For children and young people, cannabis and alcohol appear to be the most commonly used.

It is imperative that the correct treatment and support is available to all individuals using substances. For that reason it is important to understand the unmet need across Hartlepool, which is the individuals who could be in treatment for substance misuse, but are not. Hartlepool's unmet need is smaller than the England average. Despite this, the unmet need for alcohol across Hartlepool is still high. This could mean that many adults across Hartlepool are drinking increased amounts of alcohol which could impact their physical and mental health.

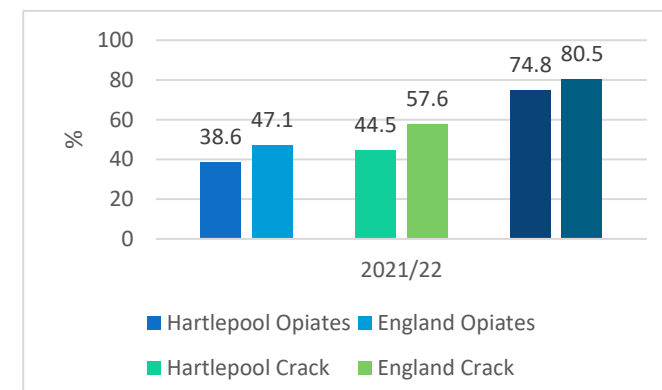


Figure 4: Percentage of Unmet Need within Substance Misusing Population 2021/22. Source: Liverpool John Moores University

# Local Picture

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## Drug and Alcohol related Harm across Hartlepool

Hartlepool has had more than a threefold increase in drug related deaths since 2012/14. Hartlepool's rate is currently the 3<sup>rd</sup> highest in England.

Image relating to the above here

Hartlepool is significantly higher than the North East, and England average for hospital admissions where drug-related mental health and behavioural disorders were a factor

Image relating to the above here

In 2019/20, Hartlepool was in the top 10 highest rates across the country for alcohol related hospital admissions.

Image relating to the above here

More than 50% of Hartlepool's young people's substance misuse caseload (under 18's) are aged 15 or under for each of the last five years.

Image relating to the above here

Hartlepool has the 18<sup>th</sup> highest alcohol related liver disease mortality rate in England, and has been consistently significantly worse than the England average for the last 6 years.

Image relating to the above here

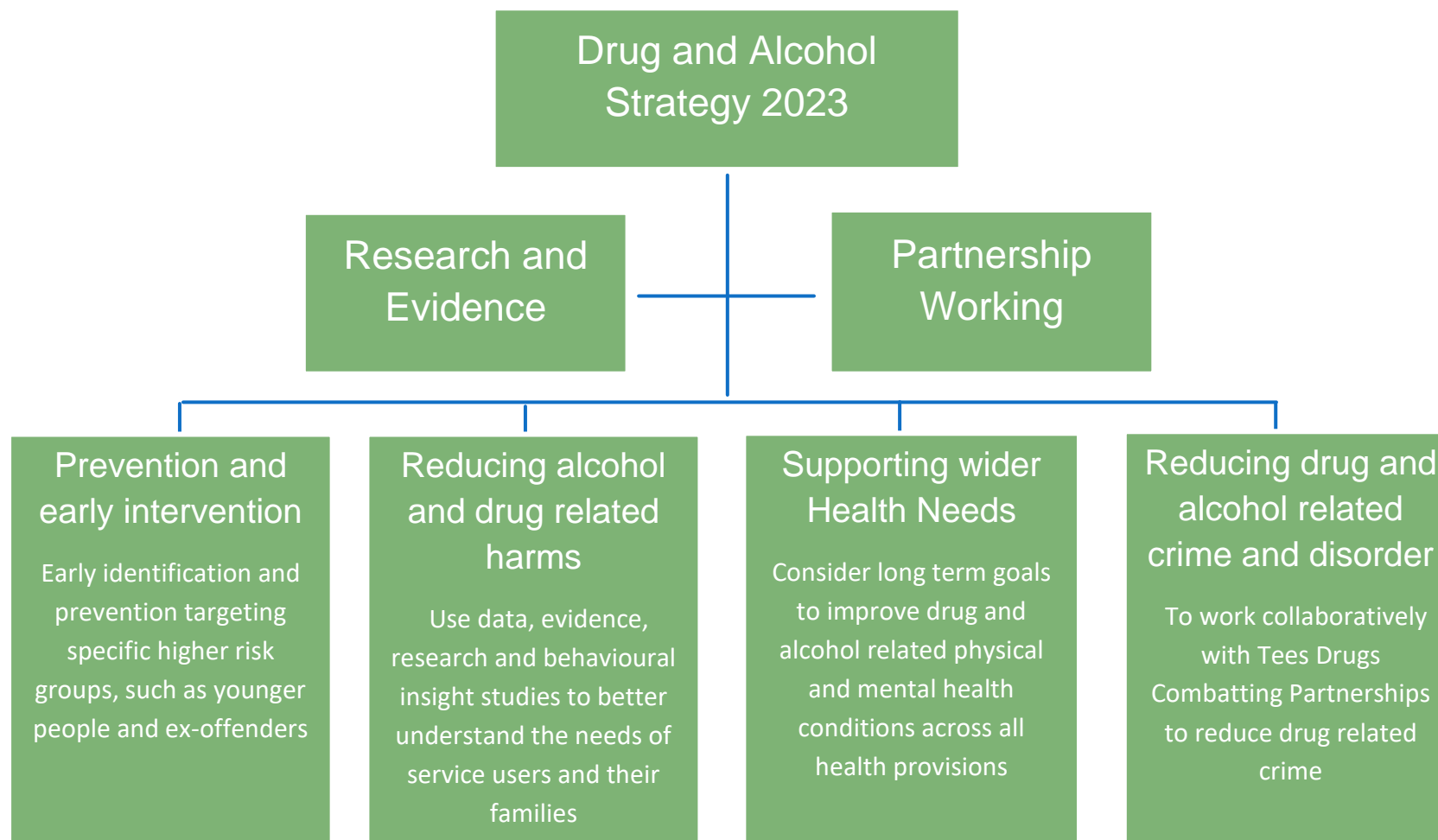


## Our vision

The harm caused by drugs and alcohol in Hartlepool affects all our communities. This strategy sets out our collective approach to addressing this. It uses data and feedback from our Strategic Needs Assessment and wider consultation with partners.

The strategy sets out our vision to “Work together to ensure Hartlepool communities are; safe from drug and alcohol related harms; have access to timely and effective support and treatment including supporting people’s physical and mental health and wellbeing and to support the work to tackle drug and alcohol related crime.

Our four main priorities are set out below



# Priority 1: Prevention and Early Intervention

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**Prevention:** Early identification and prevention targeting specific higher risk groups, such as younger people and ex-offenders

We know:

- Individuals who have experience traumatic/adverse events in childhood are more likely to use substances in later life
- Hartlepool's young people's treatment population is younger than the national average
- Hartlepool's areas of highest deprivation mirror the areas of highest drug and alcohol treatment referrals and areas of high crime rates.
- Recent prison leavers are at higher risk of drug related harms
- Nineteen Percent of new adult referrals into treatment services currently live with children

We will:

- Develop further insight into the changing trends in drug use and the role of recreational drug use in the population of Hartlepool and consider emerging evidence of ways to tackle this.
- Proactively influence the current curriculum in schools in regard to drug and alcohol education.
- Continue to improve collaborative working between treatment services and schools and colleges, and criminal justice services (including Prisons and Probation) in attempt to provide resources, education and harm minimisation advice to high risk individuals.
- Challenge social 'norms' around high levels of alcohol consumption
- Provide interventions to support those with adverse childhood experiences
- Work with START to ensure approaches are targeted towards high risk groups, such as youth services to ensure services are reaching out to those who require support.
- Work with police colleagues in reducing drug related crimes with a focus on rehabilitation
- Collaborative working with Social Care Teams to support those who experience substance misuse, including family support.
- Focus on diversionary activities for high risk groups
- Continue to support the harm minimisation agenda and support a reduction in drug related deaths

## Priority 2: Reducing Alcohol and Drug Related Harms

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**Treatment:** Use data, evidence, research and behavioural insight studies to better understand the needs of service users and their families specifically to:

We know that:

- Hartlepool's most common substances within the treatment population is opiates and alcohol
- Individuals who are successfully discharged from our community drug and alcohol support service are low in comparison to the national average
- Dropout rates within our community drug and alcohol support service are high in comparison to the national average
- Hartlepool's unmet need for drugs and alcohol is lower than national average, however still high for alcohol use

We will:

- Reduce the number of deaths caused by alcohol and drugs
- Advise commissioning and treatment services of potential gaps within service provision, data collection and quality
- Ensure appropriate, effective and timely access to treatment and support
- Continue to monitor performance of our treatment services
- Develop outreach support within our treatment services to ensure we meet the needs of those most vulnerable
- Increase the number of staff within treatment services to reduce caseload sizes in line with Dame Carol Black's recommendations
- Increase In reach support for those in custody, hospital or other care facilities
- Coproduction and service user voice will be integrated into all areas of this strategy
- Build a recovery community across the town to increase 'visible recovery' and make use of peer support
- Address the impact of drug and alcohol use on our most vulnerable people, including those with multiple needs and co-existing drug, alcohol, housing and mental health problems by working collaboratively with additional services to support those in treatment/referrals into treatment, such as Domestic Violence services, Housing support, Probation, Primary and Secondary care, Mental health services, Education, Department of Work and Pensions, adult and children's social care
- Targeted specific areas of need based on the data for young people, such as De Bruce Ward and Foggy Furze
- Ensure effective evidence based provision of services
- Invest in research and behavioural insights work to ensure we can effectively support people who use drugs and alcohol

## Priority 3: Supporting Wider Health Needs

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**Wider Health Needs:** Consider our long term strategic goals to improve drug and alcohol related physical and mental health conditions across all health provisions, not just treatment services.

We know that:

- People with co-occurring substance misuse and mental health problems face additional barriers to access and take up of treatment and support
- Hospital admissions where drug-related mental health and behavioural disorders were a factor for Hartlepool residents are significantly higher than the national average
- Hartlepool is currently in the top 10 across the UK for alcohol related hospital admissions
- Hartlepool is significantly higher than the UK average for alcohol related liver disease mortality, and specific alcohol related mortality.
- Hartlepool is in the top 3 across the UK for drug related deaths
- The proportion of adults using alcohol are the highest proportion of people who live with children at least 60%.

We will:

- Continuously work to improve support and treatment for those with co-occurring mental health and substance misuse problems by working with partners across Tees, Esk and Wear Valley, the voluntary and community sector (VCS), NHS and Community Drug and Alcohol Support services.
- Develop the work within the community hubs and with partners to reemphasise 'Making Every Contact Count' so that people with co-existing physical and mental health conditions can access support, advice and information services easily.
- Ensure there is closer multidisciplinary working and the further development of case management systems that communicates effectively to reduce barriers to communication further.
- Ensure robust pathways into primary and secondary health care, working closely with local hospitals and primary care networks.
- Increase the awareness of the risks associated with drinking alcohol and promote positive behaviour change targeting known at risk groups.
- Ensure an up to date understanding of the needs of children whose health and wellbeing has been impacted by parental substance or alcohol use
- Provide appropriate and robust support to children at risk of Adverse Childhood Experiences (ACEs)
- Increase support for those bereaved by drug and/or alcohol related deaths
- Efforts are required to improve responses to persons within this cohort who are higher risk due to homelessness, lack of access to health care and abuse.

## Priority 4: Reducing Drug and Alcohol Related Crime and Disorder

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**Enforcement, Crime and Disorder:** To work collaboratively with Tees Drugs Combatting Partnerships to reduce drug related crime

We know:

- Drug and alcohol use can often be linked to increased crime rates
- Cocaine is the most common positive substance when drug tested on arrest
- In the last six months, there was a rise of 12% of people arrested for possession of drugs compared with the same period in previous year.
- Cleveland Police and Crime plan aims to combat issues caused by drugs from 2021-2024

We will:

- Review the current criminal justice pathways into substance misuse service with partners to ensure efficacy of treatment and support.
- Work collaboratively with criminal justice services regarding rehabilitation for those involved in drug related crimes, including probation, police and courts.
- Ensure treatment and criminal justice support services are based on an up to date and robust understanding of the links between drug and alcohol related harms and crime rates
- Report into the Tees Joint Combatting Drugs Unit (JCDU) regarding updates on current priorities and ongoing work in Hartlepool
- Strengthen the role of Public Health as a Responsible Authority through the alcohol licensing Standard Operating Procedure (SOP) and ensure the following are considered:
  - submit a representation against an application for a new or existing premises
  - negotiate conditions with an applicant
  - support or apply a review of a premises licence or club premises certificate where there are problems with one or more of the licensing objectives

## Delivering the Strategy and Monitoring Impact

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**Local:** The drug and alcohol strategy will form an action plan which will involve partners and stakeholders. This will be monitored within the Substance Misuse Governance Board within Hartlepool Borough Council (HBC) and a specific Drug and Alcohol Strategy group which will meet quarterly, led by the Hartlepool Borough Council Public Health Team (HBC-PH). HBC-PH will also report to the Health and Wellbeing Board annually to update on progress to ensure accountability of the strategy and action plan. Public health, Commissioning and Treatment Providers work closely together to ensure improvements within our treatment population by meeting quarterly.

As Dame Carol Black's Independent Review of Drugs lead to an increase of government funding for substance misuse services, HBC-PH plan to evaluate the Supplementary Substance Misuse Treatment and Recovery Grant fund (SSMTRG). This is to understand the impact the increased funding has had in reducing drug and alcohol related harms across Hartlepool and wider services. From this, we hope to gain an understanding of what has worked well, and what can be improved.

A Local outcomes frame work will be used to monitor impact and change.

**Regional/National:** Hartlepool is currently part of the Tees Joint Combatting Drugs Partnership, which will report into the Government's Joint Combatting Drugs Unit (JDCU). This combines multiple Government departments to help tackle drug misuse across society, including the Department of Health and Social Care, Home Office, Ministry of Housing Communities and Local Government, Department for Work and Pensions, Department for Education and Ministry of Justice. Similarly to local monitoring, the JCDU will have a National Combatting Drugs Outcome Framework to monitor impact and change.

## Partnership Working

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As the impact of drug and alcohol use can effect a number of different health and social determinants, Hartlepool Borough Council aims to work with a number of partnering organisations to ensure that the drug and alcohol strategy action plan and outcomes are attained. All partners will be accountable to ensure that actions in line with this strategy are followed to ensure progressive outcomes for Hartlepool. Partners involved in the development of the drug and alcohol strategy and action planning include:

Office of Health inequalities and Disparities (OHID)

Adults and Children's social care teams

Adults and Children's safeguarding

Cleveland Police

Office of the Police and Crime Commissioner for Cleveland

Neighbourhood Safety Team

Tees Esk and Wear Valley Mental Health Services

Supporting Treatment and Recovery Together (START) – Community drug and alcohol provider

Public Protection and Licencing

Housing Support Teams

Domestic Violence Service

Commissioning Support

NHS including Alcohol Care Teams, North East Ambulance and local Hospitals

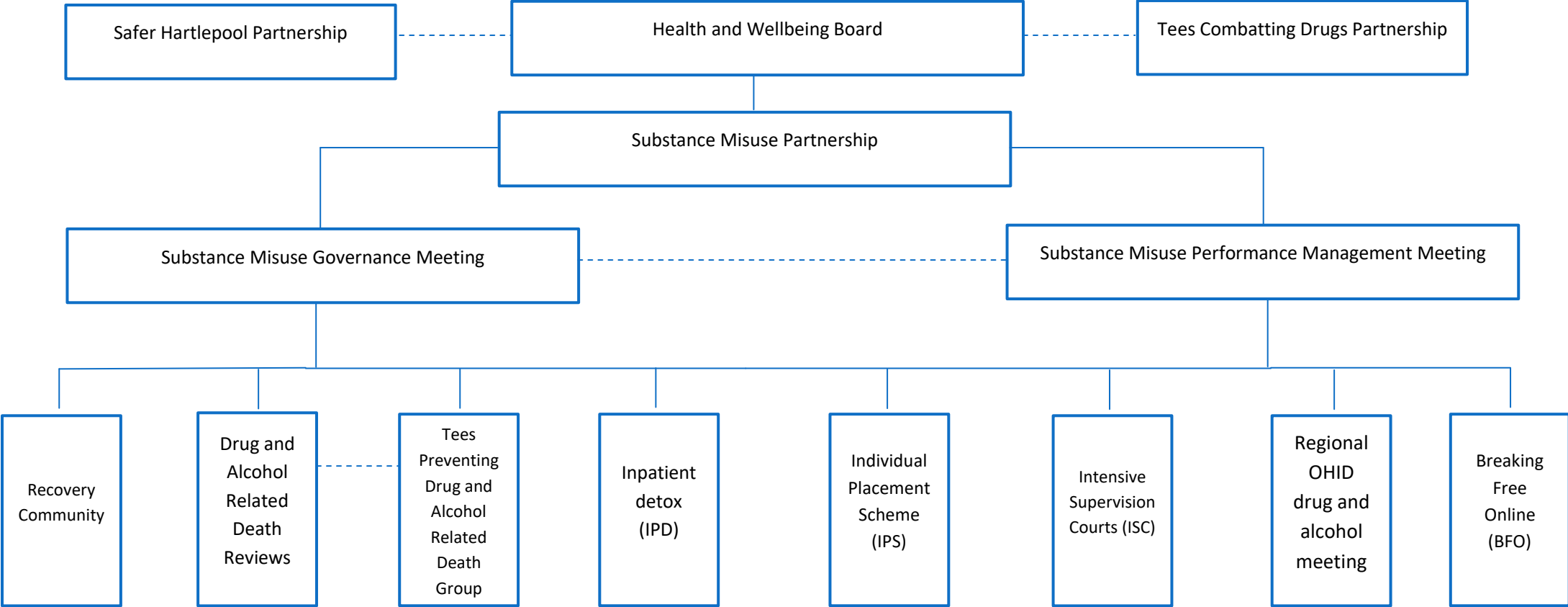
Lived Experience Recovery Groups

National Probation Service

Public Health

North Tees Foundation Trust

# Substance Misuse Governance Structure





# Bibliography

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- <sup>1</sup> [Drug misuse in England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)
- <sup>2</sup> [Around 360,000 admissions to hospital as a result of alcohol in 2018/19 - NDRS \(digital.nhs.uk\)](https://digital.nhs.uk)
- <sup>3</sup> [Alcohol and drug prevention, treatment and recovery: why invest? - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- <sup>4</sup> [Independent review of drugs, part 1: terms of reference - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- <sup>5</sup> [From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- <sup>6</sup> [Drug misuse | Topic | NICE](#)
- <sup>7</sup> [Overview | Alcohol-use disorders: diagnosis, assessment and management of harmful drinking \(high-risk drinking\) and alcohol dependence | Guidance | NICE](#)
- <sup>8</sup> [Substance Misuse Needs Assessment \(JSNA\) | Hartlepool Borough Council](#)



# Hartlepool Drug and Alcohol Needs Assessment 2023



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## 1.0 Introduction

The misuse of drug and alcohol is one of the highest risk factors for ill-health across the UK with an estimate of 1 in 11 adults aged 16-59 to have taken a drug in the last year, with 1.1 million adults to have taken a class A drug<sup>1</sup>. In the same year, it is estimated 358,000 hospital admissions were attributed to alcohol use, 6% higher than the previous year<sup>2</sup>. Drug and alcohol use can lead to a number of physical and psychological conditions, such as liver disease, cardiovascular complications, high blood pressure, depression and anxiety.

The costs of alcohol and drug misuse to society are significant. Estimates show that the social and economic costs of alcohol-related harm amount to £21.5billion, while harm from illicit drug use costs £10.7billion. However, it is said £4 social return is made for every £1 spent on treatment and support services<sup>3</sup>.

Hartlepool has the second highest rate of deaths related to drug poisoning in the North East of England and the third highest nationally<sup>4</sup>.

Additionally, Hartlepool has the 18th highest alcohol related liver disease mortality rate in England, and has been consistently significantly worse than the England average for the last 6 years. This is also reflected in Hartlepool's alcohol related mortality rate which has fallen from a peak of 23.8 per 100,000 population in 2014-16, but is still significantly worse than the England average.

Whilst we may not yet have seen the long term impacts of the COVID-19 pandemic, we can see that the sales of spirits saw an increase of £317 million (+8%) and wine £299 million (+7%). Individuals who reported higher levels of alcohol use before the pandemic, reported further increases of alcohol consumption during the pandemic, putting individuals at further risk of alcohol related harms<sup>5</sup>. Research has suggested that people using illicit substances were at greater risk of overdose and blood-borne infections throughout COVID-19, potentially resulting in long-term health implications<sup>6</sup>.

The reasons why an individual may increase their alcohol use, or take illicit drugs can vary. However, research has shown that adverse childhood experiences (ACE) are prevalent amongst those who take substances<sup>7</sup>. Drugs and/or alcohol may also be used to help manage with emotional distress and/or traumatic experiences<sup>8</sup>. Therefore, it is important that safe and effective treatment is available for those who need it.

This needs assessment aims to analyse the current need and identify any gaps in treatment and support services in Hartlepool by exploring previous and current data relating to drug and alcohol related harms.

## 2.0 Purpose/Aim

- To provide analysis of current substance misuse needs and identify health inequalities.
- To identify the current need in Hartlepool using local data.
- Develop recommendations which will aid the development of the Hartlepool drug and alcohol strategy.
- Support coordinated action between strategic partners and service planning.
- Inform the public health evidence base for services and interventions to reduce drug and alcohol related harm.

## 3.0 Methodology

This Needs Assessment is based on a range of desk research and data analysis. The main focus is to provide a baseline and understand any changes over the last five years. This needs assessment aims to further understand the needs of the population of Hartlepool in relation to substance misuse to inform a local Substance Misuse strategy and a joint approach to addressing and delivering the National Strategy From Harm to Hope.

The core data used to support this needs assessment is sourced from the National Drug Treatment Monitoring System (NDTMS) and Public Health Outcomes Framework (PHOF) indicators.

Additional partnership data was gathered and analysed supporting the findings of this assessment, which include:

- Drug offences
- Crime

- Licensing and Trading Standards
- Ambulance

## 4.0 National and Local policy

### 4.1 National Policy/Strategy

**Review of drugs: phase two report - The second part of Dame Carol Black's independent review of drugs focuses on prevention, treatment and recovery.<sup>9</sup>**

Dame Carol Black was commissioned by the Home Office and the Department of Health and Social Care to undertake a 2-part independent review of drugs, to inform the government's strategy on tackling the harms associated with drugs and alcohol. Part one was published on 27 February 2020 and provides analysis on the challenges posed by drug supply and demand. Part two was published on the 8 July 2021 and focused on drug treatment, recovery and prevention. The report focused on 32 recommendations to enable vulnerable people with substance misuse issues to access support and recover.

The key areas include:

- Centralised reform of leadership, funding and commissioning
- Rebuilding services
- Increased focus on primary prevention and early interventions
- Improvements to research and how science informs policy, commissioning and practice

#### **From harm to hope: A 10-year drugs plan to cut crime and save lives<sup>10</sup>**

Following Dame Carol Black's two tier review of drugs policy and subsequent report published in 2021, the Government have launched their ambitious plan to tackle the misery and harm caused by illegal drugs. From harm to hope was launched in December 2021 and sets out the government's three priorities to:

- Break drug supply chains
- Deliver world-class treatment and recovery services
- Achieve a shift in the demand for recreational drugs

The strategy is underpinned by the investment of over £3 billion in the next three years.

**NHS long term plan<sup>11</sup>** sets out new commitments to address the causes of ill health with more focus on prevention and a more systematic approach in addressing health inequalities and contribute to the government's ambition of five years of extra healthy life expectancy by 2035.

#### **Community Mental Health Service<sup>12</sup>**

The above NHS Long Term Plan and NHS Mental Health Implementation Plan<sup>13</sup> 2019/20 – 2023/24 set out that the NHS will develop new and integrated models of primary and community mental health care. The new offer will include access to psychological therapies, improved physical health care, employment support, personalised and trauma informed care, medicines management and support for self-harm and coexisting substance use.

### 4.2 Regional and Local Policy/Strategy

**North East and North Cumbria ICS/ICB Strategic Plans<sup>14</sup>** set out priorities to significantly improve health outcomes for people who live in the region focusing on prevention and reducing inequalities in partnerships for the health of local communities

**Cleveland Police and Crime Plan 2021 – 2024<sup>15</sup>** sets out a 10 point plan to tackle some of the most important issues facing Cleveland Police in particular and emphasis on combatting the issues caused by drugs with greater emphasis on partnership working including a priority to:

- Get tough on drugs and gangs - Introducing a holistic approach to drugs and gangs including prevention, early intervention and targeted intervention.

### **HM Prison and Probation Service North-East Reducing Reoffending Plan 2022-25<sup>16</sup>**

The strategic document outlines a commitment to tackling drug and alcohol addiction, with specific references to:

- £200 million a year by 2024-25 to improve prison leavers' access to accommodation, employment support and substance misuse treatment, introducing further measures for early intervention to tackle youth offending
- £40 million a year to help offenders engage with substance misuse treatment and to tackle drug supply
- Ensure more people with a substance misuse problem are engaged in treatment within three weeks of release
- Increase joint working with local authorities to ensure additional funding for substance misuse is fully utilised for probation, following Dame Carol Black's report
- Ensure an effective whole-prison-and-probation approach to drugs and alcohol to reduce demand and maximise opportunities for recovery
- Disrupt, reduce and prevent the supply of drugs in prisons through robust security measures

**Hartlepool Joint Health and Wellbeing Strategy<sup>17</sup>** sets out a vision and ambition that Hartlepool will develop a culture and environment that promotes and supports health and wellbeing for all and an overall ambition is to improve the health and wellbeing of people living in Hartlepool and reduce inequalities.

### **Director of Public Health Annual Report 2022<sup>18</sup>**

The 2022 Director of Public Health Report noted that People in Hartlepool are also more likely to die due to alcohol or drug use than people in England.

**Hartlepool Borough Council Plan 2021/22 – 2023/24<sup>19</sup>** sets out a vision to for Hartlepool to be a place where people are enabled to live healthy, independent and prosperous lives. In particular the plan makes reference to:

- There are reduced levels of smoking, substance and alcohol misuse in the community;
- There is improved mental, emotional and social wellbeing;

**Hartlepool Homelessness Reduction and Rough Sleeping Strategy 2021-2024<sup>20</sup>** sets out how the council will work with our partners and residents to grow, improve, support and deliver the housing offer. This includes protecting the most vulnerable including those with an offending history and those people with multiple and complex needs.

### **Tees Combatting Drugs Partnership Joint Needs Assessment**

The purpose of the Joint Needs Assessment is to present an assessment of need for the Combatting Drugs Partnership in Tees. The needs assessment draws on information from partners across the system and national 'Guidance for local delivery partners'. This will to feed into a Tees Drugs Strategy Delivery Plan and agreed local performance framework.

## 5.0 Data

### 5.1 Hartlepool Demographics

Hartlepool has a working aged (16-64) population of 58% of the total population.

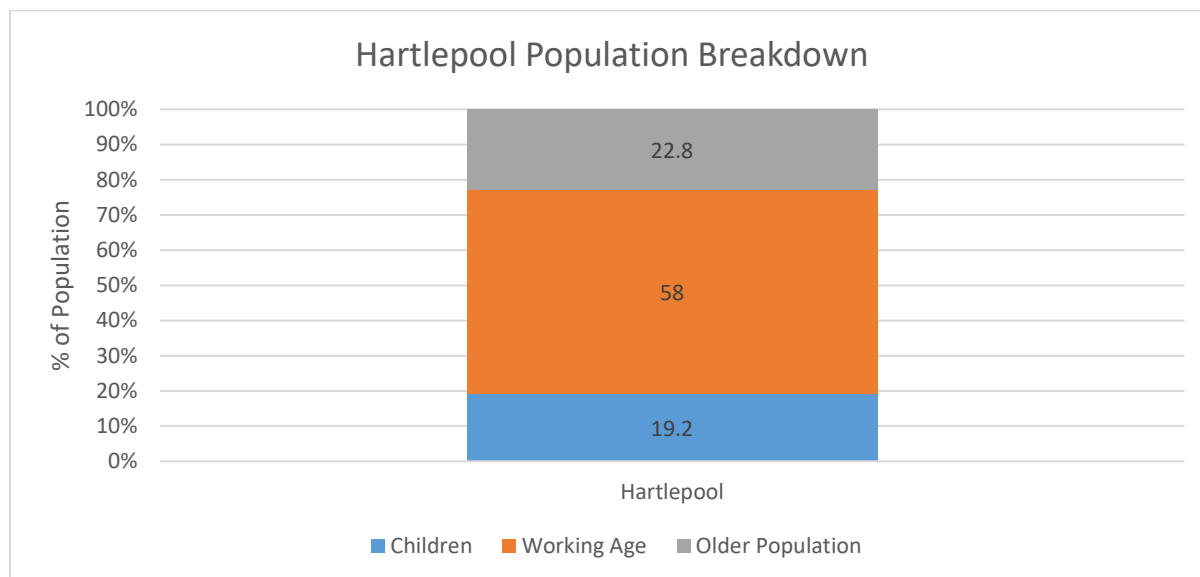


Figure 1: Hartlepool population breakdown

Source: ONS 2022 – 2020 Estimate

The remaining population is split with a slightly larger older population, 22.8% to 19.2% for children.

Within the individual wards in Hartlepool, Victoria has the largest proportion of working aged population, 63%, and Fens & Greatham the smallest, 51.1%.

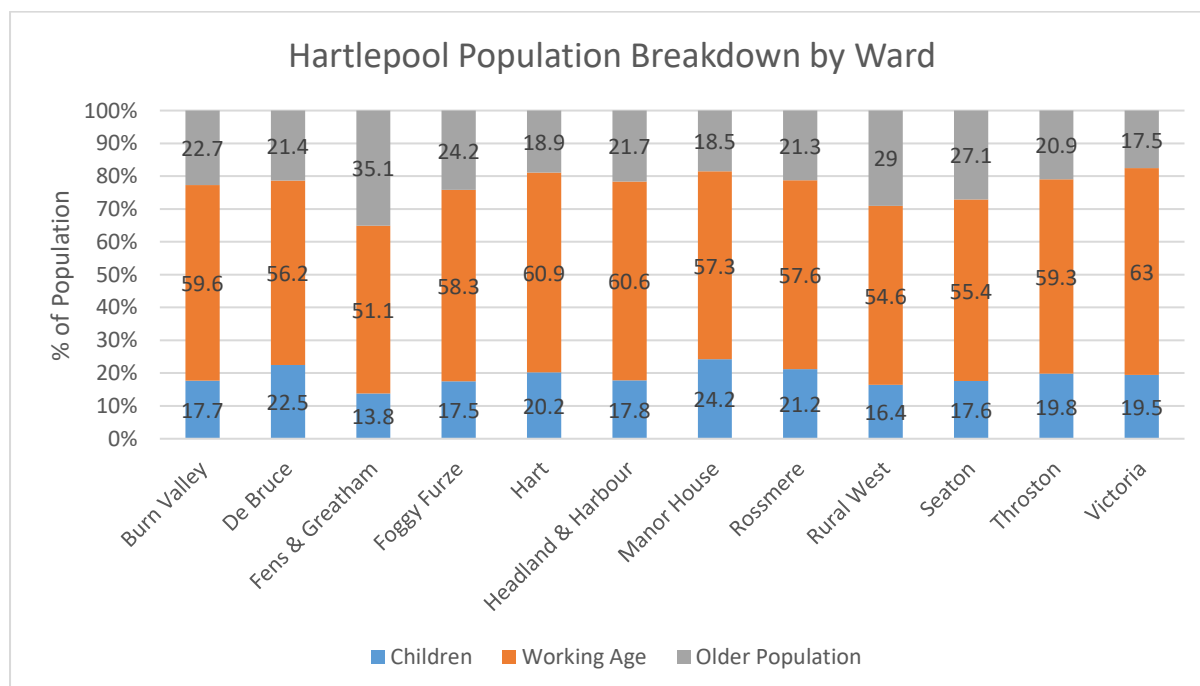


Figure 2: Hartlepool Population Breakdown by Ward

Source: ONS 2022 – 2020 Estimate

For the older population these two wards are reversed, with Fens & Greatham having the largest proportion, 35.1%, and Victoria the smallest, 17.5%.

Hartlepool's population is 51% female and 49% male in the latest population estimate.



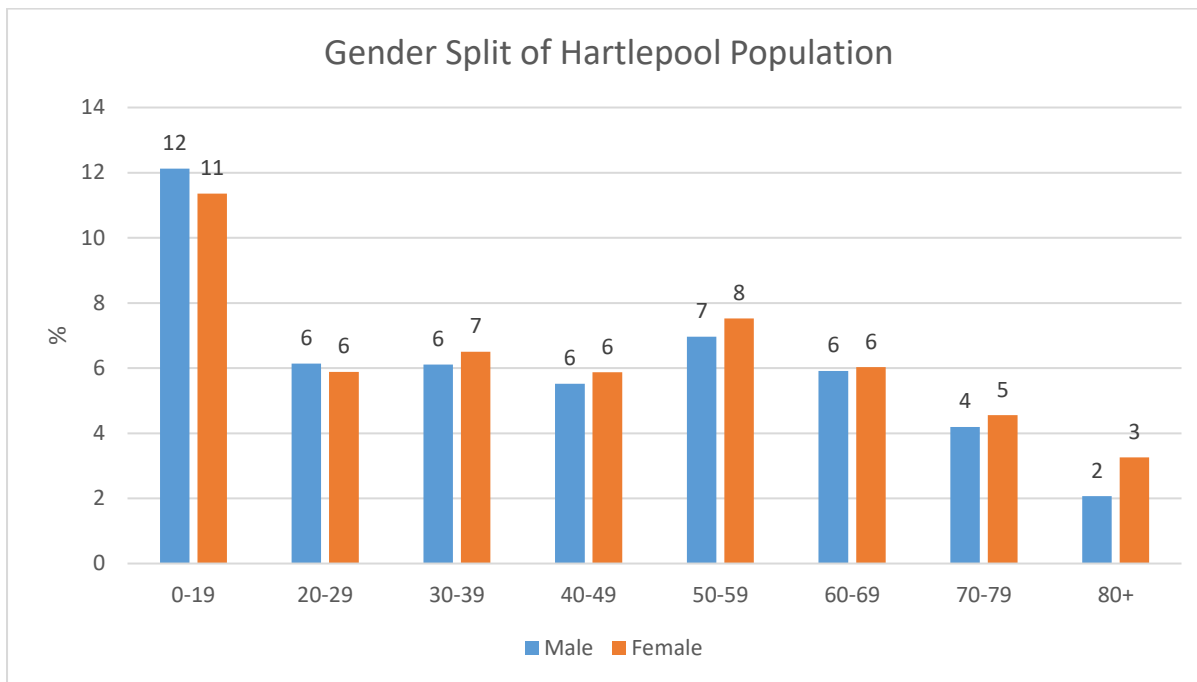


Figure 3: Gender Split of Hartlepool Population

Source: ONS 2022 – 2020 Estimate

The proportion for each gender is with 1% of each other for every age group.

## 5.2 Substance Use Prevalence

### 5.2.1 Adults

Age:

The age rates of the Hartlepool adult substance misuse caseload have stayed fairly static over the last five years.

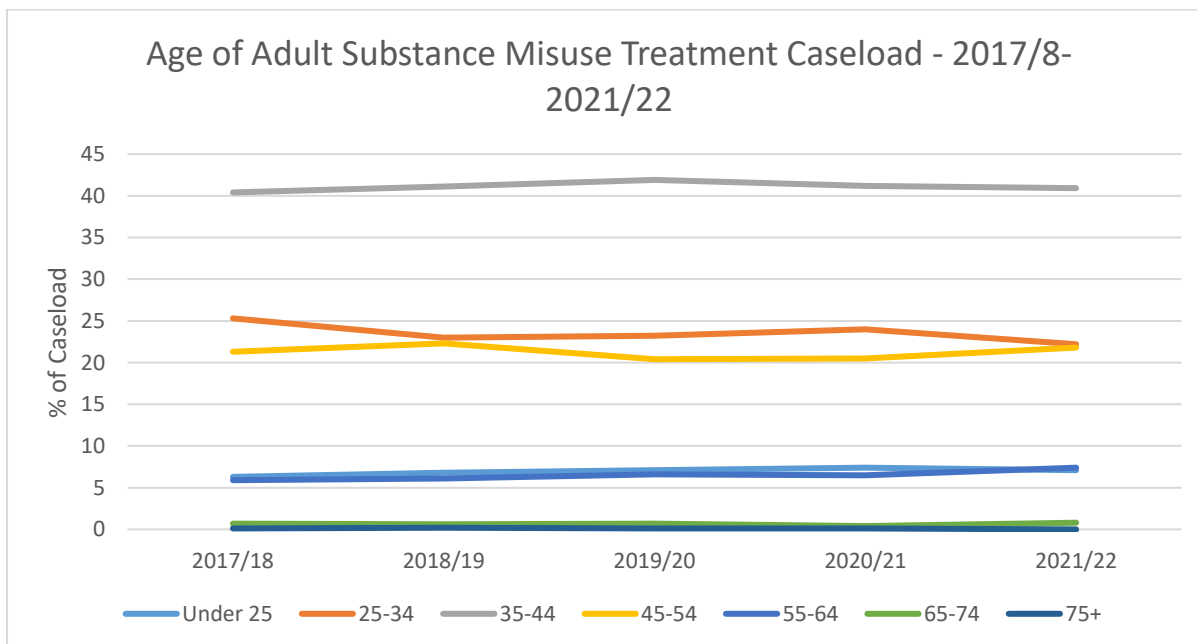


Figure 4: Age of Adult Substance Misuse Treatment Caseload - 2017/8-2021/22

Source: NDTMS 2022

Those aged 35-44 account for roughly 40% of the treatment population throughout the reporting period. A further 40-45% is attributable to the age groups either side of 35-44, 25-34 and 45-54. Those under 25 and those over 55 each account for around 7-8% of the treatment population.

When compared to the England average, Hartlepool has a younger treatment population

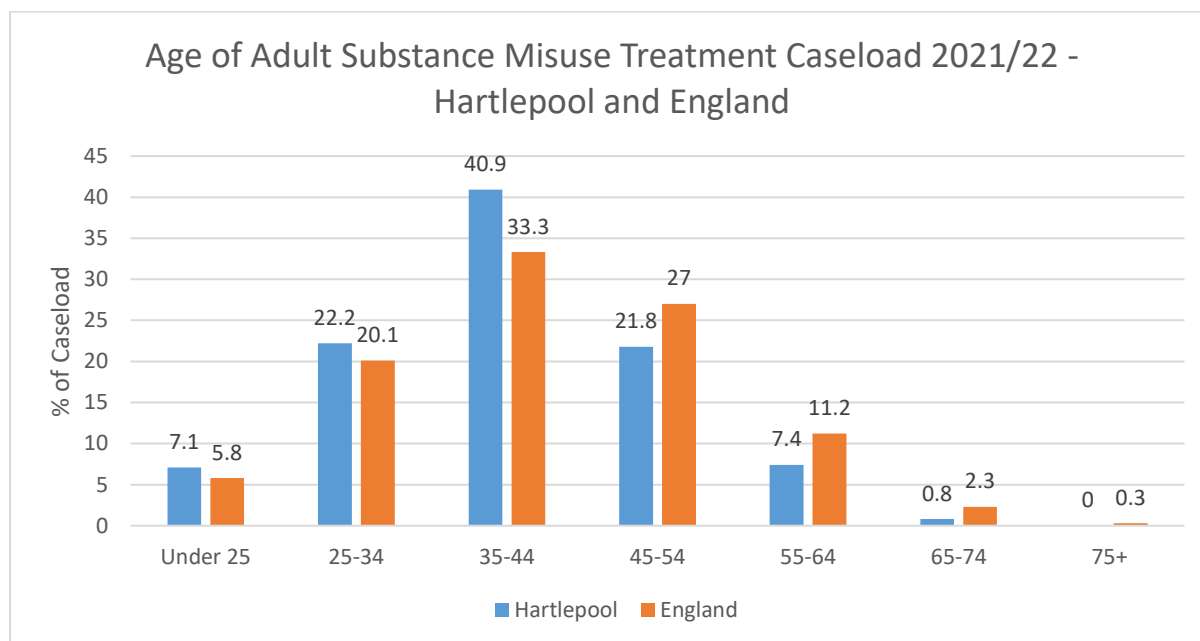


Figure 5: Age of Adult Substance Misuse Treatment Caseload 2021/22 - Hartlepool and England  
Source: NDTMS 2022

Hartlepool has a larger proportion of its adult treatment caseload for each age group up to 35-44, and then a smaller proportion for each subsequent age group.

#### Ethnicity:

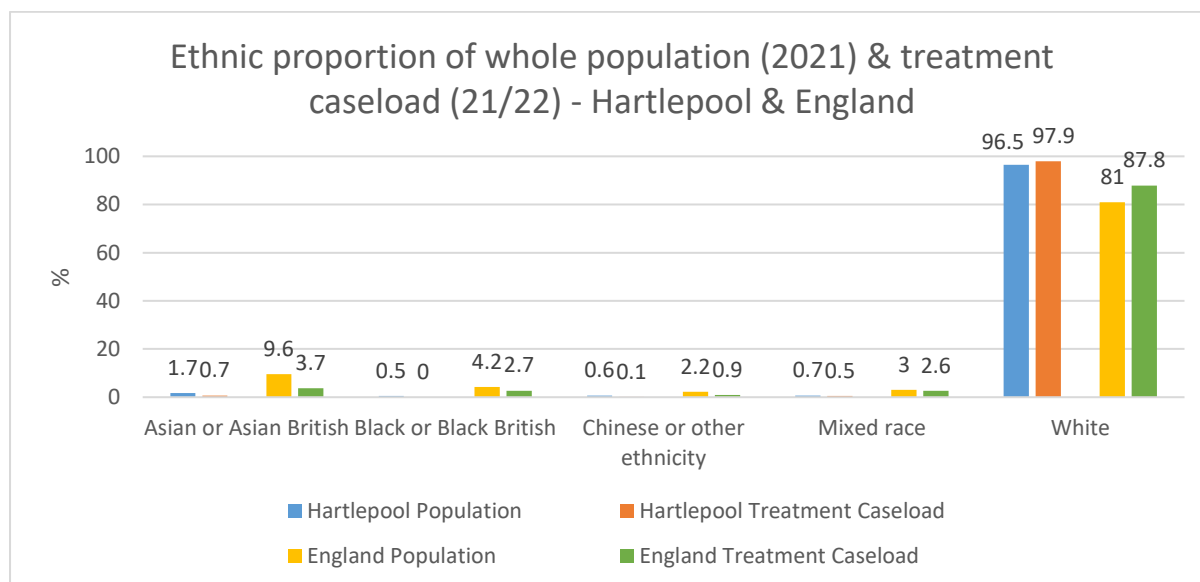


Figure 6: Ethnic proportion of whole population (2021) & treatment caseload (21/22) - Hartlepool & England

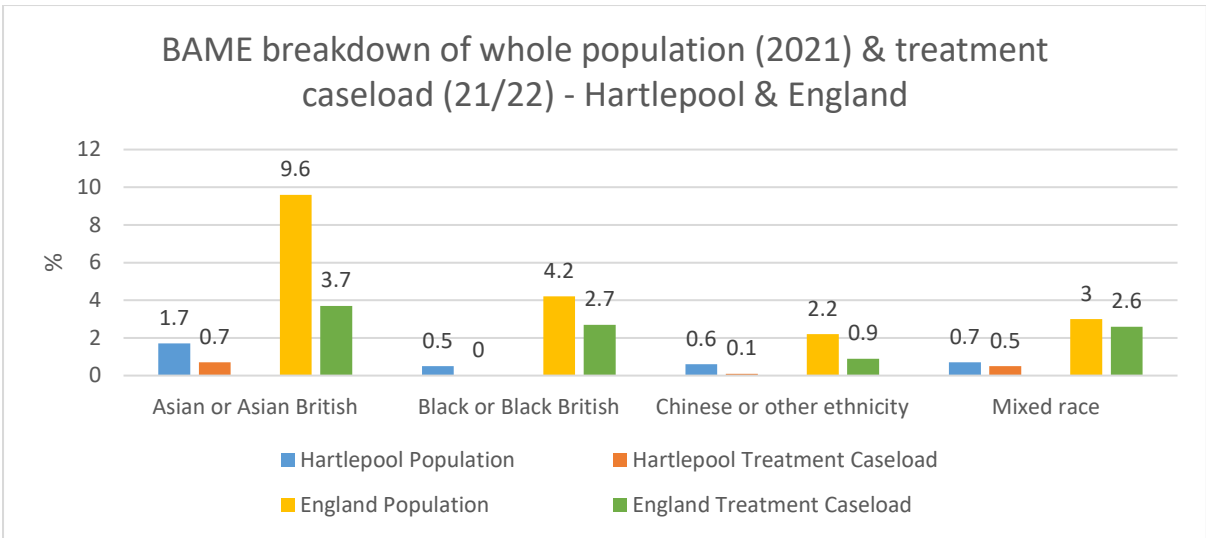


Figure 7: BAME breakdown of whole population (2021) & treatment caseload (21/22) - Hartlepool & England  
 Source: Census & NDTMS 2022

Hartlepool’s treatment population is majority white in ethnicity, with 97.9% of the treatment population in 2021/22 identifying as white. This is comparable with the population of Hartlepool as whole, but is larger than the treatment proportion for England, however Hartlepool has a larger proportion of its whole population which identifies as white than England as a whole. Within the BAME population Hartlepool has relatively small numbers both in treatment and as whole, with no BAME group contributing more than 1% of the treatment population.

Treatment Service Referral Numbers:

Hartlepool Adult Substance Misuse Referrals 2011/21

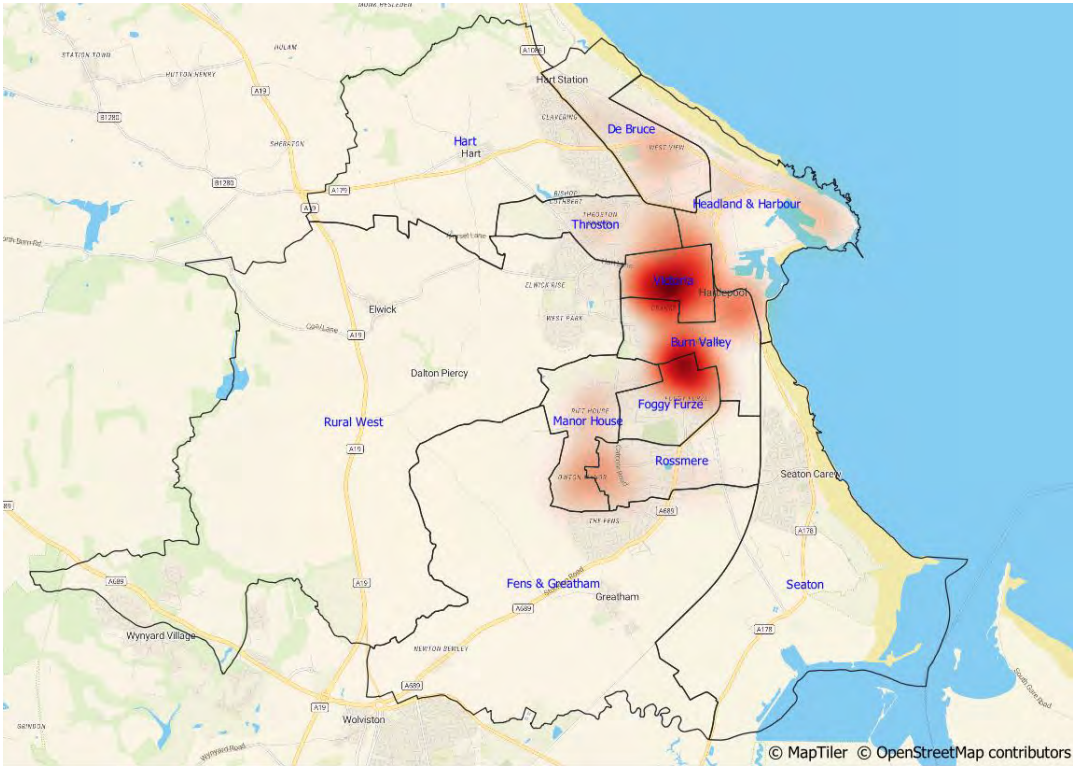


Figure 8: Hartlepool Adult Substance Misuse Referrals 2011/21  
 Source: Local Data 2022

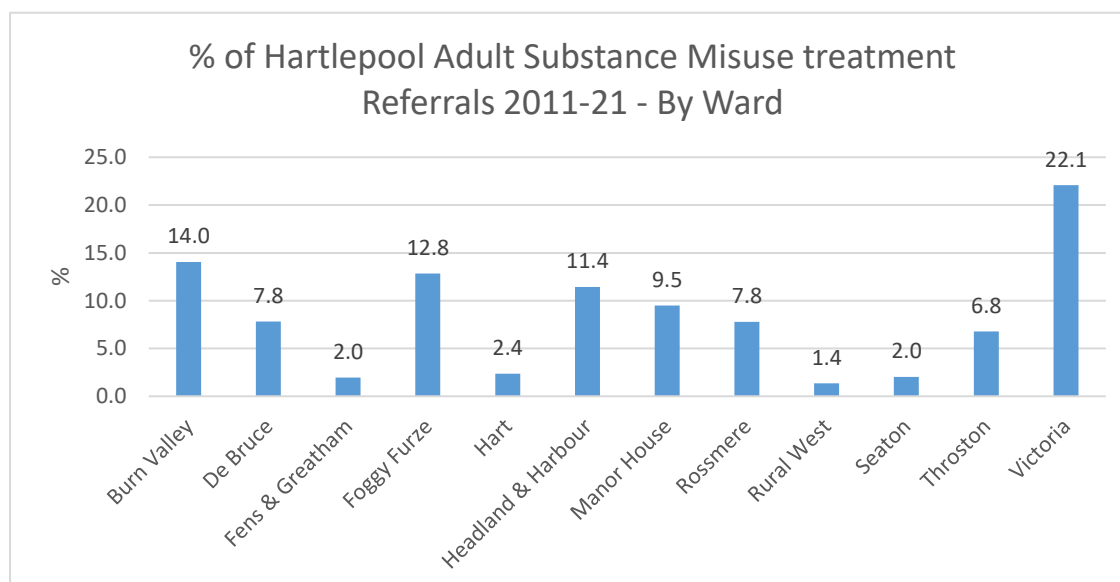


Figure 9: Percentage of Hartlepool Adult Substance Misuse treatment Referrals 2011-21 - By Ward  
Source: Local Data 2022

Referrals for Hartlepool's adult's substance misuse treatment services, the ward with the largest proportion is Victoria, and the area of greatest concentration is the Victoria and Burn Valley area of the town.

For adult Victoria ward accounts for more than 1 in 5 referrals. Victoria and Burn Valley combined accounts for more than a third of all referrals. Again similar to the young people's referrals, the areas of largest proportion of referrals are areas of high levels of deprivation.

*Referral Source:*

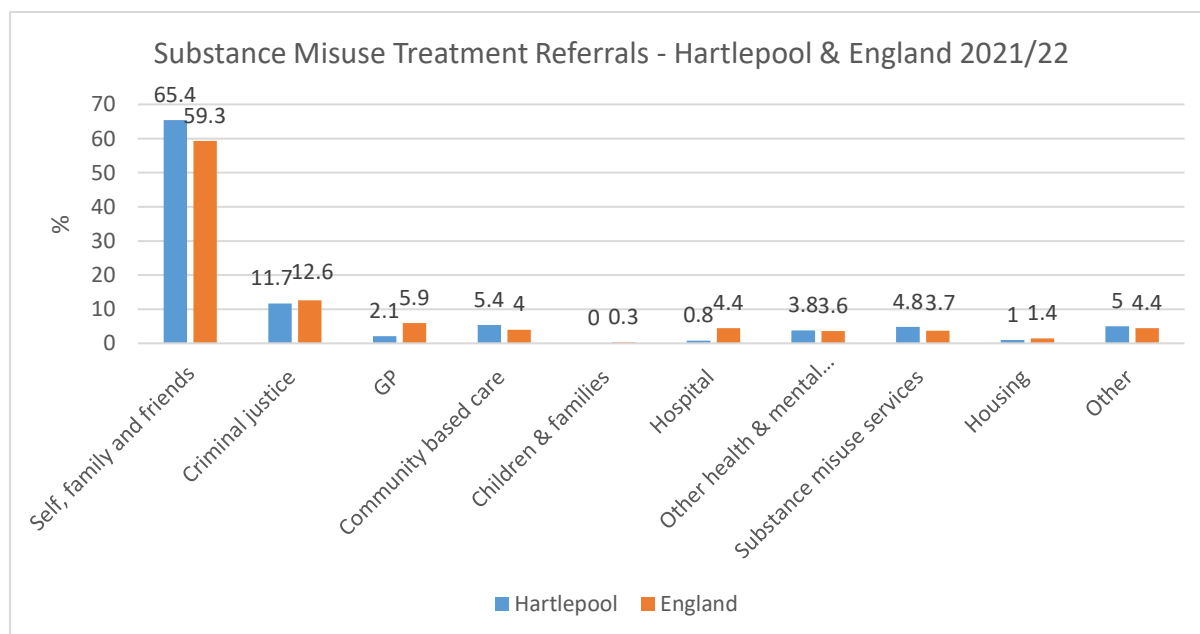


Figure 10: Substance Misuse Treatment Referrals - Hartlepool & England 2021/22  
Source: NDTMS 2022

Hartlepool's referrals for substance misuse treatment are dominated by self, family and friends, which accounts for almost 2 in 3 referrals, if criminal justice referrals are added then this becomes 3 in 4 referrals. This is not unusual, as it follows a similar pattern to England as a whole. Hartlepool received less than half the proportion of GP referrals than England as a whole and less than a quarter of the England proportion from hospitals.

## Reported Drug Use:

The proportion of substances used by those in adult treatment for substance misuse in Hartlepool has seen the proportion using opiates and the proportion using alcohol both decline, but the proportion using Opiates in conjunction with crack, and cocaine increase over the last five years.

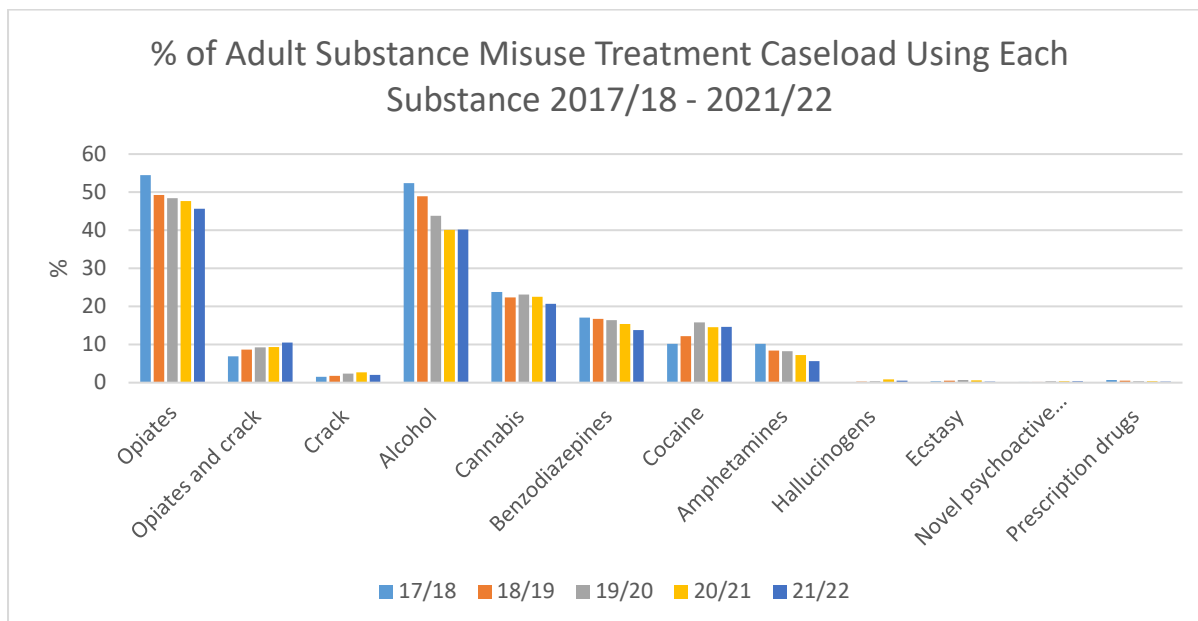


Figure 11: Percentage of Adult Substance Misuse Treatment Caseload Using Each Substance 2017/18 - 2021/22  
Source: NDTMS 2022

Crack use, without opiate use in conjunction, has remained low throughout the reporting period in Hartlepool, as have hallucinogens and ecstasy. All three have remained no higher than 3% of the caseload. Both opiate and alcohol use were above 50% in 2017/18, 54% and 52% respectively, however this has fallen to 46% for opiates and 40% for alcohol by 2021/22, though these two substance have remained the two largest proportions of any substance on the caseload. Cannabis, benzodiazepines and amphetamines use has declined in its proportion of the adult caseload across the reporting period, while cocaine has had the adverse relationship, increasing from 10% in 2017/18 to 15% in 2021/22.

When compared to the England averages, the proportions of the adult caseload using each substance is very different for opiate and alcohol use.

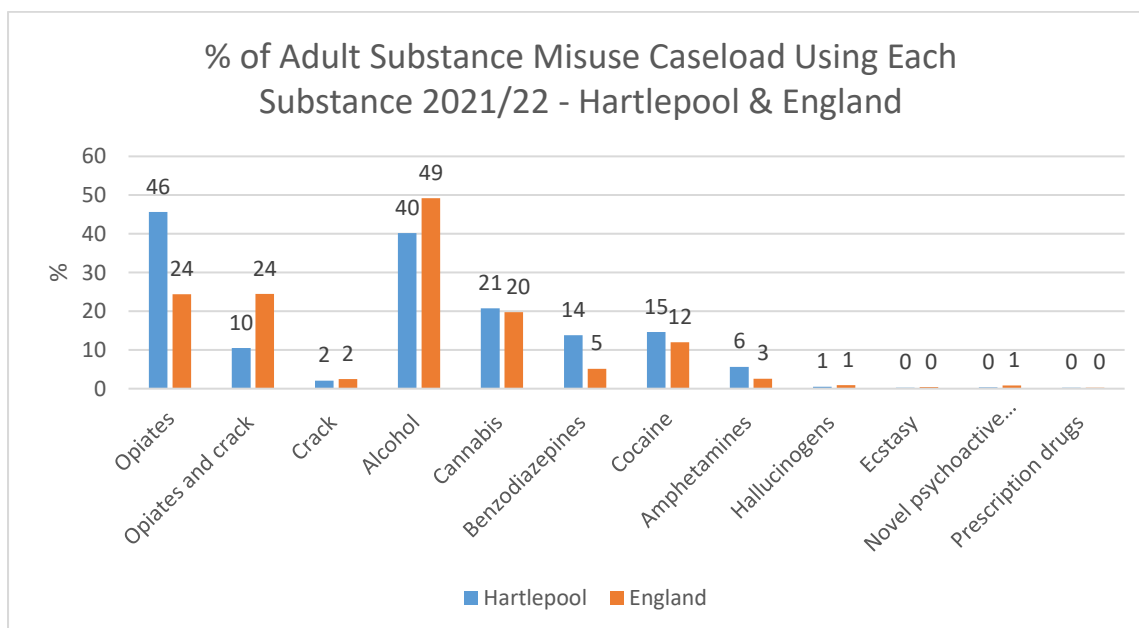


Figure 12: Percentage of Adult Substance Misuse Caseload Using Each Substance 2021/22 - Hartlepool & England  
Source: NDTMS 2022

Hartlepool's adult treatment caseload has a proportion of opiate users almost twice the size of the England average, though less than half of the size for opiate and crack usage in conjunction. While Hartlepool's benzodiazepine use has declined amongst the adult caseload, it is still almost three times the size of the England average.

### Successful Completions:

Within Hartlepool's adult substance misuse treatment services, successful completion of treatment for opiate use is on a declining trend. Further work will need to be undertaken to understand this declining trend and how this compares to England's declining trend.

Successful completion of drug treatment - opiate users

Proportion - %

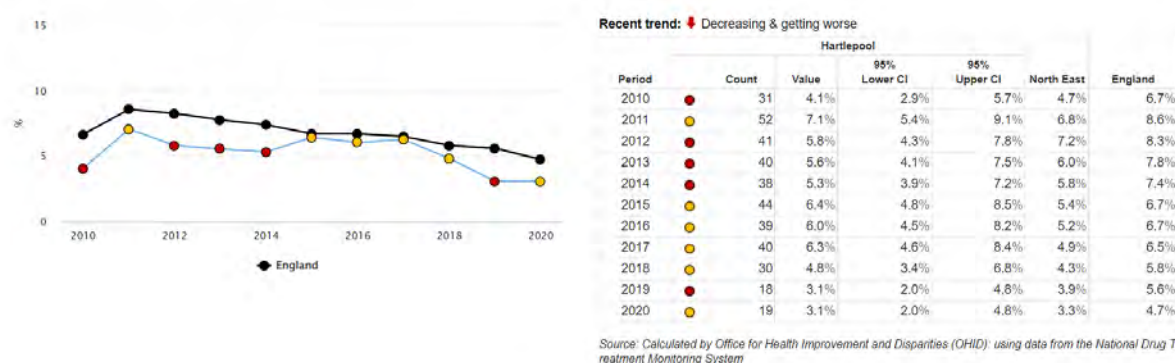


Figure 13: Successful Completion of drug treatment - opiate users

Source: OHID 2022

In the five years from 2015 to 2020, Hartlepool's proportion of successful completions for opiate use in substance misuse treatment has fallen by more than 50%, from 6.4 in 2015 to 3.1 in 2020. Across the same period the England average has fallen by 30%, from 6.7% in 2015 to 4.7 in 2020. However in both 2015 and 2020 Hartlepool's successful completion rate for opiate use was statistically similar to the England average.

For non-opiate use, the successful completion rate in Hartlepool has been significantly worse than the England average for the last seven years.

Successful completion of drug treatment - non-opiate users

Proportion - %

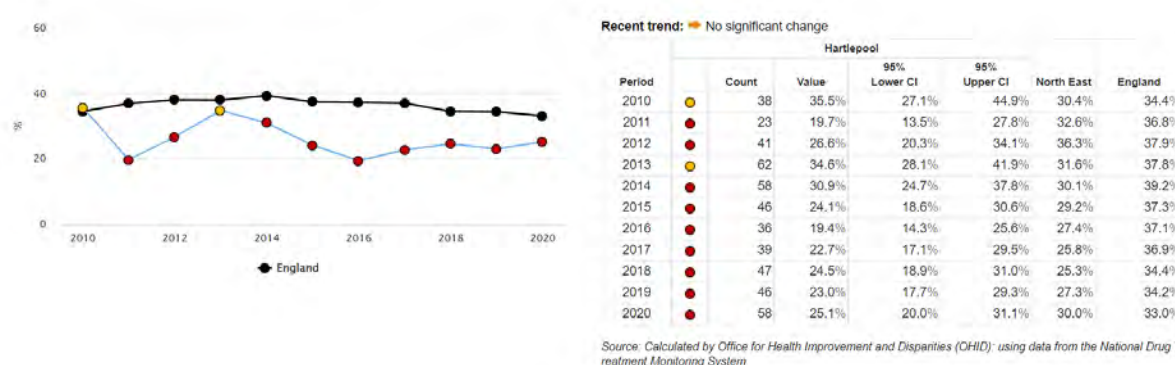


Figure 14: Successful completion of drug treatment - non-opiate users

Source: OHID 2022

Hartlepool's non-opiate successful completions have remained fairly stable for the last four years, following a three year period of decline, from 34.6% in 2013 to 19.4% in 2016. Hartlepool's current rate is 25.1%, compared with England's 33.0%, however the gap between Hartlepool and England is the smallest for six years.

### Average Length of Time in Treatment:

The average length of time in treatment for both opiate and non-opiate clients in Hartlepool is shorter than the England average, and has been so for the last five years.

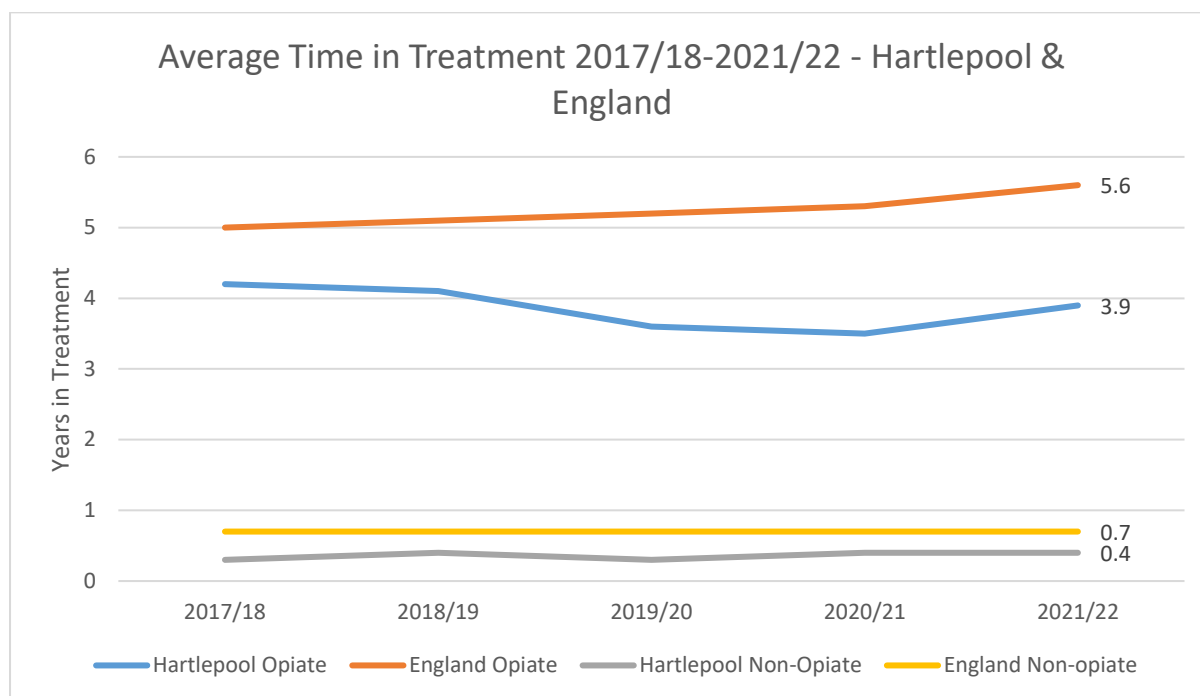


Figure 15: Average Time in Treatment 2017/18-2021/22 - Hartlepool & England  
Source: NDTMS 2022

The Office for Health Improvement and Disparities published a report in November 2021, which found that the average length of a successful opiate treatment episode was 2.5 years.<sup>1</sup> Hartlepool's average time in treatment for opiate users had fallen to 3.5 years in 2020/21, but has climbed to 3.9 in 2021/22. This is still 1.7 years less than the England average. For non-opiate episodes, the same report found that the average was 6 months, Hartlepool has maintained an average below that figure, which may increase the likelihood of unsustained treatment exits and further episodes in the future.

### Treatment Exits and Representations:

Hartlepool has had more than 50% of its treatment exits unplanned in four of the last five years. There are definitions. The National Drug Treatment Monitoring System (NDTMS)<sup>21</sup> defines exits from treatment using the following three categories:

#### Completed Treatment

- The client no longer requires structured drug (or alcohol) treatment interventions and is judged by the clinician not to be using heroin (or any other opioid, prescribed or otherwise) or crack cocaine or any other illicit drug or alcohol.
- The client no longer requires structured drug or alcohol treatment interventions and is judged by the clinician not to be using heroin (or any other opioid, prescribed or otherwise) or crack cocaine. There is evidence of use of other illicit drug or alcohol use but this is not judged to be problematic or to require treatment.

#### Transferred

- The client has finished treatment at this provider but still requires further structured drug treatment interventions and the individual has been referred to an alternative non-prison provider for this.
- The client has received a custodial sentence or is on remand and a continuation of structured treatment has been arranged. This will consist of the appropriate onward referral of care planning information and a 2-way

<sup>1</sup> <https://www.gov.uk/government/statistics/substance-misuse-treatment-for-adults-statistics-2020-to-2021/adult-substance-misuse-treatment-statistics-2020-to-2021-report>

communication between the community and prison treatment provider to confirm assessment and that care planned treatment will be provided as appropriate.

- Client has been transferred for ongoing structured treatment at another treatment provider as a result of this service being decommissioned.

#### Unplanned exits – dropped out

- The treatment provider has lost contact with the client without a planned discharge and activities to re-engage the client back into treatment have not been successful.
- The treatment provider has withdrawn treatment provision from the client. This item could be used, for example, in cases where the client has seriously breached a contract leading to their discharge. It should not be used if the client has simply ‘dropped out’. Adult drug and alcohol secure settings business definitions
- The treatment provider has received a referral and has had a face-to-face (or equivalent) contact with the client after which the client has chosen not to commence a recommended structured drug treatment intervention.
- Without completing their episode of structured treatment, the client has been deported to another country.
- The treatment provider has been unable to continue the client’s treatment due to the client being released from court.

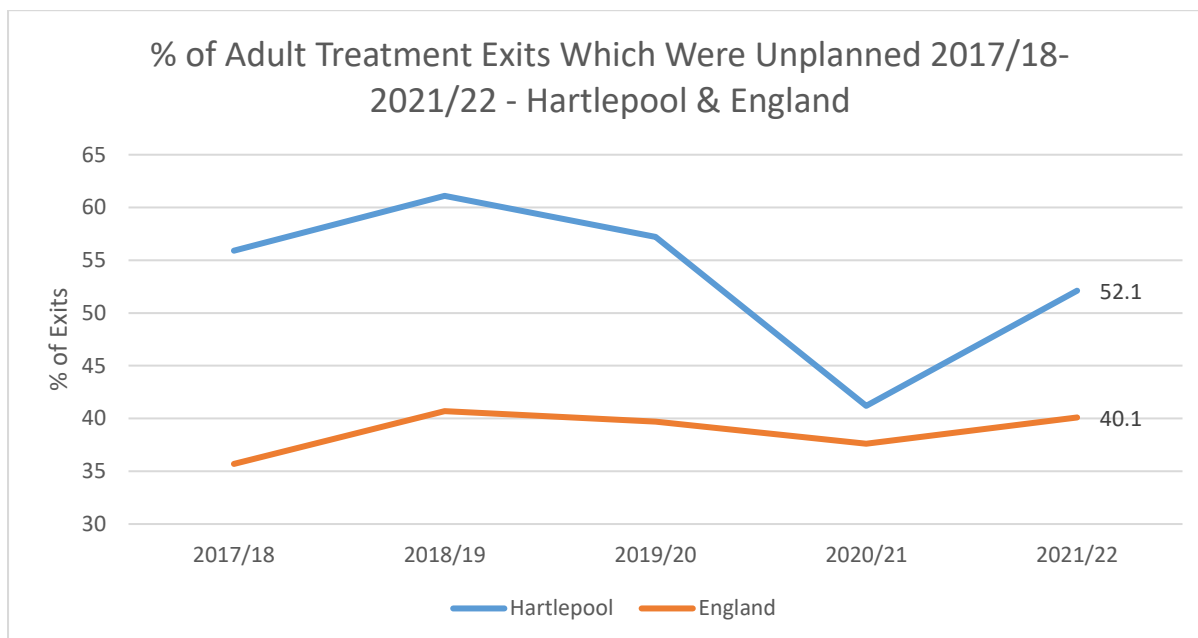


Figure 16: Percentage of Adult Treatment Exits Which Were Unplanned 2017/18-2021/22 - Hartlepool & England  
Source: NDTMS 2022

In contrast the England average has not exceeded 41% in the same period. Such a high level of unplanned exit will hinder Hartlepool’s ability to have an increased level of successful completion across its treatment population.

Representations within Hartlepool’s successful completions have shown little consistency and have undergone large increases and decreases across the reporting period.



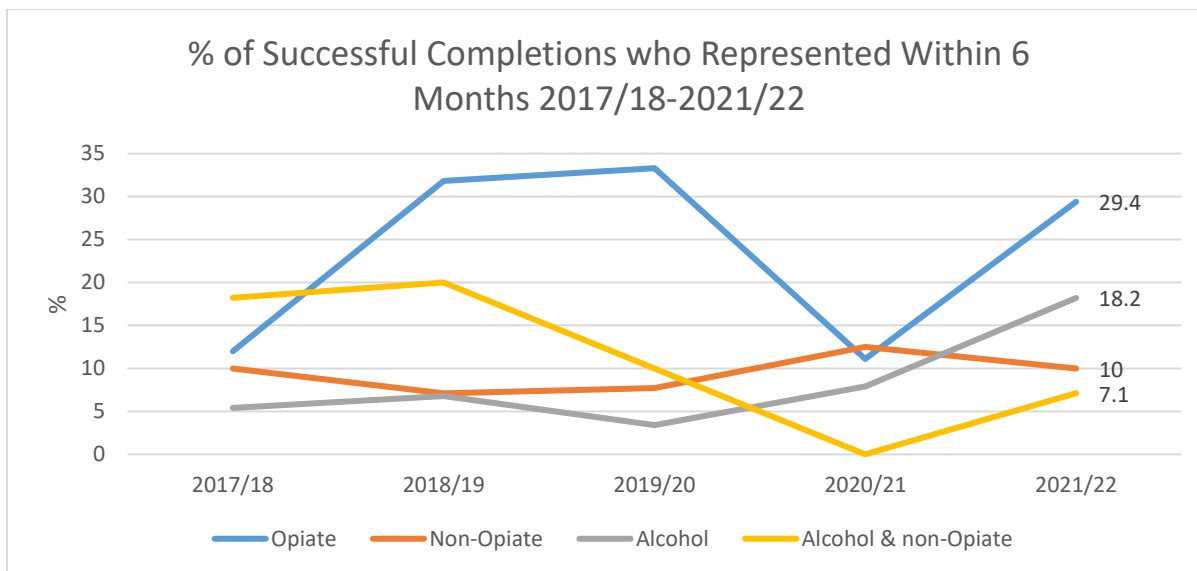


Figure 17: Percentage of Successful Completions who Represented Within 6 Months 2017/18-2021/22  
Source: NDTMS 2022

However, this can largely be attributed to the relatively small pool of successful completions from which this data is taken. Where the number of successful completions is small, even one representation can see a large jump in the rate of representation.

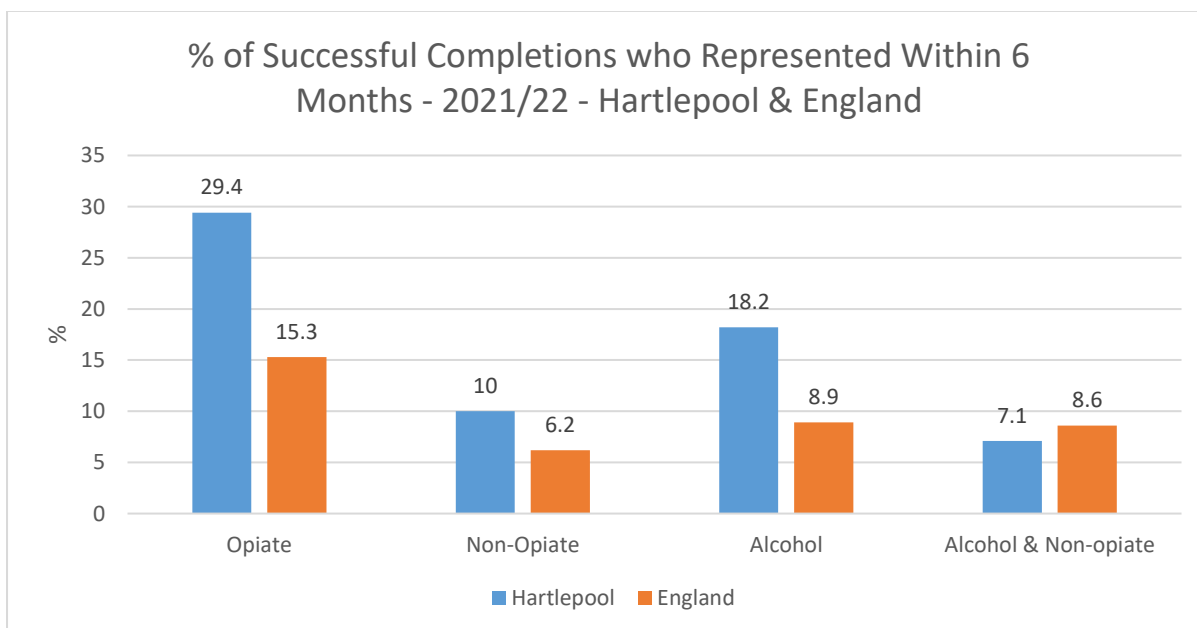


Figure 18: Percentage of Successful Completions who Represented Within 6 Months - 2021/22 - Hartlepool & England  
Source: NDTMS 2022

When compared with the England representation rates Hartlepool has almost twice the level of opiate representation, however as previously stated the data must be caveated with the effects that the small pool of successful completions has on Hartlepool's representation rates.

#### Drug Related Deaths:

Hartlepool has seen a rapid increase in its deaths from drug misuse rate since the 2012/14 rate of 4.9 per 100,000 population. In 2018/20, Hartlepool's rate was 16.3 per 100,000, this is a more than threefold increase.

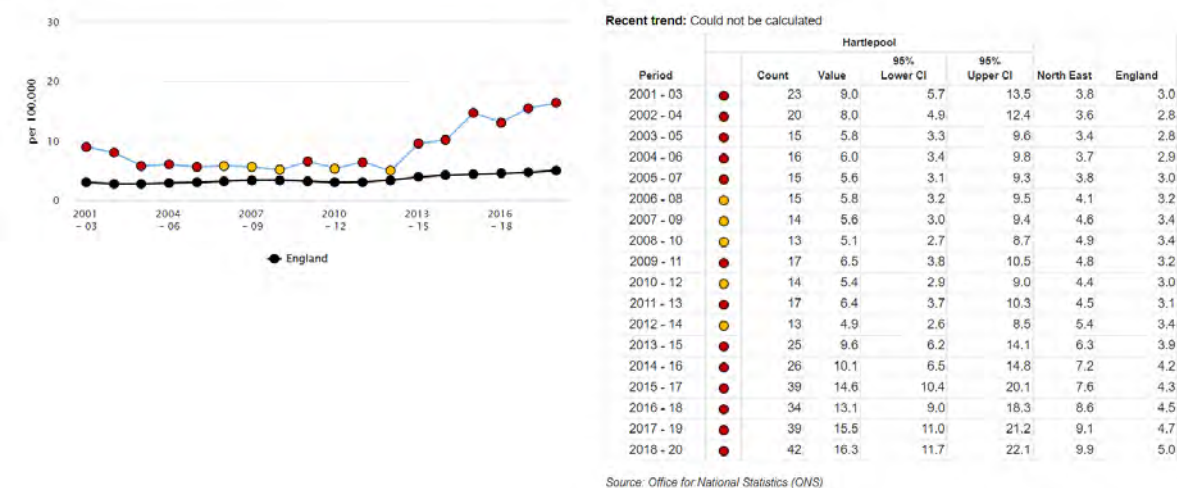


Figure 19: Deaths from Drug Misuse

Source: OHID 2022

Hartlepool's rate is currently the 3<sup>rd</sup> highest in England, and has seen an increase in five of the last 6 years.

### Mortality Rates:

#### Alcohol-specific mortality (Persons, 3 year range)

Directly standardised rate - per 100,000

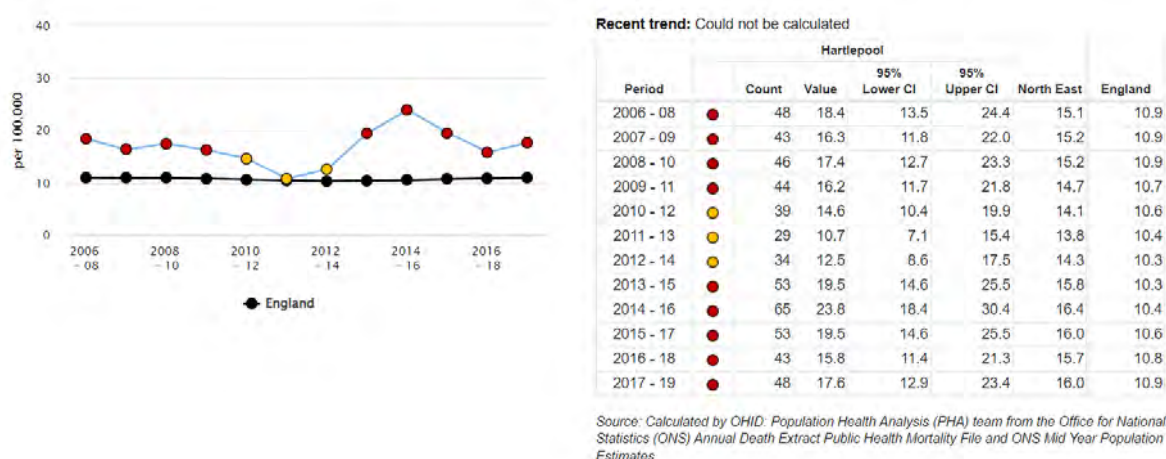
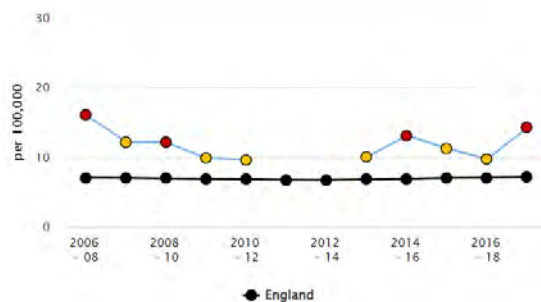


Figure 20: Alcohol-specific mortality

Source: OHID 2022

Hartlepool's alcohol related mortality rate has fallen from a peak of 23.8 per 100,000 population in 2014-16, but is still significantly worse than the England average. Hartlepool's current rate, the 2017-19 figure, is 17.6 per 100,000, but this is an increase from the 2016-18 figure of 15.8 per 100,000. Hartlepool had a three year period, between 2010-12 to 2012-14, where its mortality rate was statistically similar to the England rate. This has been followed by a five year period where Hartlepool's mortality rate has been significantly worse than the England average.



Recent trend: Could not be calculated

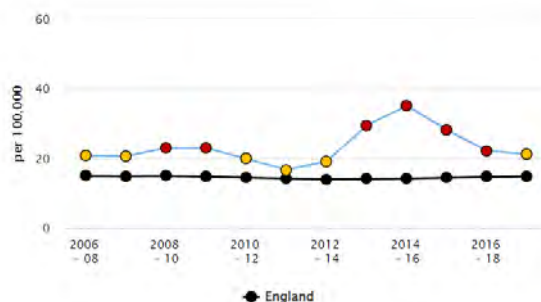
Period	Count	Value	Hartlepool		North East	England
			95% Lower CI	95% Upper CI		
2006 - 08	22	16.0	10.0	24.4	10.1	7.0
2007 - 09	16	12.2	7.0	19.7	10.5	7.0
2008 - 10	16	12.1	7.0	19.6	10.1	6.9
2009 - 11	13	9.8	5.3	16.8	9.6	6.9
2010 - 12	13	9.6	5.1	16.4	9.2	6.8
2011 - 13	7	*	-	-	9.3	6.7
2012 - 14	9	*	-	-	10.3	6.7
2013 - 15	14	10.0	5.4	16.7	11.4	6.7
2014 - 16	18	13.1	7.7	20.7	11.8	6.8
2015 - 17	15	11.2	6.2	18.5	11.2	7.0
2016 - 18	13	9.7	5.1	16.7	10.7	7.0
2017 - 19	20	14.2	8.6	22.0	11.0	7.1

Source: Calculated by OHID: Population Health Analysis (PHA) team from the Office for National Statistics (ONS) Annual Death Extract Public Health Mortality File and ONS Mid Year Population Estimates

Figure 21: Alcohol-specific Mortality (Female)

Source: OHID 2022

When looked at individually, the male and female alcohol specific mortality rates, which had been following a similar declining trajectory, have differed in the most recent data, with the male rate continuing it decline, though to a lesser degree than in the two previous years, and the female rate has increased sharply.



Recent trend: Could not be calculated

Period	Count	Value	Hartlepool		North East	England
			95% Lower CI	95% Upper CI		
2006 - 08	26	20.8	13.6	30.5	20.4	15.0
2007 - 09	26	20.6	13.5	30.1	20.2	14.9
2008 - 10	29	22.9	15.4	32.9	20.6	15.0
2009 - 11	30	23.0	15.5	32.8	20.2	14.8
2010 - 12	26	19.9	12.9	29.1	19.2	14.6
2011 - 13	22	16.8	10.5	25.5	18.5	14.3
2012 - 14	25	19.1	12.3	28.3	18.7	14.0
2013 - 15	39	29.5	20.9	40.4	20.4	14.1
2014 - 16	47	35.1	25.7	46.8	21.3	14.2
2015 - 17	38	28.1	19.8	38.6	21.0	14.5
2016 - 18	30	22.1	14.9	31.7	21.1	14.7
2017 - 19	28	21.2	14.1	30.7	21.3	14.9

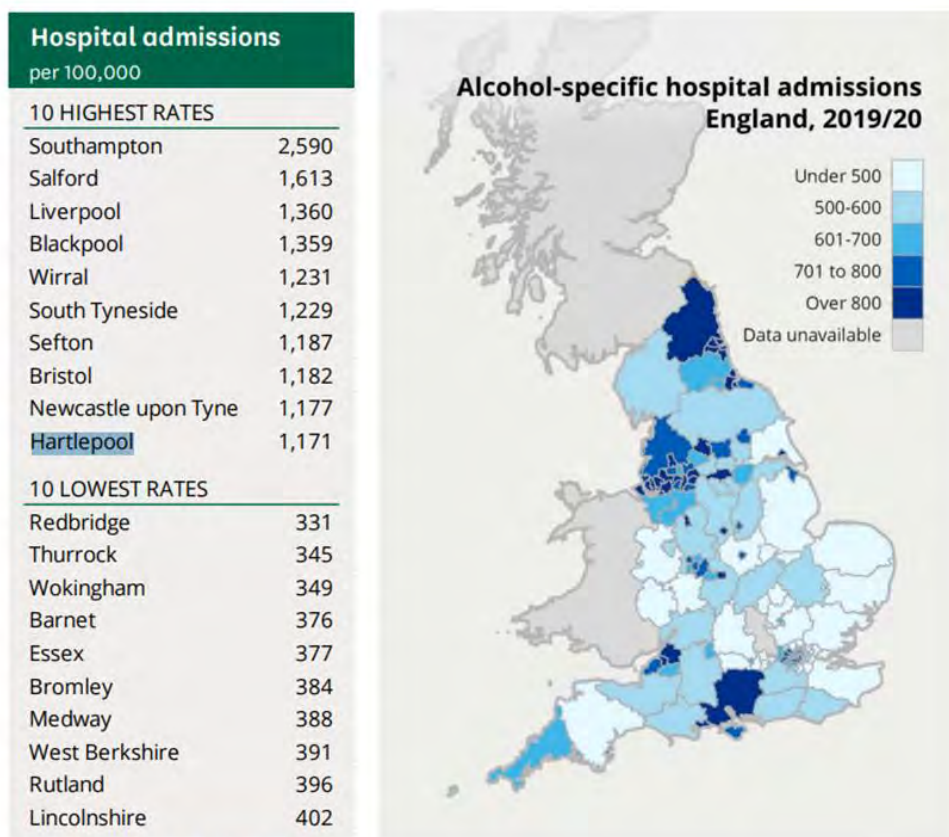
Source: Calculated by OHID: Population Health Analysis (PHA) team from the Office for National Statistics (ONS) Annual Death Extract Public Health Mortality File and ONS Mid Year Population Estimates

Figure 22: Alcohol specific mortality (Male)

Source: OHID 2022

## Hospital Admissions:

Alcohol related hospital admissions have been consistently significantly worse than the England rate throughout the entirety of the 13 year reporting period. Hartlepool had seen a recent increase up to a high of 1,171 per 100,000 population in 2019/20, which followed two previous years of increases. However this has been followed by a steep decline, down to 887 per 100,000 in 2020/21.

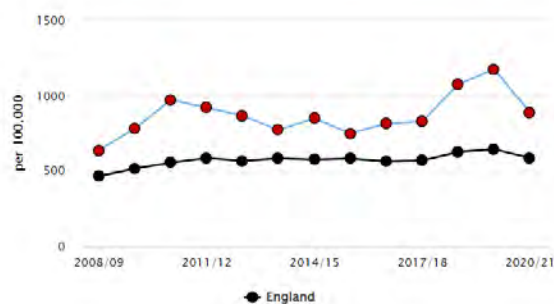


Source: [PHE Local Alcohol Profiles](#)

Figure 23: Alcohol specific hospital admissions, England, 2019/20

Admission episodes for alcohol-specific conditions (Persons)

Directly standardised rate - per 100,000



Recent trend: ↑ Increasing & getting worse

Period	Count	Value	Hartlepool		North East	England
			95% Lower CI	95% Upper CI		
2008/09	572	638	587	693	739	465
2009/10	709	779	722	839	805	515
2010/11	875	971	907	1,038	853	555
2011/12	837	918	857	983	897	587
2012/13	780	866	806	929	822	568
2013/14	697	773	716	833	780	584
2014/15	764	849	789	812	748	576
2015/16	680	749	693	808	770	583
2016/17	730	815	757	877	778	563
2017/18	755	828	769	889	806	570
2018/19	975	1,075	1,008	1,146	909	626
2019/20	1,080	1,171	1,101	1,245	936	644
2020/21	795	887	825	951	904	587

Source: Calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Figure 24: Alcohol admission episodes for alcohol-specific conditions

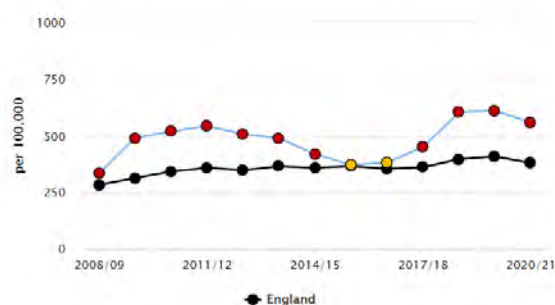
Source: OHID 2022



When split along gender lines, the male rate is following a very similar pattern to the Hartlepool rate as a whole, a sustained period of significantly worse rates than the England average, three years of increase followed by a sharp decline in the most recent figures, whereas the female rate has followed a different pattern.

#### Admission episodes for alcohol-specific conditions (Female)

Directly standardised rate - per 100,000



Recent trend: ▲ Increasing & getting worse

Period		Hartlepool				North East	England
		Count	Value	95% Lower CI	95% Upper CI		
2008/09	●	154	335	284	393	468	283
2009/10	●	227	490	428	559	512	313
2010/11	●	241	519	455	590	542	342
2011/12	●	251	543	478	615	572	359
2012/13	●	235	507	444	577	533	348
2013/14	●	227	489	427	557	507	366
2014/15	●	196	419	362	482	488	359
2015/16	●	174	371	318	431	493	367
2016/17	●	175	382	327	444	484	355
2017/18	●	210	450	391	516	512	361
2018/19	●	280	604	535	679	595	397
2019/20	●	285	610	541	686	590	409
2020/21	●	255	558	491	631	601	380

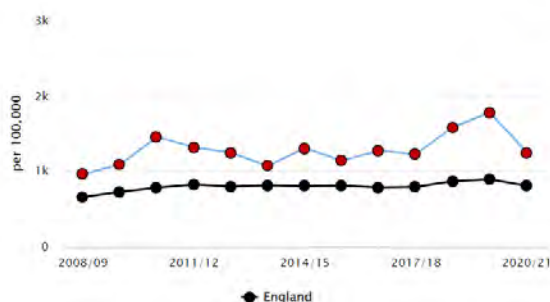
Source: Calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Figure 25: Admission for alcohol-specific conditions (Female)

Source: OHID 2022

#### Admission episodes for alcohol-specific conditions (Male)

Directly standardised rate - per 100,000



Recent trend: ● No significant change

Period		Hartlepool				North East	England
		Count	Value	95% Lower CI	95% Upper CI		
2008/09	●	418	958	868	1,055	1,026	658
2009/10	●	482	1,085	990	1,187	1,116	728
2010/11	●	634	1,452	1,340	1,570	1,183	780
2011/12	●	586	1,315	1,210	1,427	1,242	827
2012/13	●	545	1,247	1,143	1,357	1,129	799
2013/14	●	470	1,072	977	1,175	1,070	815
2014/15	●	568	1,304	1,198	1,417	1,026	804
2015/16	●	506	1,143	1,045	1,248	1,065	812
2016/17	●	555	1,271	1,166	1,382	1,091	784
2017/18	●	545	1,229	1,127	1,337	1,121	791
2018/19	●	690	1,579	1,463	1,703	1,244	869
2019/20	●	775	1,778	1,654	1,909	1,307	894
2020/21	●	540	1,244	1,140	1,355	1,230	806

Source: Calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

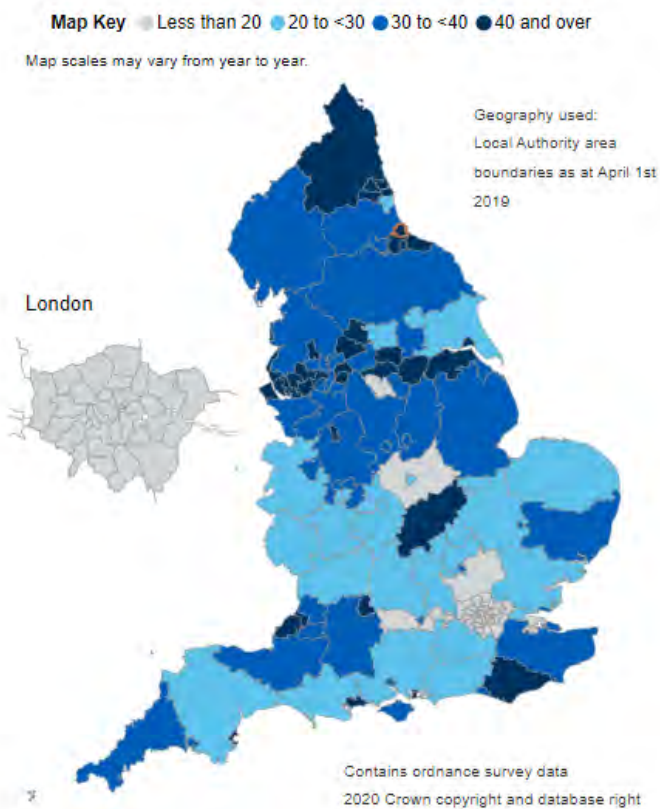
Figure 26 Figure 25: Admission episodes for alcohol specific conditions (Male)

Source: OHID 2022

The female hospitalisation rate had a two year period where it was statistically similar to the England rate, and while, similar to the male and Hartlepool total rates, this was followed by a steep increase, there has been a two year steady decline of rate in the two most recent figures.

In regard to poisoning by drug misuse, Hartlepool has higher hospital admission rates than both the North East and England.

## Admission rate (per 100,000 population) by Local Authority



## Regional and national comparisons

Hartlepool	60	71
Admissions		Admissions per 100,000
North East	1,315	51
Admissions - Region		Admissions per 100,000 - Region
England	16,994	31
Admissions - National		Admissions per 100,000 - National

'Blank' indicates a value that has been suppressed (admissions value between 1 and 7)

## Admissions per 100,000 population by year

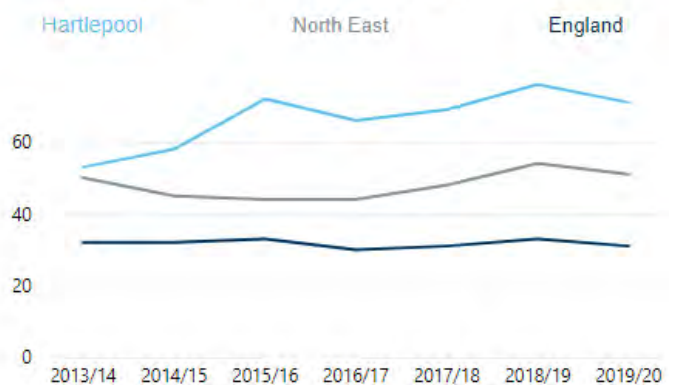


Figure 27 Admissions for poisoning by drug misuse  
Source: Hospital Episode Statistics (HES), NHS Digital

## 5.2.2 Children and Young People

Age:

More than 50% of Hartlepool's young people's substance misuse caseload (under 18's) are aged 15 or under for each of the last five years.

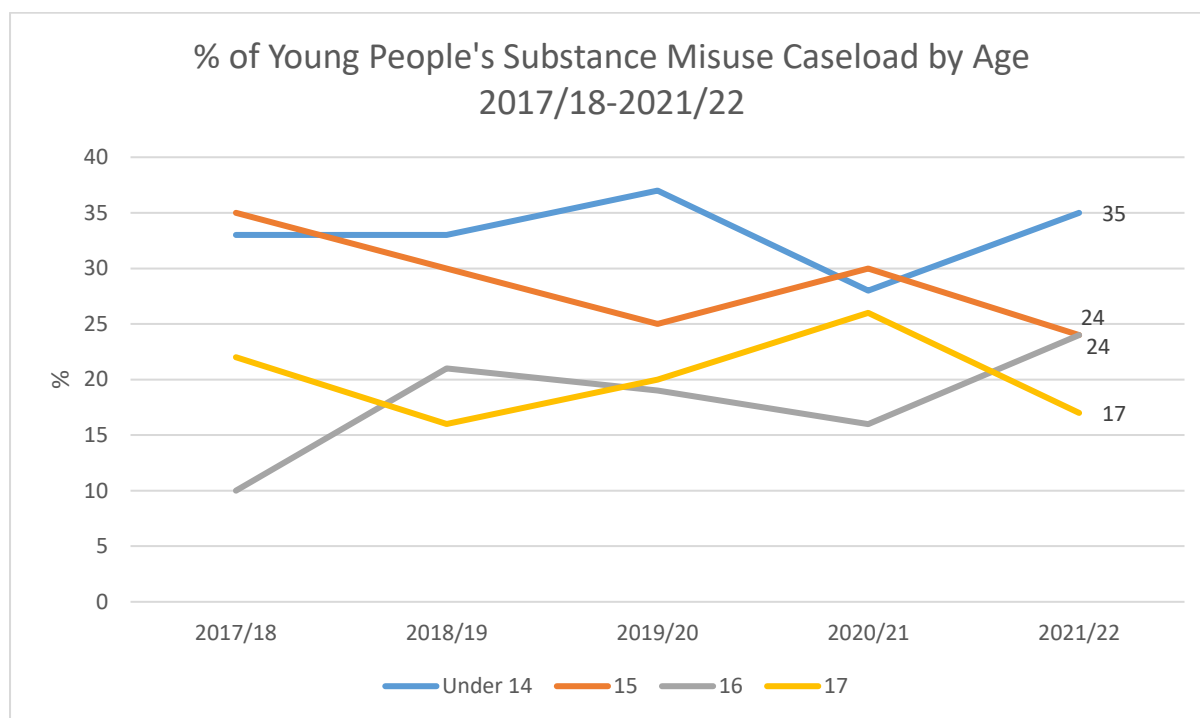


Figure 28: Percentage of Young People's Substance Misuse Caseload by Age 2017/18-2021/22  
Source: NDTMS 2022

This trend is not found in the England figures for 2021/22, where the age breakdown is almost an equal four way split.

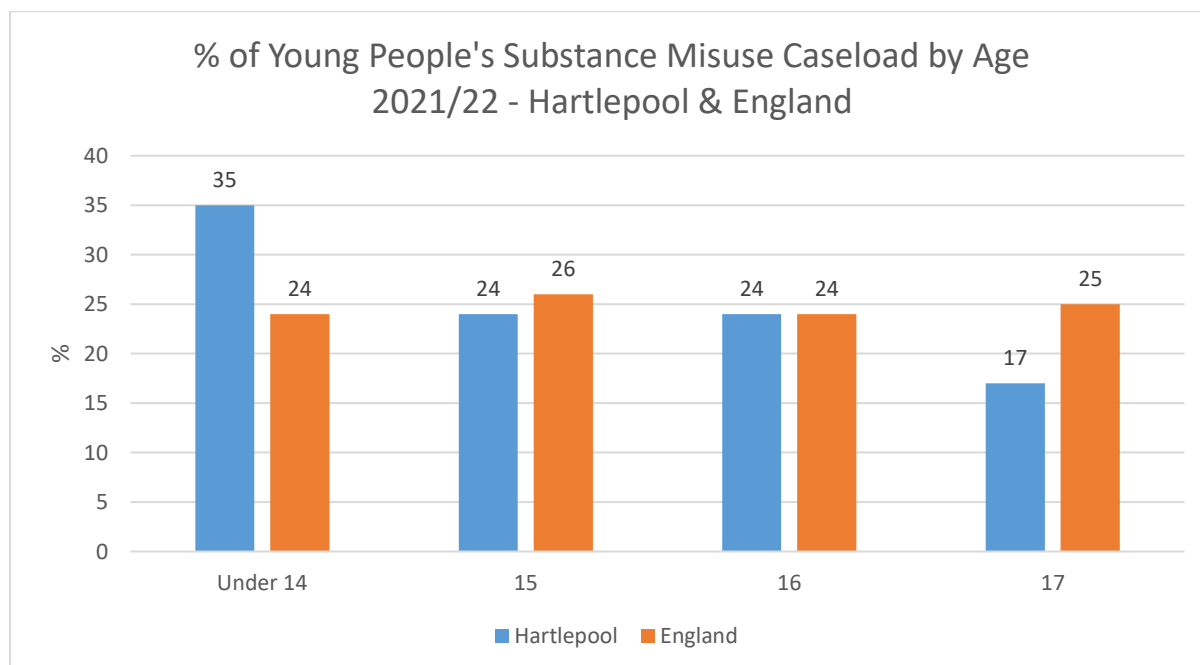


Figure 29: Percentage of Young People's Substance Misuse Caseload by Age 2021/22 - Hartlepool & England  
Source: NDTMS 2022

Here the increased emphasis on the younger age groups in Hartlepool's caseload is clearly visible.

## Hartlepool Young People's Substance Misuse Referrals 2011/21

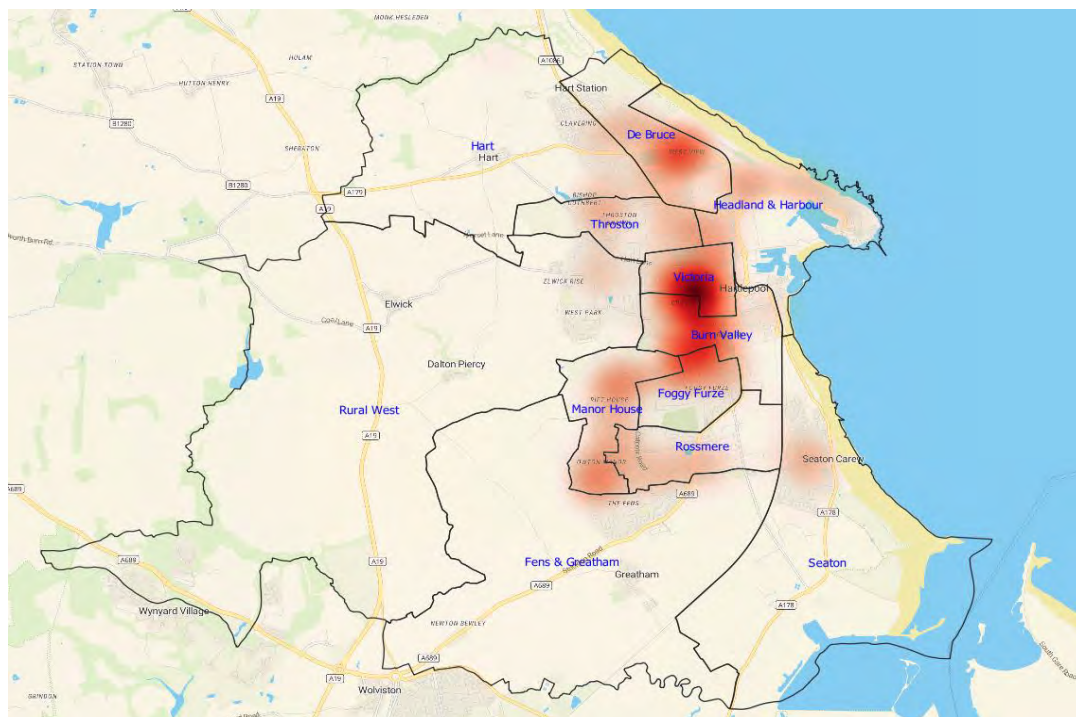


Figure 30: Hartlepool Young People's Substance Misuse Referrals 2011/21  
Source: Local Data 2022

Similar to the adult's referrals, referrals for Hartlepool's young people's substance misuse treatment services from 2011-2021 have their largest concentration in the Victoria and Burn Valley area of the town, though as a proportion of all referrals Manor House is larger than Burn Valley. Victoria ward accounts for 1 in 7 of the total referrals. And the five wards with 10% or more, Victoria, Manor House, Burn Valley, De Bruce and Headland & Harbour account for almost two thirds between them. Four of these five wards (Victoria, Manor House, De Bruce and Headland & Harbour) are in the most deprived decile in England, and the other, Burn Valley is in the 2<sup>nd</sup> most deprived quintile.



### Reported Substances:

In young people's substance misuse treatment in Hartlepool, cannabis has remained the most prominent substance, with as much as 98% of the caseload using cannabis.

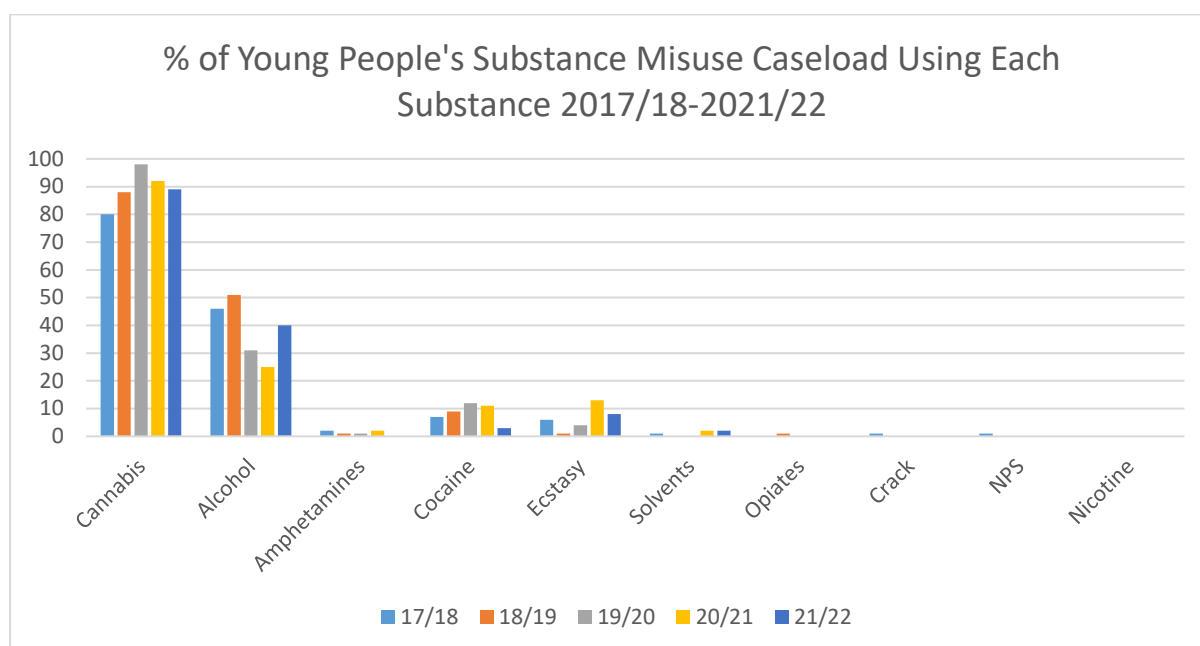


Figure 31: Percentage of Young People's Substance Misuse Caseload Using Each Substance 2017/18-2021/22  
Source: NDTMS 2022

Alcohol is the only other substance to have a proportion above 15%, but has moved from a high of 51% in 2018/19 to a low of 25% in 2020/21. In 2021/22 alcohol was being used by 40% of Hartlepool's young people's caseload. Other than cannabis and alcohol, the only substance to reach above 2% of the caseload are cocaine and ecstasy.

When compared to the England average, Hartlepool's young people's caseload use of cannabis is comparable.

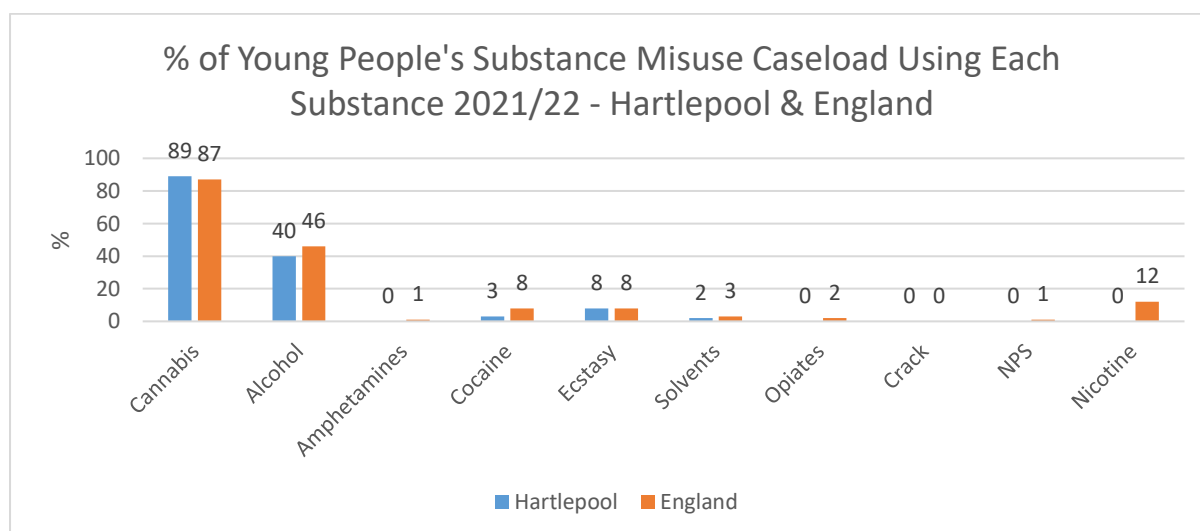


Figure 32: Percentage of Young People's Substance Misuse Caseload Using Each Substance 2021/22 - Hartlepool & England  
Source: NDTMS 2022

### Treatment Exits:

Within young people's substance misuse services in Hartlepool, the proportion of unplanned exits has been above the England average for the last three years, with unplanned exits being the majority of exits in 2020/21.

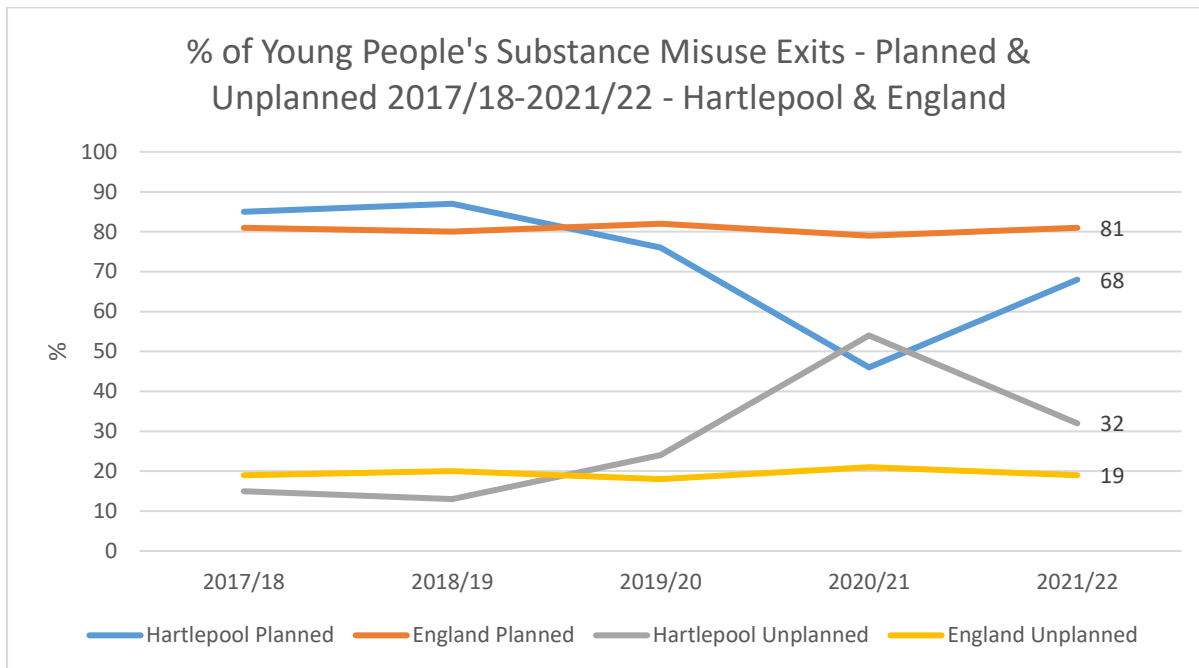


Figure 33: Percentage of Young People's Substance Misuse Exits - Planned & Unplanned 2017/18-2021/22 - Hartlepool & England  
Source: NDTMS 2022

Throughout the five year reporting period, the England rate has remained relatively stable, with rough 80% of exits planned and 20% unplanned. This has not been the case in Hartlepool, a two year increase in unplanned exits took the Hartlepool rate from 13% in 2018/19 to 54% in 2020/21.

Representations of successful completions within Hartlepool's young people's substance misuse service have been at least twice the England average on three of the last five years.

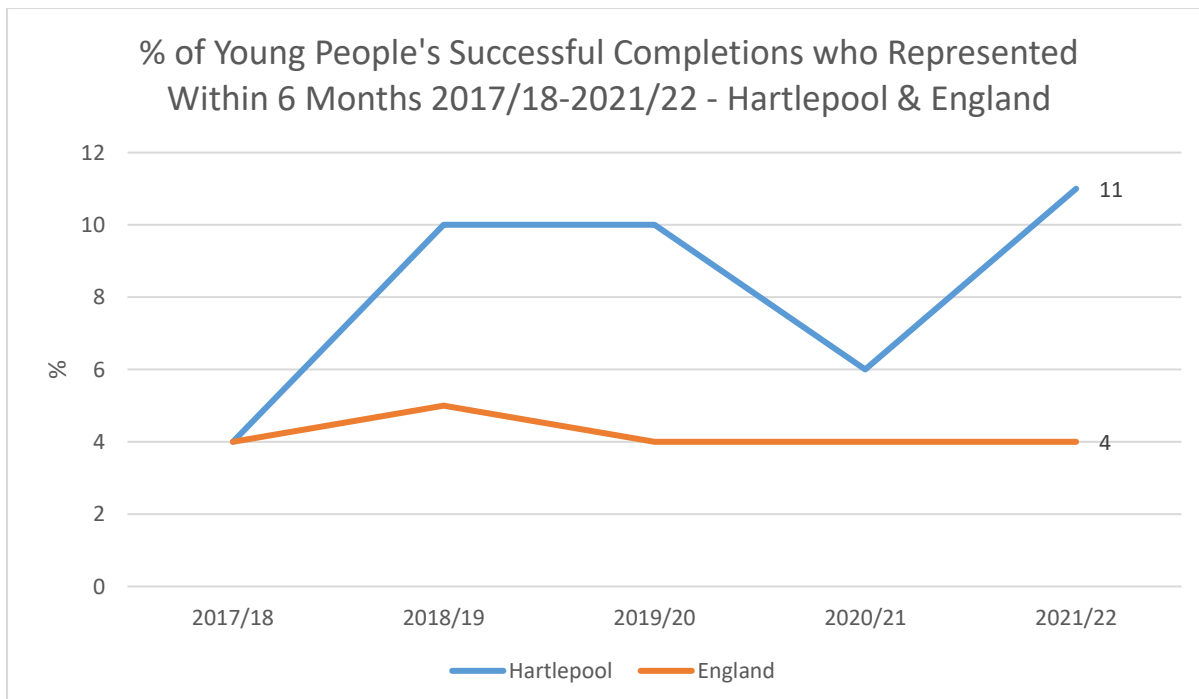


Figure 34: Percentage of Young People's Successful Completions who Represented Within 6 Months 2017/18-2021/22 - Hartlepool & England  
Source: NDTMS 2022

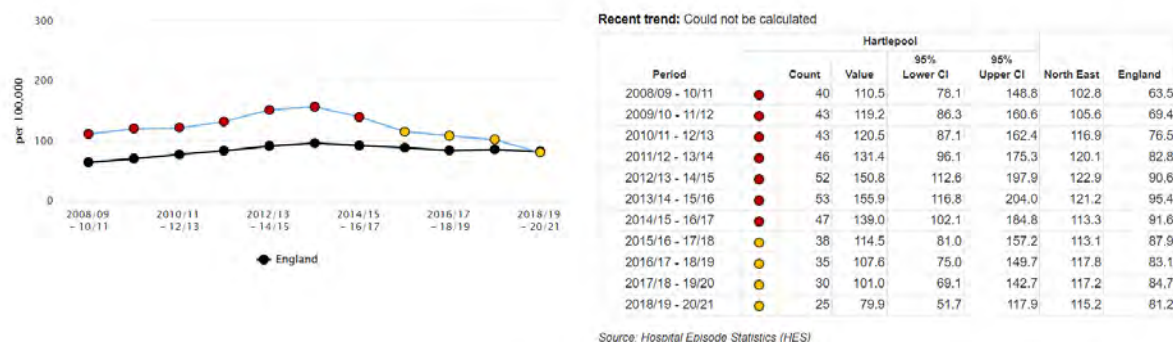
While the England representation rate has remained largely stable at around 4% across the five years, Hartlepool, whilst starting at the same 4% rate as England in 2017/18, increases up to a high of 11% in 2021/22.

### Hospital Admissions for Substance Use:

Hospitalisations due to substance misuse for 15-24 year olds in Hartlepool are at their lowest rate across the 11 year reporting period, therefore suggesting hospital admission rates are not drive by a younger population.

Hospital admissions due to substance misuse (15-24 years)

Directly standardised rate - per 100,000



Source: Hospital Episode Statistics (HES)

Figure 35: Hospital admissions due to substance misuse (15-24)

Source: Hospital Episode Statistics (HES) 2022

Hartlepool has been statistically similar to the England average for hospital admissions due to substance misuse for the most recent four years. Hartlepool's current rate of 79.9 per 100,000 population is a decrease of 49% on the peak of 155.9 per 100,000 in 2013/14-2015/16. Hartlepool's rate is currently the 2<sup>nd</sup> lowest in the north east.

### Hospital Admissions for Alcohol Use:

For under 18s, the hospital admission for alcohol specific reasons, has followed a very different pattern, with a sustained eight year period where the rate has been similar to the England average.

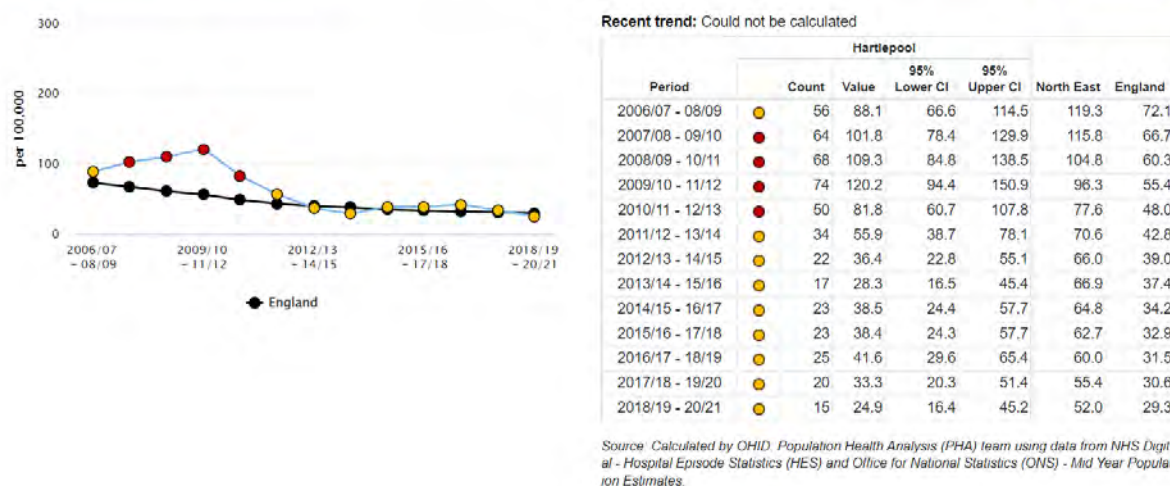
Admission episodes for alcohol-specific conditions - Under 18s (Persons)

Crude rate - per 100,000

[Show confidence intervals](#)

[Show 99.8% CI values](#)

[More options](#)

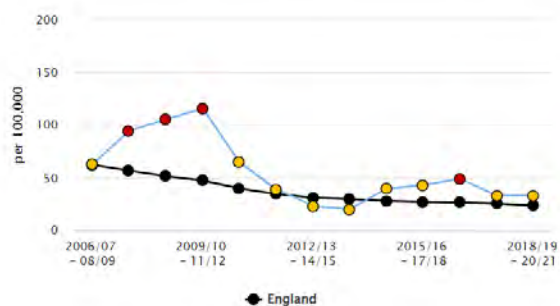


Source: Calculated by OHID Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Figure 36: Admission episodes for alcohol-specific conditions - under 18s

Source: OHID 2022

When split along gender lines, whereas for the adult population it is the male rate that followed a similar pattern to the overall rate, with under 18s it is the female rate which is similar to the overall pattern.



Recent trend: Could not be calculated

Period	Count	Value	Hartlepool		North East	England
			95% Lower CI	95% Upper CI		
2006/07 - 08/09	20	62.2	38.0	96.0	103.0	62.0
2007/08 - 09/10	30	94.2	63.6	134.5	99.4	56.5
2008/09 - 10/11	33	104.8	72.1	147.1	91.9	51.3
2009/10 - 11/12	36	115.3	80.8	159.7	85.4	47.0
2010/11 - 12/13	20	64.4	39.3	99.4	68.2	39.6
2011/12 - 13/14	12	38.7	20.0	67.6	59.4	34.2
2012/13 - 14/15	7	22.7	9.1	46.7	56.2	30.5
2013/14 - 15/16	6	19.6	7.2	42.6	57.8	29.4
2014/15 - 16/17	12	39.3	20.3	68.7	60.0	27.4
2015/16 - 17/18	13	42.5	22.6	72.8	56.1	26.4
2016/17 - 18/19	15	48.9	29.8	84.7	52.2	25.9
2017/18 - 19/20	10	32.6	20.2	68.2	47.1	24.9
2018/19 - 20/21	10	32.5	17.8	63.9	42.7	22.8

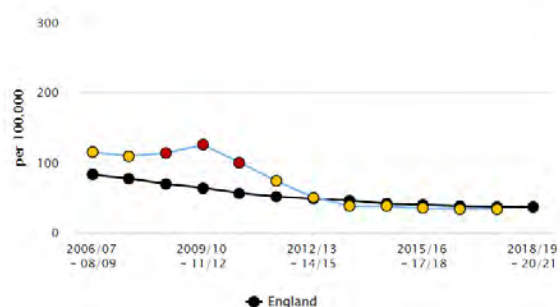
Source: Calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Figure 37: Admission episodes for alcohol-specific conditions - under 18s (Male)

Source: OHID 2022

## Admission episodes for alcohol-specific conditions - Under 18s (Female)

Crude rate - per 100,000



Recent trend: Could not be calculated

Period	Count	Value	Hartlepool		North East	England
			95% Lower CI	95% Upper CI		
2006/07 - 08/09	36	114.8	80.4	158.9	136.4	82.7
2007/08 - 09/10	34	109.5	75.8	153.0	133.0	77.5
2008/09 - 10/11	35	113.8	79.3	158.3	118.4	69.7
2009/10 - 11/12	38	125.2	88.6	171.8	107.9	64.1
2010/11 - 12/13	30	99.8	67.3	142.4	87.5	56.8
2011/12 - 13/14	22	73.8	46.2	111.7	82.4	51.8
2012/13 - 14/15	15	50.7	28.4	83.6	76.3	48.0
2013/14 - 15/16	11	37.5	18.7	67.1	76.5	45.8
2014/15 - 16/17	11	37.6	18.8	67.3	70.0	41.3
2015/16 - 17/18	10	34.1	16.3	62.8	69.6	39.6
2016/17 - 18/19	10	34.1	18.7	67.1	68.2	37.5
2017/18 - 19/20	10	34.0	11.8	53.6	64.1	36.7
2018/19 - 20/21	-	-	-	-	61.9	36.1

Source: Calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Figure 38: Admission episodes for alcohol-specific conditions - under 18s (Female)

Source: OHID 2022

### 5.3 Estimated Unmet Need

Within the substance misusing population in Hartlepool, levels of unmet need differ greatly by substance.

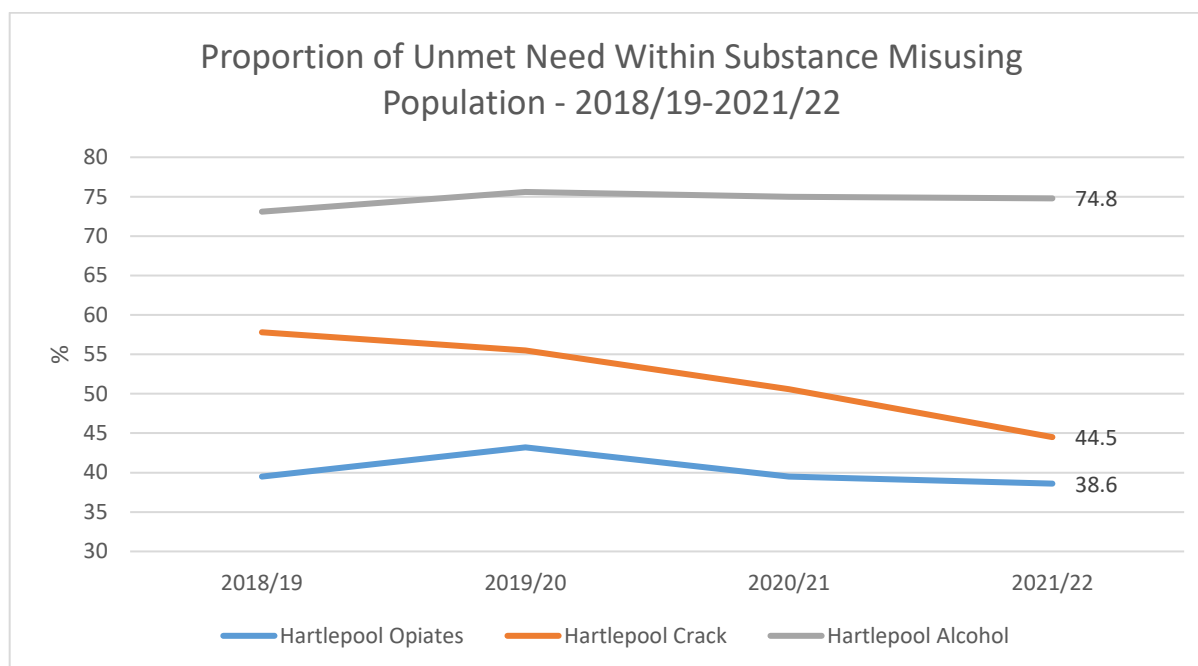


Figure 39: Proportion of Unmet Need within Substance Misusing Population - 2018/19-2021/22

Source: NDTMS 2022

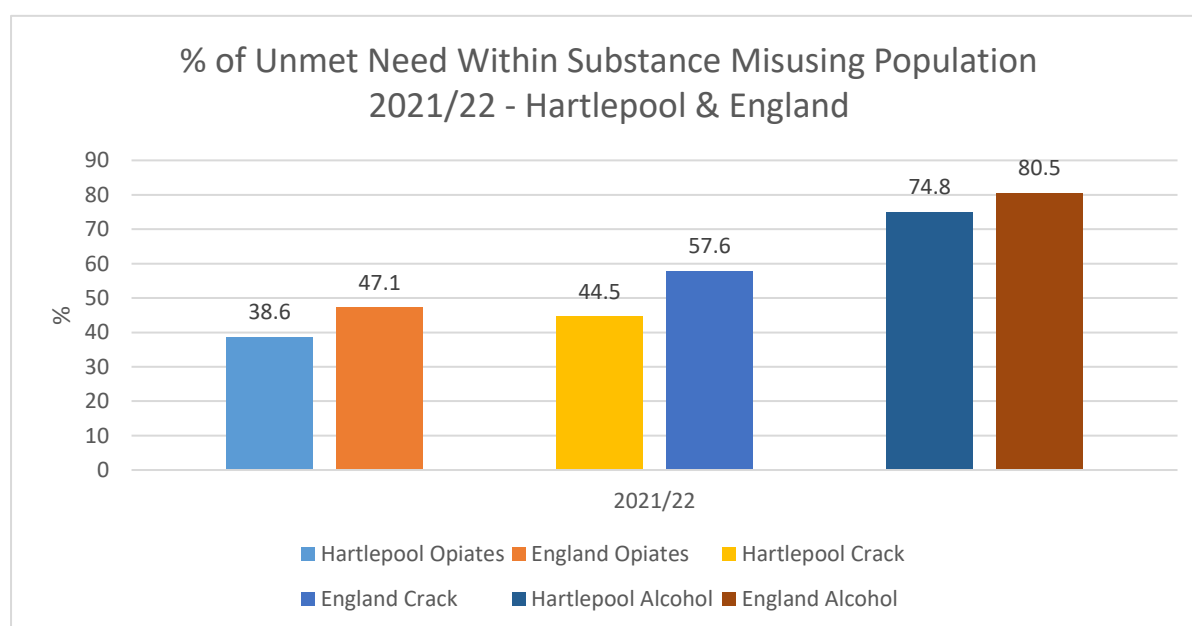


Figure 40: Percentage of Unmet Need Within Substance Misusing Population 2021/22 - Hartlepool & England

Source: Liverpool John Moores University

Drug and alcohol prevalence estimates for each local authority in England were set from 2016/17 data by Liverpool John Moores University. These prevalence estimates are then used to see the level of unmet need, which is the individuals who could be in treatment for substance misuse within an authority but are not. Within Hartlepool the level of unmet need for alcohol use has remained fairly stable at around 75%, three out of four problematic alcohol users are not in treatment. Similarly the unmet need for opiate use has remained largely around 2 in 5 opiate users not being in treatment. From crack use however, the unmet has fallen across the reporting period from 57.8% in 2.18/19 to 44.5% in 2021/22, a decline of 23%.

## 5.4 Wider Drug and Alcohol Related Harms

### *Multiple Deprivation and Local Inequalities:*

Hartlepool's wider levels of deprivation are a factor within substance misuse, with Hartlepool having some of the most deprived areas in England.

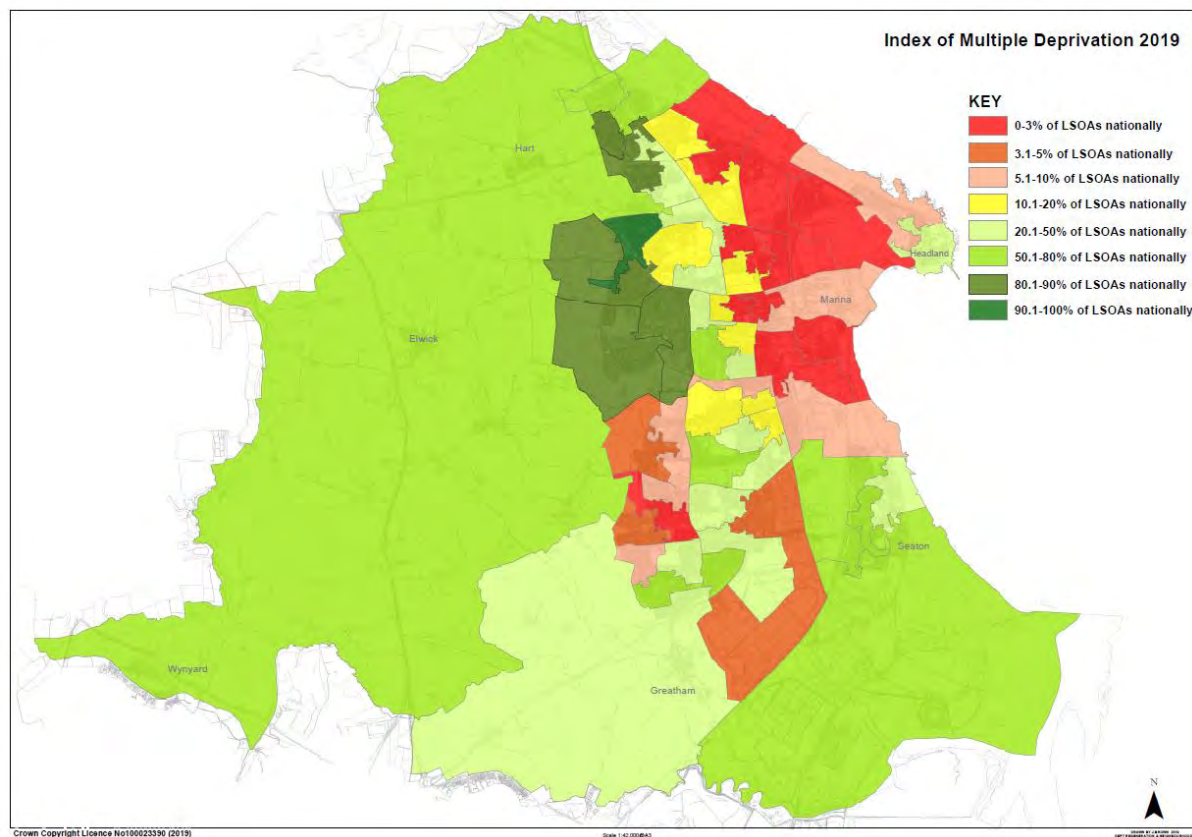


Figure 41: Index of multiple deprivation 2019  
Source: ONS 2019

Hartlepool has 11 Lower Super Output Areas (LSOAs) within the top 3% of deprivation levels in England, and a further three LSOAs within the top 5%. This accounts for 19% of the town within the top 3% of deprivation levels in England, mainly focussed around the Headland and West View area of the town. More than half of the town, 52%, is within the most deprived quintile in England. Several of these areas of highest deprivation are areas where a significant proportion of the substance misuse caseload are located. Specifically those LSOAs located within the Headland and Burn Valley areas of the town.



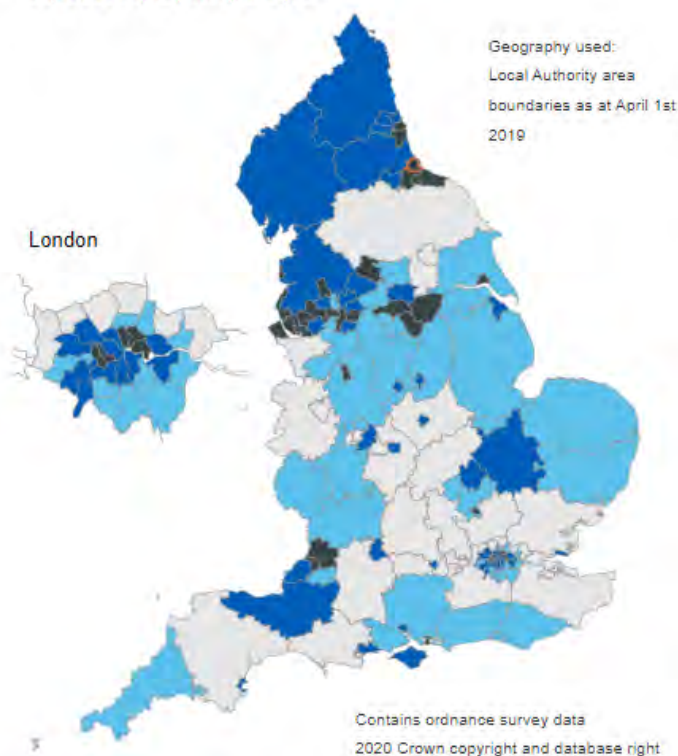
## Mental Health:

### Admissions where drug-related mental health and behavioural disorders were a factor *(hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders – referred)*

#### Admission rate (per 100,000 population) by Local Authority

**Map Key** Less than 120 120 to <170 170 to <260 260 and over

Map scales may vary from year to year.



#### Regional and national comparisons

Hartlepool	520	606
Admissions		Admissions per 100,000
North East	7,050	283
Admissions - Region		Admissions per 100,000 - Region
England	99,782	181
Admissions - National		Admissions per 100,000 - National

'Blank' indicates a value that has been suppressed (admissions value between 1 and 7)

#### Admissions per 100,000 population by year

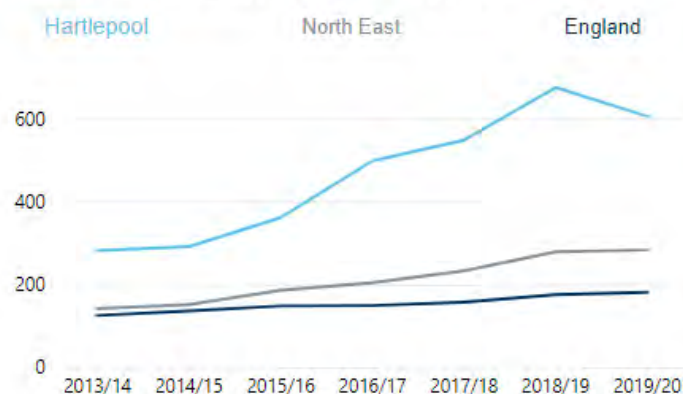


Figure 42 Admissions where drug-related mental health and behavioural disorders were a factor

Source: Hospital Episode Statistics (HES), NHS Digital

Hartlepool has the highest admission rate with 606 per 100,000 population, followed by Blackpool (569), and Liverpool (485) for hospital admissions where drug-related mental health and behavioural disorders were a factor. As per figure 42, Hartlepool is significantly higher than the North East, and England average.

The Five Year forward view for Mental Health report identified that 77% of people detained in low and medium secure mental health services are men, 63% have a primary diagnosis of psychosis, and 26% have a secondary diagnosis of substance misuse<sup>22</sup>

Hartlepool dual diagnosis patients are jointly managed between substance misuse and mental health treatment services through Teams daily huddle board and discussed on a regular basis to reflect any changes or concerns. This is then shared in a fortnightly Huddle with the substance misuse service provider (Supporting Treatment and Recovery Together (START)). In addition to this there is a minimum 12-week joint review throughout a patient's treatment, and also interim reviews as needed. There are currently 31 Dual diagnosis patients working jointly with TEWV and START.

## Physical Health:

Hartlepool has high levels of alcohol related liver disease mortality.

Under 75 mortality rate from alcoholic liver disease (Persons, 3 year range)

Directly standardised rate - per 100,000

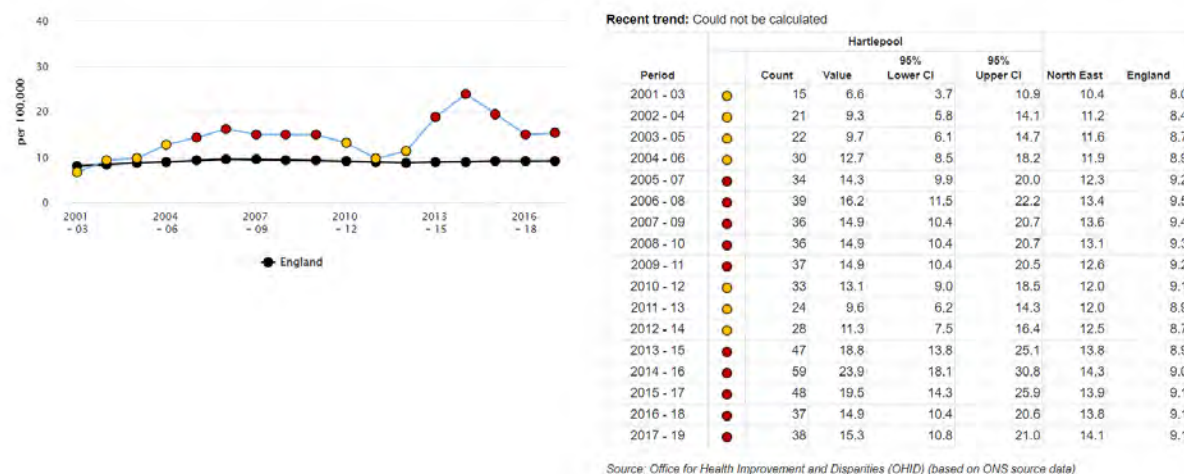


Figure 43: Under 75 mortality rate from alcohol liver disease

Source: OHID 2022

Hartlepool has the 18<sup>th</sup> highest alcohol related liver disease mortality rate in England, and has been consistently significantly worse than the England average for the last 6 years.

## Blood Borne Viruses (BBV):

Hartlepool is currently experiencing a declining trend for eligible substance misuse treatment clients who are offered and accept a hepatitis C test.

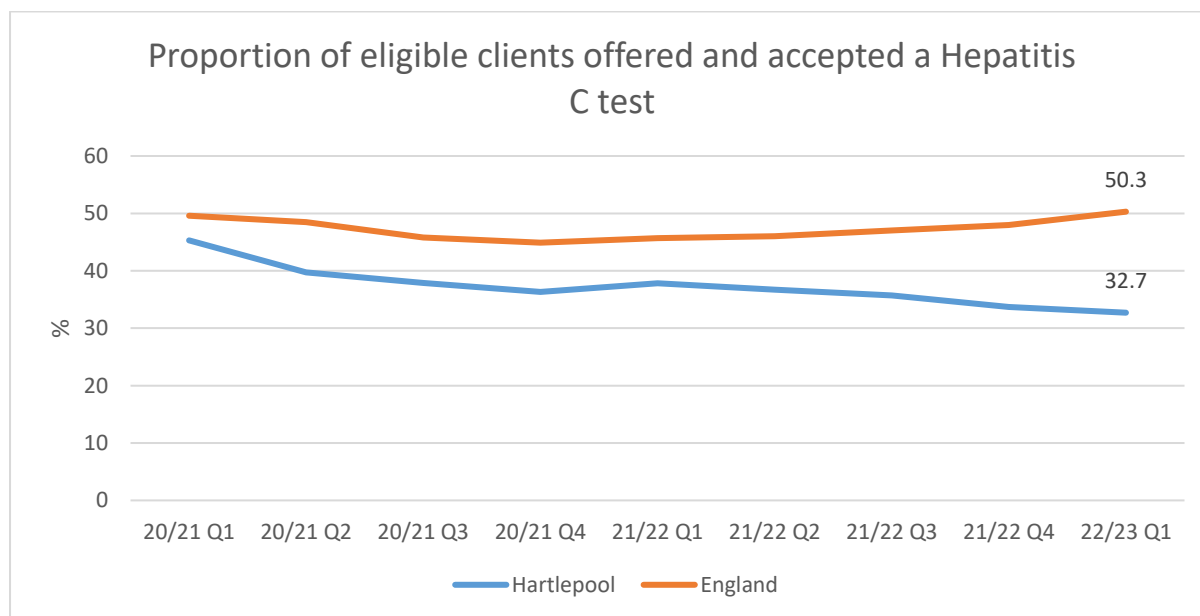


Figure 44: Proportion of eligible clients offered and accepted a Hepatitis C test

Source: OHID DOMES 2022

Across the nine quarters of the reporting period Hartlepool's proportion of eligible clients offered and accepting a hepatitis C test falls from a high of 45.3% in 2020/21 Q1 to a low of 32.7% in 2022/23 Q1. This is a decline of 28%. Across the same period the England average actually increases, from 49.6% to 50.3%. The gap between Hartlepool and England is larger in the most recent quarter than at any point in the preceding quarters.



For hepatitis B vaccinations, the proportion of those in substance misuse treatment in Hartlepool, who are eligible, and were offered and accepted has increased as a whole across the reporting period, but is on a declining trend.

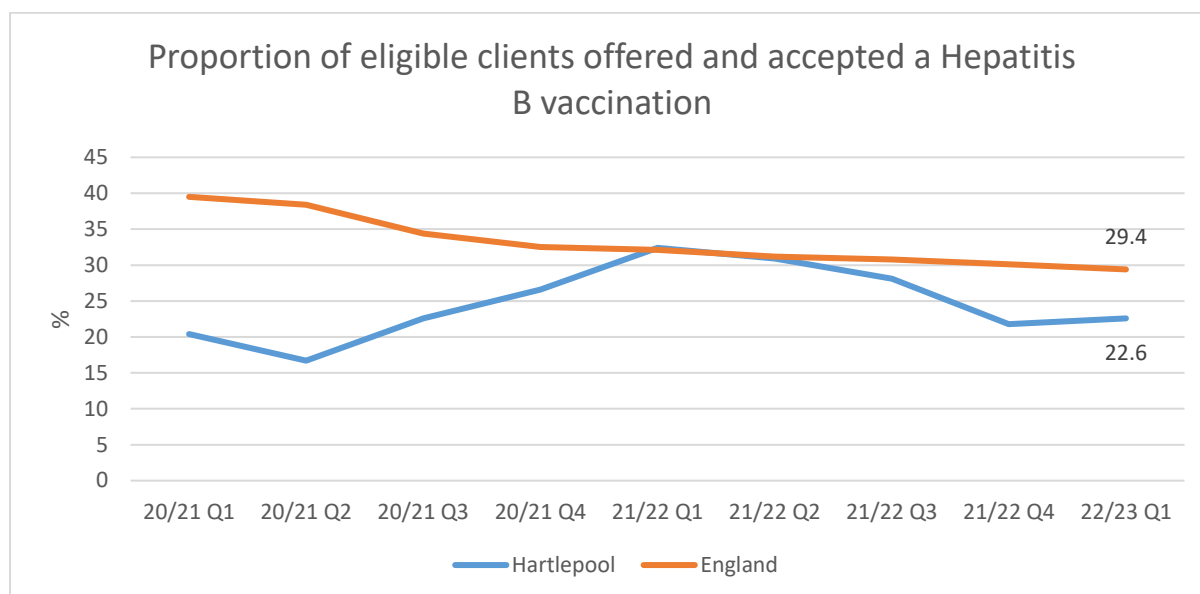


Figure 45: Proportion of eligible clients offered and accepted a Hepatitis B vaccination  
Source: OHID DOMES 2022

Hartlepool's proportion of eligible clients in substance misuse treatment who were offered and accepted a hepatitis vaccination increased from a low of 20.4% in 2020/21 Q1, up to a high of 32.4% in 2021/22 Q1, but has since fallen to 22.6% in 2022/23 Q1. This differs from the England pattern across the same period, which has seen a constant gradual decline, from 38.4% to 29.4%. The data shows that in any given year in the five year reporting period, no more than 55% of those who accepted Hepatitis B vaccinations actually began the vaccination programme.

### Crime and Safety:

People arrested for possession of drugs in Hartlepool over the last 12 months has remained static (0% change). However in the last six months, there was a rise of 12.0% compared with the same period in previous year.

	2018	2019	2020	2021	2022
Number of arrests for possession of drugs	195	238	296	267	267

Table 1: Number of arrests for possession of drugs in Hartlepool 2018-22  
Source: Office of the Police and Crime Commissioner for Cleveland

Between June and November 2022, 15 individuals from Hartlepool were drug tested on arrest, due to trigger offences, for cocaine and opiates. Of those committing the trigger offences during this period, cocaine was detected 73.3% of the time, and opiates 20% of the time. Each time opiates were detected they were in conjunction with cocaine, no test during this period returned a positive opiate result without also returning a positive cocaine result. 20% of people were negative for both cocaine and opiates, and 6.7% of people refused to be tested. Those tested were predominantly male, 80%, all were White British, and two thirds were in their 30s.

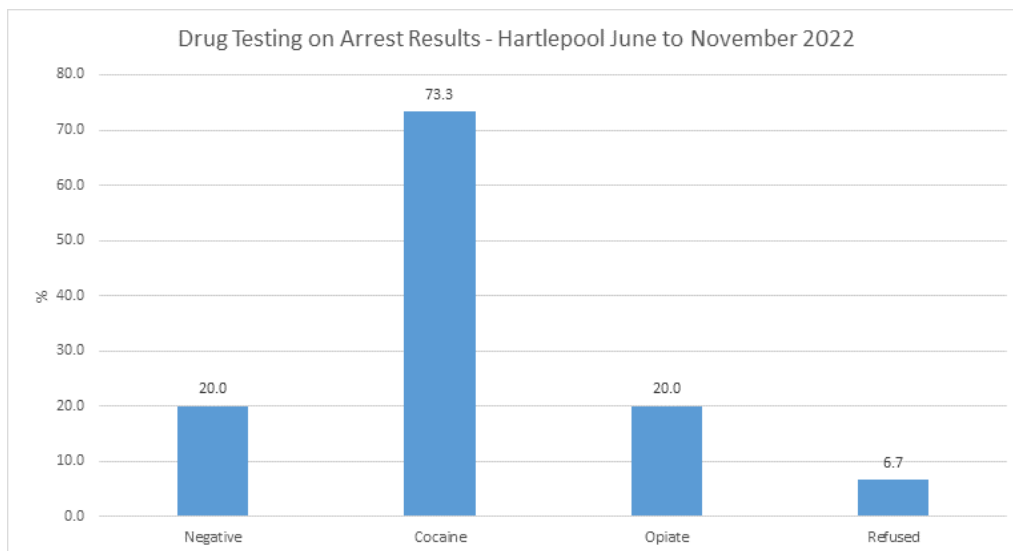


Figure 46 Drug testing on arrest results - Hartlepool (June-November 2022)  
Source: Cleveland Police 2022

Using police data, a ward level breakdown has been possible for incidents of violence against the person, domestic violence incidents and public safety and welfare incidents, where drugs or alcohol was cited from 2017-21.

### Ward Level Breakdown of Incidents of Violence against the Person Where Drug or Alcohol Were Cited 2017-21 – per 100,000

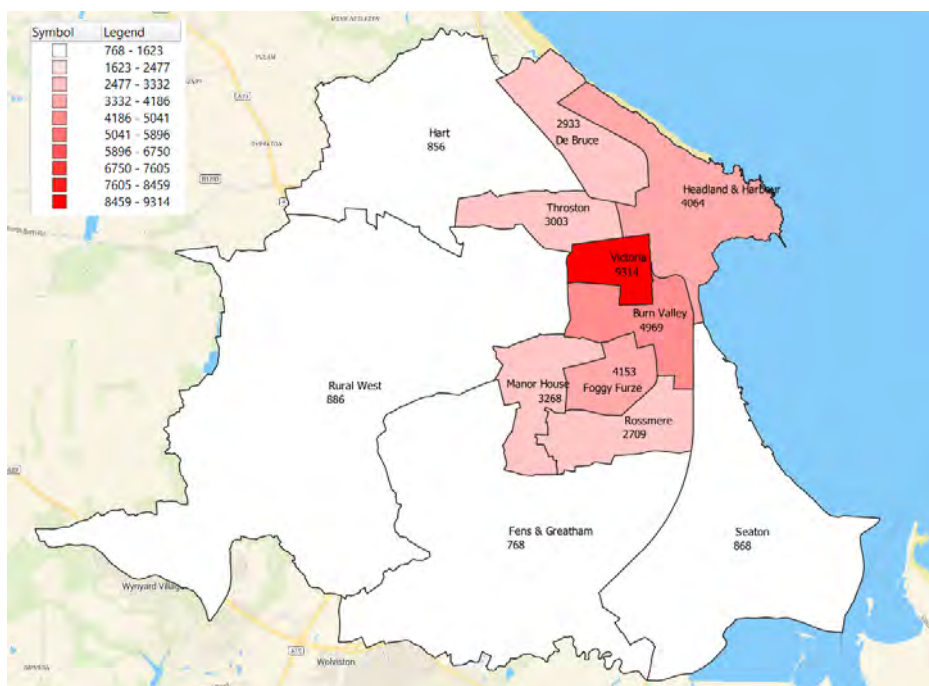


Figure 47: Ward Level Breakdown of Incidents of Violence against the Person Where Drug or Alcohol Were Cited 2017-21 – per 100,000  
Source: Cleveland Police Data 2022

## Ward Level Breakdown of Incidents of Domestic Violence Where Drug or Alcohol Were Cited 2017-21 – Per 100,000

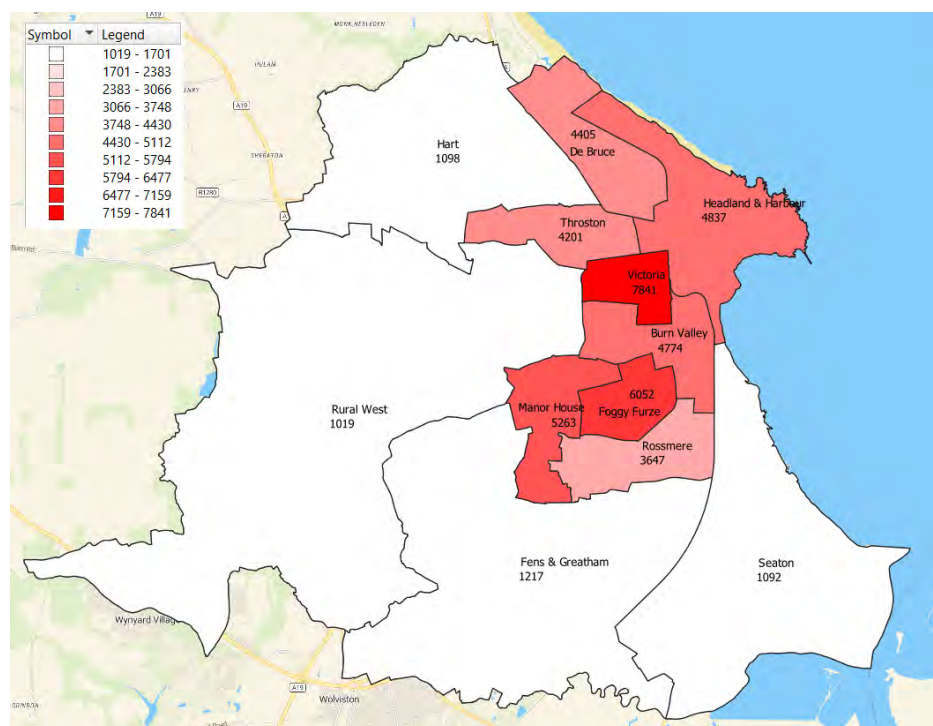


Figure 48: Ward Level Breakdown of Incidents of Domestic Violence Where Drug or Alcohol Were Cited 2017-21 – Per 100,000  
Source: Cleveland Police Data 2022

## Ward Level Breakdown of Incidents of Public Safety & Welfare Where Drug or Alcohol Were Cited 2017-21 – Per 100,000

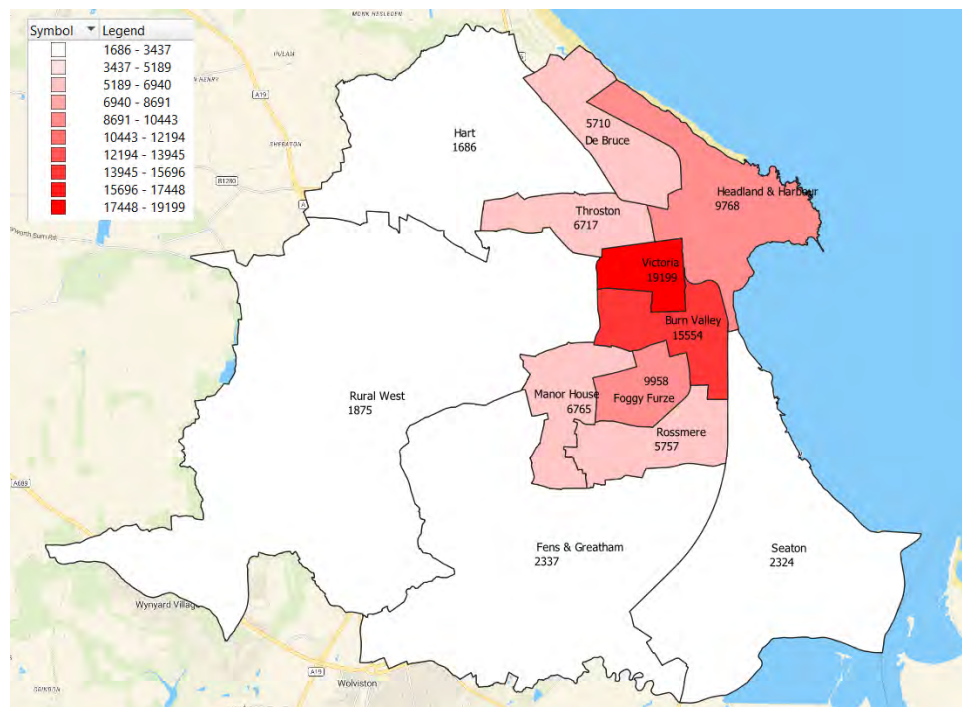


Figure 49: Ward Level Breakdown of Incidents of Public Safety & Welfare Where Drug or Alcohol Were Cited 2017-21 – Per 100,000  
Source: Cleveland Police Data 2022

In each of the three maps, Victoria ward is an area of high concentration of incidents where drugs or alcohol has been cited as an issue.

### Prison Release Support:

One access metric where Hartlepool is performing better than the England average is treatment continuity when people leave prison (see table 1). 59% of Tees residents leaving prison with a need for substance misuse services successfully engage with community treatment services (compared to 37% in England).

	Tees	England	Hartlepool	Middlesbrough	Redcar and Cleveland	Stockton
% of prison releases successfully engaging with substance misuse services	59%	37%	71%	56%	65%	50%

Table 2: Proportion of Tees residents leaving prison with a need for substance misuse services who successfully engage with community treatment services during Quarter 1 of 2022/23 (%).

### Road Traffic Accidents:

The proportion of alcohol related road traffic collisions in Hartlepool is similar to the rest of Tees. Hartlepool is not an outlier within its geographic neighbours.

Volume and Proportion.	Local Policing area	2017	2018	2019	2020	2021
Volume of RTC (TR2/3/4) with Alcohol flag	Hartlepool	19	19	27	15	22
	Middlesbrough	24	32	26	19	36
	Redcar & Cleveland	33	28	37	20	39
	Stockton	36	36	51	26	43
Proportion of RTC (TR2/3/4) with Alcohol flag	Hartlepool	2%	2%	3%	2%	3%
	Middlesbrough	1%	2%	2%	2%	3%
	Redcar & Cleveland	2%	2%	3%	2%	4%
	Stockton	1%	2%	3%	2%	3%

Figure 50: Number of Road Traffic collisions with Alcohol flag in Hartlepool

Source: Cleveland Police 2022

### Safeguarding:

Within adult social care in Hartlepool, an estimated 8.2% of cases are drug or alcohol related, when this is applied to the adult social care caseload figures the number of drug or alcohol related cases can be estimated.

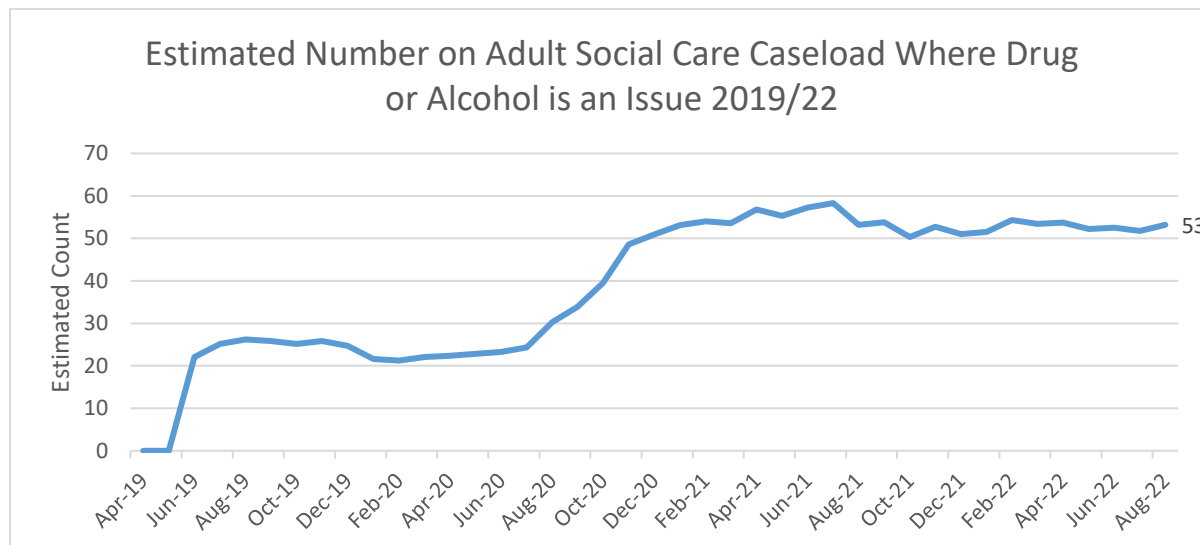


Figure 51: Estimated Number on Adult Social Care Caseload Where Drug or Alcohol is an Issue 2019/22

Source: Hartlepool Adult Social Care Team 2022

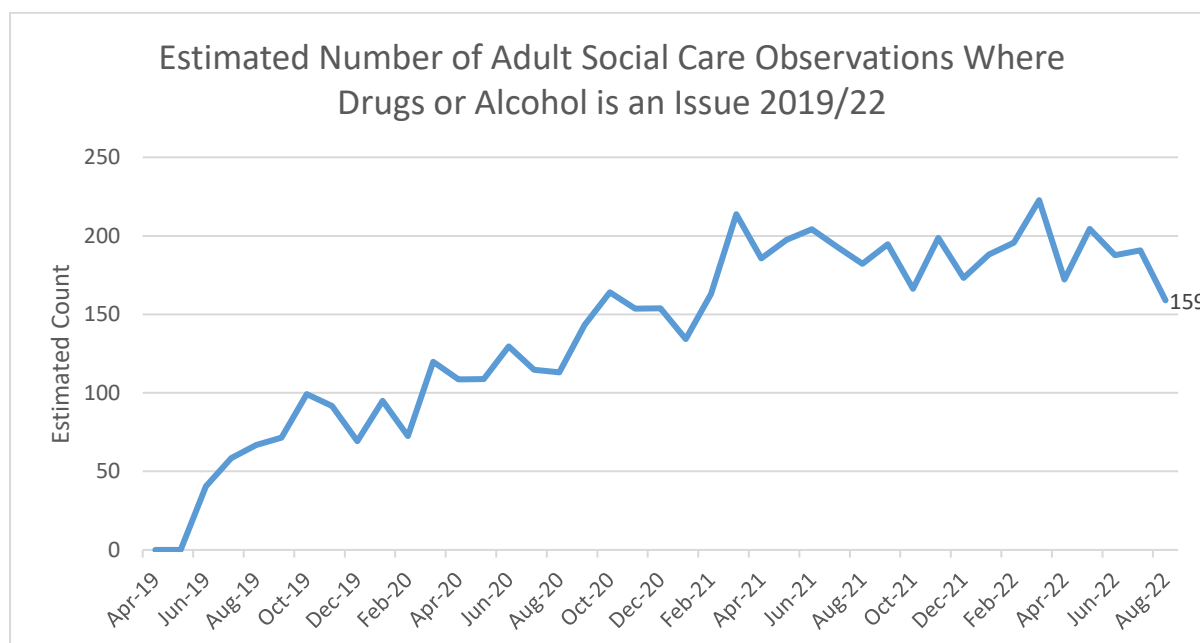


Figure 52: Estimated Number of Adult Social Care Observations Where Drugs or Alcohol is an Issue 2019/22

Source: Hartlepool Adult Social Care Team 2022

### Families:

The prevalence of adults with alcohol dependency who live with children in Hartlepool in 2019/20 was comparable to the England average for both the rate per 1,000 population and overall unmet treatment need. When unmet need is further broken down by gender, the unmet need for females in Hartlepool is 20% better than the England average.

Estimated number of adults with alcohol dependence living with children in **Hartlepool**, rates per 1,000 of the population and unmet treatment need.

Sex	Estimated number of alcohol dependent adults living with children (2018 to 2019)	Rate per 1,000 of the population		Number in treatment (2019 to 2020)	Unmet treatment need	
		Local	Benchmark		Local	Benchmark
Total	262	4	4	77	71%	79%
Male	178	5	6	39	78%	84%
Female	84	2	2	38	55%	68%

Figure 53: Estimated number of adults with alcohol dependence living with children in Hartlepool, rates per 1000 of the population and unmet treatment need.

Source: PHE 2020

For opiate dependency, the rate of prevalence amongst adults living with children in Hartlepool is also comparable to the England average.

Estimated number of adults with opiate dependence living with children in **Hartlepool**, rates per 1,000 of the population and unmet treatment need.

Sex	Estimated number of opiate dependent adults living with children (2014 to 2015)	Rate per 1,000 of the population		Number in treatment (2019 to 2020)	Unmet treatment need	
		Local	Benchmark		Local	Benchmark
Total	268	5	4	89	67%	54%
Male	175	6	5	46	74%	60%
Female	93	3	3	43	54%	41%

Figure 54: Estimated number of adults with opiate dependence living with children in Hartlepool, rates per 1000 of the population and unmet treatment need.

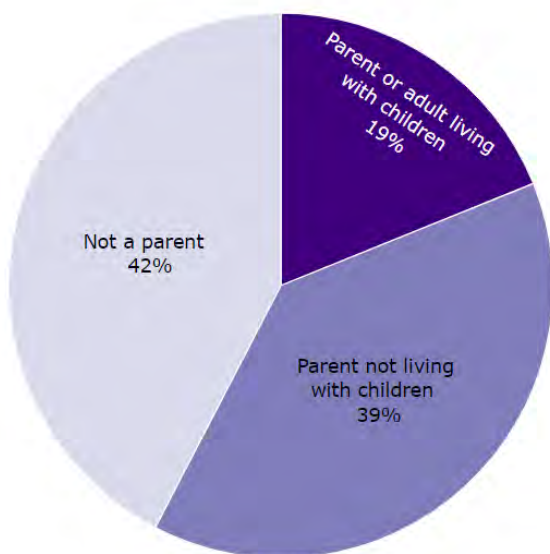
Source: PHE 2020

However Hartlepool's unmet treatment need for adults with opiate dependence who live with children is 24% larger than the England average, when this is broken down by gender, male unmet need is 23% larger and female unmet need is 32% larger.

Within treatment populations, the overall proportion of parents is similar in Hartlepool and England.



Breakdown of parental groups for new presentations to treatment in **Hartlepool** in 2019 to 2020.



Breakdown of parental groups for new presentations to treatment in **benchmark areas** in 2019 to 2020.

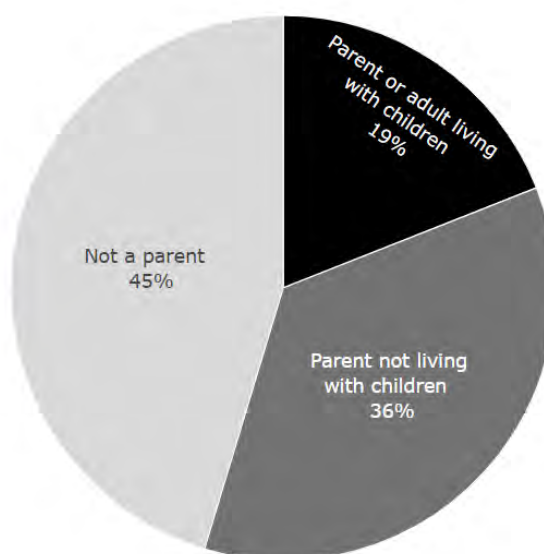


Figure 55: Breakdown of parental groups for new presentations to treatment in Hartlepool in 2019 to 2020 compared to benchmark areas  
Source: PHE 2020

For both Hartlepool and England 19% of the new presentations into treatment in 2019/20 were adults living with children, and a further 39% for Hartlepool and 36% for England were parents who did not live with children.

Within Hartlepool's treatment population who live with children in 2019/20, opiate use accounts for roughly 1 in 5 and is the smallest proportion of the three parental groups within opiate users.

Breakdown of substance groups for new presentations to treatment in **Hartlepool**.

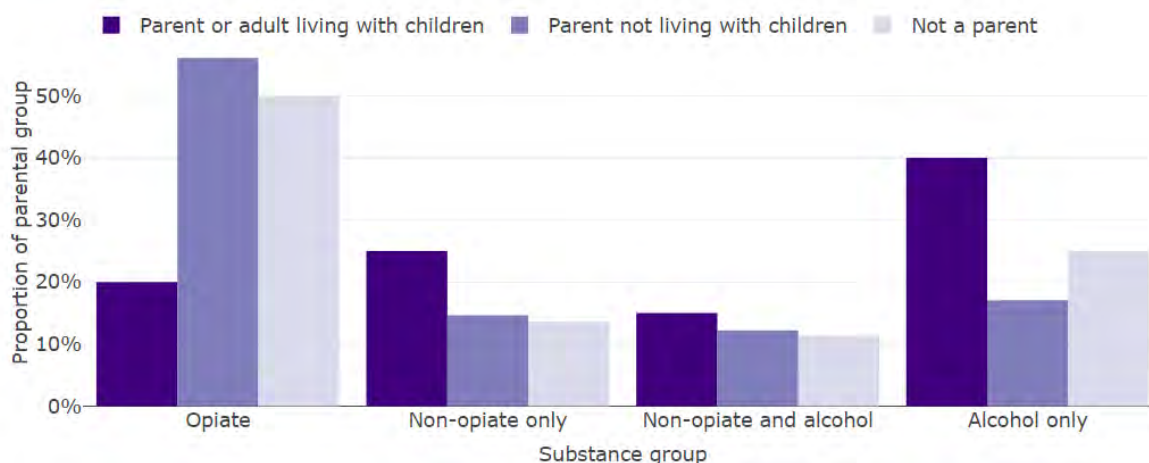


Figure 56: Breakdown of substance groups for new presentations to treatment in Hartlepool  
Source: PHE 2020

The proportion of adults who live with children who are opiate users within the treatment population in Hartlepool 2019/20 was less than half the size of the proportion of parents who don't live with children or those who are not a parent. However across the other three substance groups (non-opiate, non-opiate and alcohol and alcohol only), adults who live with children have a larger proportion of their total in each of them. For alcohol use the proportion for adults who live with children is at least 60% larger than for the other two parental groups.

Source: PHE 2020

### Homelessness:

In the period of 21/22 Q2 to 22/23 Q1 the proportion of homeless applications where drug or alcohol appear as a support need accounts for up to 1 in 5 applicants in a given quarter.

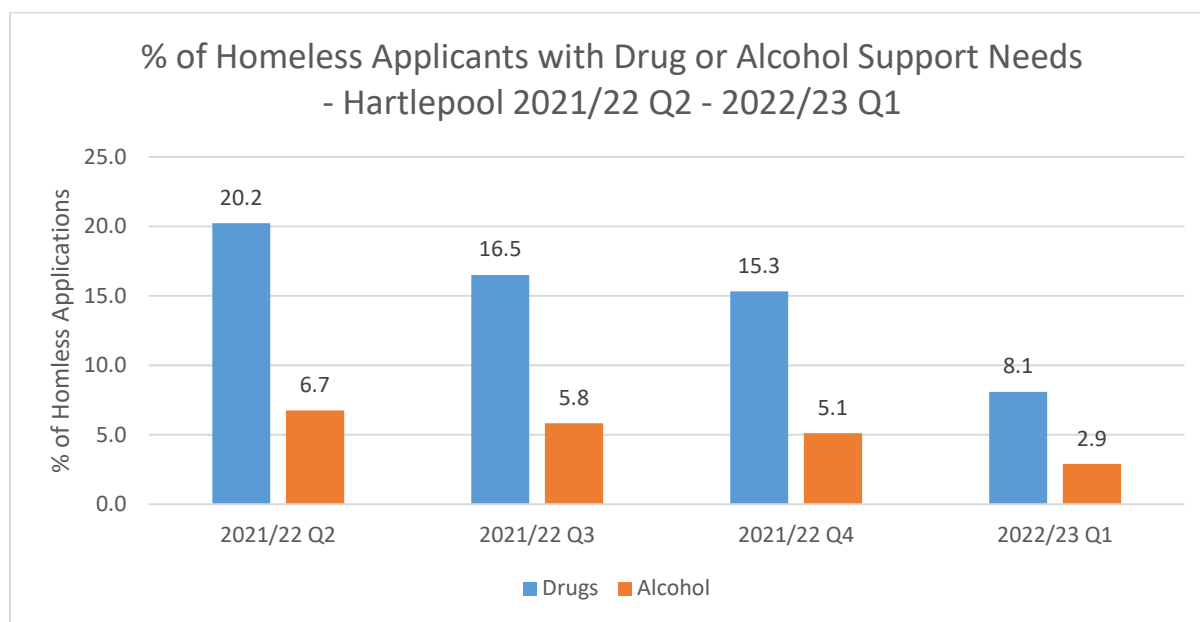


Figure 57: Percentage of Homeless Applicants with Drug or Alcohol Support Needs - Hartlepool 2021/22 Q2 - 2022/23 Q1  
Source: Local data 2022

For both drugs and alcohol the proportion of homeless applications where support was flagged as a requirement was highest in 2021/22 Q2. Both drugs and alcohol see a quarter on quarter reduction across the four quarters. Drugs has a 60% reduction, from 20.2% in 2021/22 Q2 to 8.1% 2022/23 Q1, and alcohol a 57% reduction, 6.7% to 2.9%.



## 6.0 Licencing and Trading Standards

Using data from Hartlepool Council's trading standards team, a map has been produced showing the concentrations of licensed premises across Hartlepool. This includes a mixture of on-license, off license premises and those having both an off and on license.

- Off license premises account for 38% of premises across Hartlepool that sell alcohol for consumption off the premises e.g. shops and convenience stores
- On license premises are those that provide drinking on site e.g. pubs and restaurants
- On/off license premises are those that provide on-site drinking and the option to buy alcohol to take off site e.g. pubs and restaurants

### Heat Map Showing Concentration of Licensed Premises in Hartlepool 2022

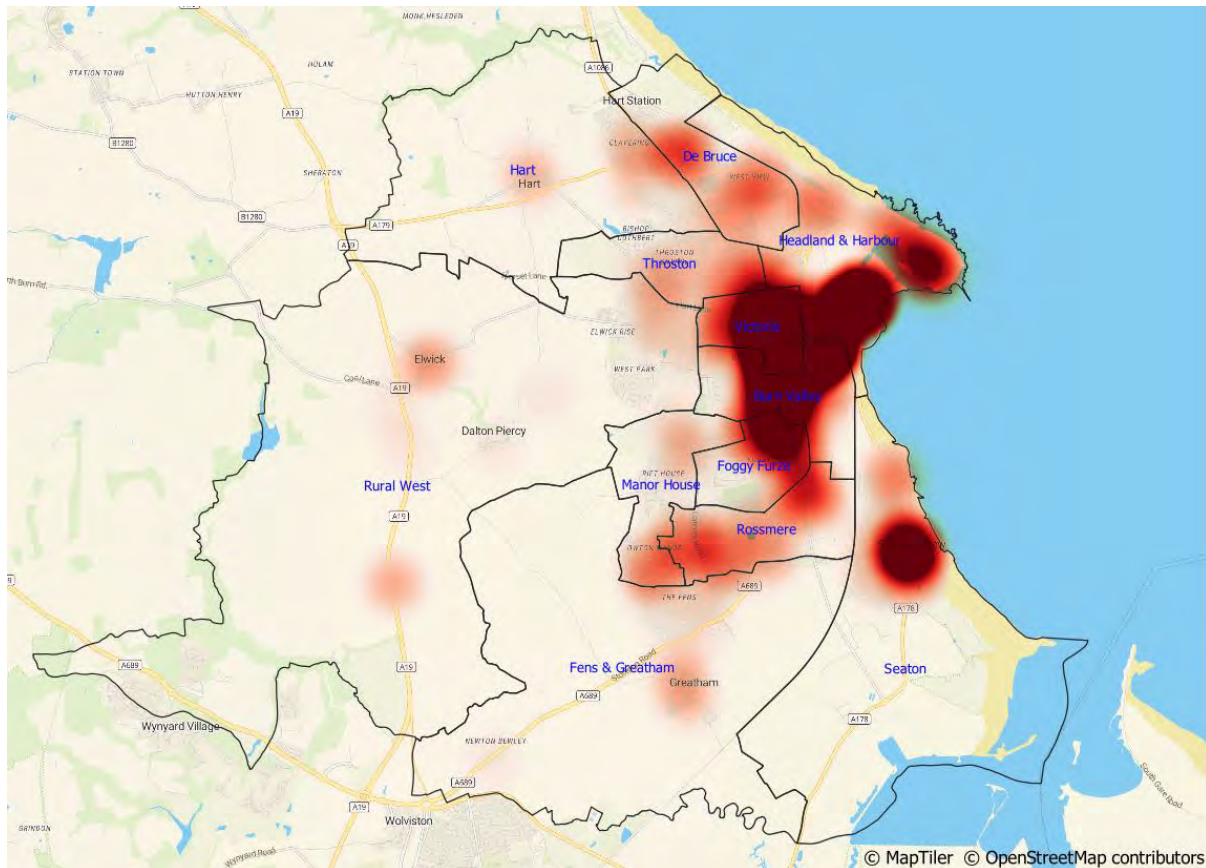


Figure 58: Heat Map Showing Concentration of Licensed Premises in Hartlepool 2022

Source: Hartlepool Trading Standards 2022

The area of highest concentration runs across the Victoria, Burn Valley and Headland & Harbour wards are in the most deprived decile in England and mirror treatment service referral numbers for both adults and children and young people. This area includes Hartlepool town centre, where a relatively large number of pubs and restaurants are located. There is also a high concentration in the north area of the Seaton ward.

## 7.0 Substance Use Services in Hartlepool

**START** (Supporting Treatment and Recovery Together) is a partnership between Hartlepool Borough Council and Foundations Health Care. START aim to support people with problems relating to drugs and/or alcohol, whether this is to reduce drug and alcohol intake, or stop completely. Needle exchange services are also offered to promote harm minimisation. This service is delivered by START and Boots Marina pharmacy.

*Appendix A and B START information leaflets.*

**HeadSTART** provides friendly and expert advice on drugs and alcohol to young people up to the age of 25. HeadSTART support young people to understand the affects/harm substance misuse has on the body and mind and the impact it can have on people around them.

For further information please see: [www.hartlepool.gov.uk/START](http://www.hartlepool.gov.uk/START)

*Appendix C HeadSTART information leaflet.*

### **Inpatient detoxification unit (IPU) and medically managed detoxification**

North Tees and Hartlepool Foundation Trust (NTHFT) are commissioned to provide a full time provision for a medically managed detoxification unit. This service is commissioned as a Tees Valley consortium and contract managed by Stockton Borough Council. Access to IPU is facilitated through specialist community service pathways to ensure appropriate assessment, stabilisation and multidisciplinary communication and planning.

### **SMART**

Self-Management and Recovery Training is a mutual aid group that runs once a week at the Central Community Hub (124 York Road, Hartlepool, TS26 9DE, 01429 272905). This group is open to anyone with any addiction, such as drugs, alcohol or gambling. Please see [Self-Help Addiction Recovery | UK Smart Recovery](#).

### **Breaking Free Online**

Breaking Free Online offers online support for drugs and alcohol. This is an online evidence-based digital behaviour change program that allows people to recognise and actively address the psychological and lifestyle issues that are driving their use of alcohol and/or drugs [Breaking Free Online | Recovery Program for Alcohol & Drugs](#).

## 8.0 Conclusions and Recommendations

**Prevention:** Early identification and prevention targeting specific higher risk groups, such as younger people and ex-offenders earlier by:

- Developing further insight into understand the changing trends in drug use and the role of recreational drug use in the population of Hartlepool and consider emerging evidence of ways to tackle this
- To Increase the awareness of the risks associated with drinking alcohol and promote positive behaviour change targeting known at risk groups
- Inclusion of actions relating to prevention of substance misuse related harms should be incorporated in a strategy and action plan with an annual delivery plan to ensure that actions are completed and progress made

**Treatment:** Use data, evidence, research and behavioural insight studies to better understand the needs of service users and their families specifically to:

- Advise commissioning and treatment services of potential gaps within service provision, data collection and quality
- Ensure appropriate, effective and timely access to support

- There are still significant numbers of unplanned exits from our services and deaths (from any cause) there requires a concerted effort for engagement with service users and partners to look at improvements (i.e. in addressing co-existing conditions and better supporting those with housing problems or other vulnerabilities).
- The data shows a significant proportion of successful completions has fallen for opiates similar to the England average which has also fallen and non-opiate users which has been significantly worse than the England average for the last seven years. Further work is needed to understand this trend and how this links to; average time in service data, unplanned exits and wider health needs.
- To understand the impact of drug and alcohol issues on the wider family specifically in relation to children of dependant alcohol/drug users.
  - What are the ongoing impacts for parents after planned exits, in terms of supporting them and their families?
  - Work with those services who work with families to identify unmet needs and look at opportunities to support people to access support for substance misuse and how treatment services and family services work together to support children living with a parent who uses substances

**Wider Health Needs:** Consider our long term strategic goals to improve drug and alcohol related physical and mental health conditions across all health provisions, not just treatment services.

- Develop the work within the community hubs and with partners to reemphasise 'Making Every Contact Count' so that people with co-existing physical and mental health conditions can access support, advice and information services easily.
- People with co-occurring substance misuse and mental health problems face additional barriers to access and take up of treatment and support, this requires further work to ensure there is closer multidisciplinary working to tackle it and the further development of case management systems that communicates effectively to reduce barriers to communication further.
- The data shows that the proportion of adults using alcohol are the highest proportion of people who live with children at least 60%. Further work is needed to understand the needs of children and the impact of parental alcohol misuse has on their health and wellbeing and particularly in relation in the context of Adverse Childhood Experiences (ACEs)
- It is likely that persons within this cohort are at greater risk, due to further issues such as homelessness, lack of access to health care and abuse. Efforts are required to establish how we respond to this. This will also aid our understanding of how co-existing conditions vary between and across groups and how vulnerabilities can be addressed.

**Enforcement and Crime and Disorder:** To work collaboratively with Tees Drugs Combatting Partnerships to reduce drug related crime

- It is recommended that a review of the current criminal justice pathways into substance misuse service is reviewed with partners
- Early alert systems are reviewed through the joint Tees Drug and Alcohol Related Death (DARD) process to ensure effective communication of risks are managed between partners
- To Strengthen the role of Public Health as a Responsible Authority through the alcohol licensing Standard Operating Procedure (SOP) and ensure the following are considered:
  - submit a representation against an application for a new or existing premises
  - negotiate conditions with an applicant
  - support or apply a review of a premises licence or club premises certificate where there are problems with one or more of the licensing objectives
  - help develop and review a cumulative impact assessment (CIA)
  - help to develop and review the SLP and have an important role in identifying and interpreting health data and evidence
  - build relationships with other RAs and support their representations by providing them with public health evidence

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## References

- <sup>1</sup><https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/drugmisuseinenglandandwales/yearendingmarch2020>
- <sup>2</sup><https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-alcohol/2020/part-1>
- <sup>3</sup><https://www.gov.uk/government/publications/alcohol-and-drug-prevention-treatment-and-recovery-why-invest#:~:text=The%20annual%20cost%20of%20drug,misuse%20to%20society%20are%20significant>
- <sup>4</sup><https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/drugmisusedeathsbylocalauthority>
- <sup>5</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1002627/Alcohol\\_and\\_COVID\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1002627/Alcohol_and_COVID_report.pdf)
- <sup>6</sup><https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-022-00601-z>
- <sup>7</sup><https://www.sciencedirect.com/science/article/abs/pii/S0376871621000582>
- <sup>8</sup><https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2732004/>
- <sup>9</sup><https://www.gov.uk/government/publications/review-of-drugs-phase-two-report>
- <sup>10</sup><https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>
- <sup>11</sup><https://www.longtermplan.nhs.uk/online-version/>
- <sup>12</sup><https://www.england.nhs.uk/mental-health/adults/cmhs/>
- <sup>13</sup><https://www.longtermplan.nhs.uk/wp-content/uploads/2019/07/nhs-mental-health-implementation-plan-2019-20-2023-24.pdf>
- <sup>14</sup><https://northeastnorthcumbria.nhs.uk/about-us/>
- <sup>15</sup>[PLAN - MASTER COPY \(pcc.police.uk\)](#)
- <sup>16</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1094636/North-East\\_HMPPS\\_Reducing-Reoffending-plan.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1094636/North-East_HMPPS_Reducing-Reoffending-plan.pdf)
- <sup>17</sup>[https://www.hartlepool.gov.uk/info/20015/social\\_care\\_and\\_health/685/joint\\_health\\_and\\_wellbeing\\_strategy](https://www.hartlepool.gov.uk/info/20015/social_care_and_health/685/joint_health_and_wellbeing_strategy)
- <sup>18</sup>[https://www.hartlepool.gov.uk/downloads/file/8507/director\\_of\\_public\\_health\\_annual\\_report\\_2022](https://www.hartlepool.gov.uk/downloads/file/8507/director_of_public_health_annual_report_2022)
- <sup>19</sup>[https://www.hartlepool.gov.uk/downloads/file/6941/council\\_plan\\_202122\\_-\\_202324](https://www.hartlepool.gov.uk/downloads/file/6941/council_plan_202122_-_202324)
- <sup>20</sup>[https://www.hartlepool.gov.uk/downloads/download/1588/homelessness\\_strategy\\_2021\\_-\\_2024](https://www.hartlepool.gov.uk/downloads/download/1588/homelessness_strategy_2021_-_2024)
- <sup>21</sup><https://www.ndtms.net/resources/public/Event%20and%20Training%20Documentation/CDS-Q/NDTMS%20SS%20Adult%20drug%20and%20alcohol%20treatment%20business%20definitions%20V7.1.pdf>
- <sup>22</sup><https://www.england.nhs.uk/wp-content/uploads/2017/03/fyfv-mh-one-year-on.pdf>



# POVERTY IMPACT ASSESSMENT

5.1

Appendix 3

<b>1. Is this decision a Budget &amp; Policy Framework or Key Decision? NO</b> <b>If YES please answer question 2 below</b>				
<b>2. Will there be an impact of the decision requested in respect of Child and Family Poverty? YES / NO</b> <b>If YES please complete the matrix below</b>				
GROUP	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
<b>Young working people aged 18 - 21</b>	x			The needs substance misuse needs assessment identified the numbers of young people accessing for substance misuse and also identified unmet needs in relation to this group. The strategy has set out priorities in relation to the needs of children and young people to increase numbers into treatment, education and prevention and also to support young people living with a parent who misuses substances.
<b>Those who are disabled or suffer from illness / mental illness</b>	x			The strategy specifically makes the link between mental illness and substance misuse (dual diagnosis) and has set out a specific priority in relation to supporting people who have a mental health/substance misuse need. Work has also commenced to identify the wider health needs of people who use substances and the barriers to accessing health care.
<b>Those with low educational attainment</b>			x	No directly however a proportion of the population as identified within the needs assessment will have low educational attainment
<b>Those who are unemployed</b>	x			The needs assessment has identified the proportion of people within substance misuse service currently unemployed. Work has commenced to support people into employment/volunteering opportunities earlier in their treatment journey
<b>Those who are underemployed</b>	x			As above
<b>Children born into families in poverty</b>			x	Although this strategy will no directly impact on this group, children born into poverty will be a group impacted by substance misuse. The needs assessment identified areas in Hartlepool linking deprivation to other factors like substance misuse.



## POVERTY IMPACT ASSESSMENT

### 5.1

#### Appendix 3

<b>Those who find difficulty in managing their finances</b>			x	Although this strategy will not impact directly on this group the START service will work with partners to support and individual to manage wider issues relating to financial difficulties
<b>Lone parents</b>			x	Not directly, but the substance misuse needs assessment identifies children and young people who currently live with a lone parent.
<b>Those from minority ethnic backgrounds</b>			x	Not directly however the needs assessment identifies the low numbers of minority ethnic groups accessing treatment services (although the population of minority ethnic groups in Hartlepool is also low)

## POVERTY IMPACT ASSESSMENT

## 5.1

## Appendix 3

**Poverty is measured in different ways. Will the policy / decision have an impact on child and family poverty and in what way?**

Poverty Measure (examples of poverty measures appended overleaf)	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
Life expectancy	x			Reducing the numbers of children and young people using substances will decrease the long term harms associated with the use of drugs and alcohol and also reduce the numbers of drug and alcohol related deaths
Overall impact of Policy / Decision				
POSITIVE IMPACT			ADJUST / CHANGE POLICY / SERVICE	
NO IMPACT / NO CHANGE			STOP / REMOVE POLICY / SERVICE	
ADVERSE IMPACT BUT CONTINUE				

Examples of Indicators that impact of Child and Family Poverty.	
<b>Economic</b>	
Children in Low Income Families (%)	
Children in Working Households (%)	
Overall employment rate (%)	
Proportion of young people who are NEET	
Adults with Learning difficulties in employment	
<b>Education</b>	
Free School meals attainment gap (key stage 2 and key stage 4)	
Gap in progression to higher education FSM / Non FSM	
Achievement gap between disadvantaged pupils and all pupils (key stage 2 and key stage 4)	
<b>Housing</b>	
Average time taken to process Housing Benefit / Council tax benefit claims	
Number of affordable homes built	
<b>Health</b>	
Prevalence of underweight children in reception year	
Prevalence of obese children in reception year	
Prevalence of underweight children in year 6	
Prevalence of obese children in reception year 6	
Life expectancy	

# Equality Impact Assessment Form

## 5.1 Appendix 4

Department	Division	Section	Owner/Officer	
Children and Joint Commissioning Services	Public Health		Craig Blundred	
Service, policy, practice being reviewed/changed or planned	Development of a Drug and Alcohol Strategy			
Why are you making the change?	Strategy being implemented to coordinate the work to reduce the harms associated with drug and alcohol misuse			
How might this impact (positively/negatively) on people who share protected characteristics?				
		Please tick	POSITIVELY	NEGATIVELY
<b>Age</b>			X	
The strategy is an all age strategy and has identified the needs of particular at risk groups including children and young people who use substances or are at greater risk due to parental substance misuse. Those with increased comorbidities associated with their long term substance misuse have also been identified as a priority area within the strategy				
<b>Disability</b>			X	
Many of the people who use substances have long term health issues supporting people with comorbidities has been identified as a priority within the strategy.				
<b>Gender Re-assignment</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				
<b>Race</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				
<b>Religion</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				
<b>Gender</b>			X	
From the needs assessment we have identified the proportion of women and men in treatment services and the strategy has identified particular at risk groups due to age/gender based on the data within the needs assessment.				
<b>Sexual Orientation</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				
<b>Marriage &amp; Civil Partnership</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				
<b>Pregnancy &amp; Maternity</b>			X	
This is not a group identified within the strategy however anyone who requires support in relation to substance misuse will be supported within the strategy				

<b>Has there been consultation /is consultation planned with people who will be affected by this policy? How has this affected your decision making?</b>		The development of the strategy has been developed following a consultation event and engagement with service users through the local recovery groups.	
<b>As a result of your decision how can you mitigate negative/maximise positive outcomes and foster good relationships?</b>		The draft strategy will inform the development of an action plan which will set out under each theme the detail of how we will deliver this priority area, who will deliver, timescales and be informed by indicators in order to measure success through an outcome framework. Governance of the strategy implementation will be through the Substance Misuse Strategy Group chaired by Public Health and will be a partnership approach.	
<b>Describe how you will address and monitor the impact</b>		<b>1. No Impact - No Major Change</b> <i>Please Detail</i>	
		<b>2. Adjust/Change Policy</b> <i>Please Detail</i>	
		<b>3. Adverse Impact but Continue as is</b> <i>Please Detail</i>	
		<b>4. Stop/Remove Policy/Proposal</b> <i>Please Detail</i>	
Initial Assessment	00/00/00	Reviewed	00/00/00
Completed	00/00/00	Published	00/00/00

# FINANCE AND POLICY COMMITTEE

3 JULY 2023



**Subject:** HOUSEHOLD SUPPORT FUND

**Report of:** Executive Director, Children and Joint Commissioning Services and Director of Finance, IT and Digital

**Decision Type:** Key decision tests (1) and (2) apply. Forward plan entry CJCS 134/23.

## 1. COUNCIL PLAN PRIORITY

<b>Hartlepool will be a place:</b>
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.

## 2. PURPOSE OF REPORT

- 2.1 To present to Finance and Policy Committee information on the delivery of phase three of the government's Household Support Fund (HSF) and proposals for delivery of a phase four scheme to support those in greatest need of assistance.

## 3. BACKGROUND

- 3.1 Since the 30 September 2021 the Government has made available a 'Household Support Fund' targeting vulnerable households to help them with food and essentials as the country recovered from the pandemic. Guidelines have varied on schemes with changes of focus from children (phase one) to children and pensioners (phase two), to children, pensioners and those unable to source help from elsewhere (phase three).

- 3.2 The table below indicates the three rounds of Household Support Fund received to date, the allocation streams agreed by Finance and Policy Committee and the estimated reach.

<b>HSF phase</b>	<b>Support stream</b>	<b>Value</b>	<b>Estimated numbers reached</b>
HSF 1 October 2021 to March 2022	Shopping vouchers for children aged 2 – 18 years in low income families (free school meals)	640,000	8,000
	Pensioners on a low income (LCTS)	85,000 (over agreed 50,000 budget by 35,000)	1,215
	Food via third party organisations	20,000	1,000
	Water	15,000	50
	Gas/ electricity/ energy	80,000	1,850
	Household essentials	90,000	1,100
	Housing support	60,000	40
	Admin	48,000	
HSF 2 April 2022 to September 2022	Shopping vouchers for children in low income families (free school meals)	480,000	c8000
	Pensioners on a low income (LCTS)	317,000	c4500

	Food via third party organisations	20,000	1,000
	Water	15,000	50
	Gas/ electricity/ energy	80,000	1850
	Household essentials	30,000	375
	Admin	48,000	
HSF 3 October 2022 to March 2023	Shopping vouchers for children in low income families (including free school meals)	465,341	7600
	Pensioners on a low income (LCTS)	212,180	4540
	Food via third party organisations	22,000	977
	Gas/ electricity/ water / warm hubs	173,000	1529
	Household essentials	55,500	236
	Housing	15,000	20
	Admin	48,000	

### 3.3 The latest HSF 2023/24 guidance document advises of the following:

‘The fund is intended to cover a wide range of low income households in need including families with children of all ages, pensioners, unpaid carers, care leavers and disabled people’.



In addition:

- There are no ring fences around how much of the grant should be allocated to particular cohorts of people;
- There must be an application process for at least part of the grant so that people can come forward and ask for help;
- Support with food, energy costs and household essentials linked to food and energy should be prioritised;
- Other wider essentials and in some exceptional cases housing costs support can be made available.

3.4 The latest HSF delivery scheme is for the period 01 April 2023 to 31 March 2024. Plans for delivery had to be submitted to government no later than the 17<sup>th</sup> May 2023 and an interim plan was submitted based on previous delivery processes and will be updated and shared with DWP once final agreement is confirmed with Members. The plan must be made publicly available including details of any application processes.

3.5 Eligible spend includes:

- Energy;
- Water;
- Food;
- Essentials linked to energy and water;
- Wider essentials related to cost of living;
- Housing Costs in cases of genuine emergency where existing housing support schemes do not meet this exceptional need;
- Advice services such as money management or debt advice;
- Reasonable administrative costs including costs incurred delivering the scheme.

Eligible spend does not include:

- Mortgage costs.

3.6 On 27<sup>th</sup> February 2023 the Council received formal notification of the arrangements for the administration of the latest HSF including final guidance. £1,986,043 grant is available for 12 months (as opposed to six months previously). This is in line with previous grant awards.

## 4. PROPOSALS/OPTIONS FOR CONSIDERATION

4.1 The HSF is aimed at alleviating the cost of living crisis. In Hartlepool we know that a significant number of households are and will continue to struggle financially. Residents tell us that they are particularly worried about the cost of food and fuel.

4.2 The latest data tells us that:

- 39% of our children live in poverty including approximately 5,600 entitled to Free School Meals for financial reasons. If we extend this to include 2 year olds through to up to 19 year olds in education or training this increases to approximately 8,000 children and young people;
- approximately 13,500 households benefit from the Local Council Tax Support Scheme (LCTS), an indicator of low income;
- Approximately 11,000 households are in receipt of Universal Credit which includes those who are working but on a low income and are therefore in need of support.

- 4.3 To date, the delivery methods chosen to deliver the previous HSF schemes have proven effective reaching adults and children on a low income. Support from Third Party Organisations (TPO) has been essential in helping the local authority in its delivery approach and reach.
- 4.4 Officers have met to explore the available options to maximise the impact of this grant to support vulnerable households in Hartlepool in accordance with the new grant conditions. This has included considering what support can be delivered through Local Council Tax Support, food vouchers, support through voluntary and community sector organisations and the current Welfare Support Scheme.
- 4.5 It should be noted that the administration of such a large grant poses significant challenges to the capacity and workload of the local authority and the Third Party Organisations that it works in partnership with. It is essential that a reasonable amount of the grant is used to support delivery of the scheme by the council together with costs to Third Party Organisations for their support.
- 4.6 Third Party Organisations have proved crucial in supporting the delivery of previous HSF grant schemes. Expressions of interest were therefore sought in March and April 2023 from organisations who may wish to deliver aspects of the HSF in conjunction with the local authority. Based on an Expression of Interest process, applications were reviewed on 25 April 2023. Ten applications were received. The following providers were identified as potential delivery partners with the capacity, resilience and infrastructure required to meet the DWP's HSF compliance requirements:
- Hartlepool Foodbank – food parcels;
  - Citizens Advice – energy and fuel top ups and payments;
  - Advice @ Hart – energy and fuel top ups / energy saving devices;
  - West View Advice and Resource Centre – household essentials linked to energy;
  - Kilnarnock Road Young People and Family Centre – food and energy top ups;
  - Hartlepool Carers – food, energy top ups and household essentials linked to energy;
  - Cleveland Fire and Rescue – food parcels alongside safe and warm services;

- The Big League CiC (Poolie Time Exchange) – household essentials linked to energy; and
- Anglian Water – not asked to submit an expression of interest as they are the only water board that covers the town.

4.7 Based on previous grant delivery experience, the latest Terms and Conditions of the grant and levels of need across the town, it is proposed that the grant is distributed by the following means:

Organisation/Scheme	Allocation - NB this is for the delivery period July 2023 to March 2024	Rationale
Support for families with dependent children aged up to 19 years (in education or training)	£912,000	To provide food vouchers over the 12 month grant period to the value of £120 to all children eligible for free school meals (financially vulnerable) aged 2 - 19. Based on previous grants this means approximately 46% of funding would be spent on children.
Support for pensioners in receipt of benefit (LCTS)	£544,800	To provide payments or food vouchers £120 to pensioners in receipt of LCTS. Based on previous grants this means approximately 27% of funding would be spent on pensioner households.
HSF application fund (delivered by the Welfare Support team) – aimed at those who can evidence they are struggling but unable to access other forms of support. This would help those above the Free School Meal threshold and those that are working but on a low income.	£84,000 NB this includes an allocation to cover those awards that have had to be made between April 1 <sup>st</sup> and June 30 <sup>th</sup> as the fund had to be open and all other awards that need to be made up to and including 31 <sup>st</sup> March 2024	The current Welfare Support Scheme is increased to enable the scheme to support applications for energy, food, household essentials and goods. These awards will be made based on personal circumstances and are not means tested. <i>An application process would apply.</i>

HSF application fund (delivered by the Housing Advice Team) for help with exceptional housing costs not already covered by other funding streams. This would help those on benefits and those working but on a low income.	£25,000	The Housing Advice Team would take applications from residents struggling with exceptional housing costs. This may include help to move to a more affordable property, help with rent arrears or an unexpected dip in income that has caused financial stress. <i>An application process would apply.</i>
Hartlepool Food Bank	£20,000	Food parcels/bags of shopping to be distributed to advice agencies in town as part of value added services. The grant would be used to buy food rather than use foodbank public donations.
Citizen's Advice Bureau	£90,000	To provide fuel vouchers and help paying energy bills; to provide energy household essentials. Both organizations' are able to access fuel bank vouchers that can be used for pre paid meter top ups and/ or can help those on direct debits or monthly bills. <i>An application process would apply with evidence of need required before support is provided.</i>
Advice at Hart	£128,000	
Anglian Water	£20,000	To provide assistance to households in debt and water poverty through the Anglian Water Assistance Fund.
Kilmarnock Rd Young People and Family Centre	£3,270	To provide food vouchers, help with energy top ups and small

		energy efficient household goods.
Hartlepool Carers	£7,600	To provide food vouchers, help with energy top ups and small energy efficient household goods.
The Big League CiC	£30,000	To provide household goods.
Cleveland Fire and Rescue	£12,000	To provide food parcels alongside their safe and warm services.
West View Advice and Resource Centre	£10,000	To provide household essentials that make cost of living more affordable. This would be in conjunction with their existing HBC commissioned debt and money advice service.
HBC and TPO Grant administration	£99,374	To cover the costs of the staffing, administration, printing, postage etc. associated with delivering the scheme for both HBC and Third Party Organisations.
<b>Total</b>	<b>Anticipated grant and spend - £1,986,043</b>	

4.8 Using this method of delivery this would mean that –

- 22% of the grant would be accessed via an application process where anyone struggling with the cost of living can apply
- 73% would be allocated to households in receipt of benefits and on a low income
- 5% of the grant would be used for administration and compliance of the fund including administration payments to voluntary and community sector organisations supporting the delivery of the grant.

4.9 Should it become clear that individual strands of support outlined in 4.7 above are not being fully utilised, it is proposed to give delegation to the Director, Children and Joint Commissioning Services, in conjunction with the chair of Finance and Policy Committee, to amend funding pots so as to ensure full utilisation of grant within the time period.

- 4.10 A small amount of funding was spent in the 2022/23 grant period to support the creation of Warm Hubs, this can be continued should committee decide this is appropriate with costs taken from the administration fees as proposed.

## 5. OTHER CONSIDERATIONS/IMPLICATIONS

<b>RISK IMPLICATIONS</b>	The Council is being asked to administer a Government grant for local people based on local need. Public expectations that the grant can fully alleviate the current cost of living crisis must be carefully managed. In addition administration of such a grant in short timescales creates risk for the Council in that officers have to mobilise resources quickly to develop the local scheme, eligibility criteria and implementation plan. There is a reputational risk to the Council if the scheme is not delivered effectively and efficiently and does not reach those most in need of support.
<b>FINANCIAL CONSIDERATIONS</b>	<p>The Council is being asked to administer the Household Support Fund Grant, valued at £1,986,043 for the period April 2023 to March 2024.</p> <p>The conditions of grant allows for reasonable administrative costs, including reasonable costs incurred administering the scheme, to be claimed against the grant. Proposals outlined in the report, ensure the Council and its proposed partners limit administrative costs to no more than 5% of the total grant allocation.</p>
<b>LEGAL CONSIDERATIONS</b>	The proposals outlined reflect the draft Terms and Conditions of the grant.
<b>CHILD AND FAMILY POVERTY</b>	A Child and Family Poverty impact assessment has been completed and is attached at <b>Appendix 1</b> to this report.
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	The proposals outlined in this report are targeted to support those in greatest need of financial assistance over the coming months. The scheme will be administered based on need and inclusive of all those with protected characteristics. It will reach those in receipt of benefits and those that are working but on a low income.
<b>STAFF CONSIDERATIONS</b>	It will be necessary for officers from HBC to implement and deliver the proposals outlined in this report on top of their current duties and responsibilities and it may be necessary

	for HBC to employ additional staff on a temporary basis to ensure the scheme is administered effectively.
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	There are no asset management considerations arising from this report.
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS</b>	There are no environmental, sustainability or climate change considerations arising from this report.
<b>CONSULTATION</b>	Feedback from previous beneficiaries of the scheme tells us that shopping vouchers and energy top ups are very effective and that this should continue as the main focus of the grant.

## 6. RECOMMENDATIONS

- 6.1 Finance and Policy Committee is asked to consider and approve the proposals outlined in this report and preferred implementation model.
- 6.2 Finance and Policy Committee is asked to approve delegation to the Executive Director of Children and Joint Commissioning Services, in consultation with the chair of Finance and Policy Committee, to amend funding pots so as to ensure full utilisation of grant within the time period.

## 7. REASONS FOR RECOMMENDATIONS

- 7.1 The Household Support Fund is a significant grant that is being provided to Hartlepool Borough Council to support local residents and mitigate some of the impact of financial hardship associated with the cost of living crisis. Finance and Policy Committee has responsibility to agree the arrangements for the provision of assistance to local residents

## 8. BACKGROUND PAPERS

- 8.1 None

**9. CONTACT OFFICERS**

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Sign Off:-

Managing Director	Date: 5 June 2023
Director of Finance, IT and Digital	Date: 30 May 2023
Director of Legal, Governance and HR	Date: 25 May 2023



**1. Is this decision a Budget & Policy Framework or Key Decision? Yes**

**If YES please answer question 2 below**

**2. Will there be an impact of the decision requested in respect of Child and Family Poverty? YES**

**If YES please complete the matrix below**

GROUP	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
Young working people aged 18 - 21	Yes			The Household Support Grant is targeted to mitigate the impact of poverty and financial hardship on those most in need between April 2023 and March 2024. The provision of assistance through the implementation of the scheme will have a positive impact on those who experience poverty by providing assistance in terms of funding for food, fuel, water, exceptional housing costs other essential items.
Those who are disabled or suffer from illness / mental illness	Yes			
Those with low educational attainment	Yes			
Those who are unemployed	Yes			
Those who are underemployed	Yes			
Children born into families in poverty	Yes			
Those who find difficulty in managing their finances	Yes			
Lone parents	Yes			
Those from minority ethnic backgrounds	Yes			

**Poverty is measured in different ways. Will the policy / decision have an impact on child and family poverty and in what way?**

Poverty Measure (examples of poverty measures appended overleaf)	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE		
Low income households	Yes			The Household Support Grant is targeted to mitigate the impact of poverty and financial hardship on those most in need between September 2022 and March 2023. The provision of assistance through the implementation of the scheme will have a positive impact on those who experience poverty by providing assistance in terms of funding for food, fuel, water, exceptional housing costs other essential items.		
<b>Overall impact of Policy / Decision</b>						
POSITIVE IMPACT	X	ADJUST / CHANGE POLICY / SERVICE				
NO IMPACT / NO CHANGE		STOP / REMOVE POLICY / SERVICE				
ADVERSE IMPACT BUT CONTINUE						
<b>Examples of Indicators that impact of Child and Family Poverty.</b>						
<b>Economic</b>						
Children in Low Income Families (%)						
Children in Working Households (%)						
Overall employment rate (%)						
Proportion of young people who are NEET						
Adults with Learning difficulties in employment						

<b>Education</b>
Free School meals attainment gap (key stage 2 and key stage 4)
Gap in progression to higher education FSM / Non FSM
Achievement gap between disadvantaged pupils and all pupils (key stage 2 and key stage 4)
<b>Housing</b>
Average time taken to process Housing Benefit / Council tax benefit claims
Number of affordable homes built
<b>Health</b>
Prevalence of underweight children in reception year
Prevalence of obese children in reception year
Prevalence of underweight children in year 6
Prevalence of obese children in reception year 6
Life expectancy

# FINANCE AND POLICY COMMITTEE

3<sup>RD</sup> JULY 2023



**Subject:** WORKFORCE STRATEGY  
**Report of:** Hayley Martin, Director of Legal, Governance and Human Resources  
**Decision Type:** Non-Key

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## 1. COUNCIL PLAN PRIORITY

<b>Hartlepool will be a place:</b>
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

## 2. PURPOSE OF REPORT

- 2.1 The purpose of this report is to request Finance and Policy Committee approval for the Workforce Strategy (2023-2026) as attached as Appendix 1.

## 3. BACKGROUND

- 3.1 The Workforce Strategy has been developed with members of ELT and SLT.
- 3.2 The Strategy is a framework, and the priority and detail behind each of the aims will be developed and agreed with ELT over the next three years.

## 4. PROPOSALS/OPTIONS FOR CONSIDERATION

- 4.1 Our Vision is to enable and innovate a workforce that has the community at its heart delivering the best of services. This will be driven by strong and effective leaders who demonstrate and promote the Council values to look after and develop the workforce making it a great place to work.
- 4.2 There are four key priorities to the Workforce Strategy:
- Leading an inspired workforce

- A healthy and resilient workforce
- Striving to be the best
- Building an empowered workforce

## 5. OTHER CONSIDERATIONS/IMPLICATIONS

<b>RISK IMPLICATIONS</b>	None.
<b>FINANCIAL CONSIDERATIONS</b>	As each plan within the strategy is developed ELT will consider any financial implications.
<b>LEGAL CONSIDERATIONS</b>	None.
<b>CHILD AND FAMILY POVERTY</b>	None.
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	Equality Impact Assessments will be considered for the individual aims as they are progressed.
<b>STAFF CONSIDERATIONS</b>	The workforce strategy will enhance the employment relationship and support the development of staff and services.
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	None.
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS</b>	Developments on how the workforce can reduce carbon emissions are considered as part of the strategy.
<b>CONSULTATION</b>	The Trade Unions have been consulted and support the aims of the Workforce Strategy. It is expected to be formally agreed with Trade Union at Single Table on 22 <sup>nd</sup> June 2023. They will be consulted as plans are detailed and agreed over the next 3 years.

## 6. RECOMMENDATIONS

- 6.1 It is recommended that Finance and Policy Committee approve the Workforce Strategy.

**7. REASONS FOR RECOMMENDATIONS**

- 7.1 To ensure that the Council has a 3 year strategy for the development of the workforce to deliver the best of services to the residents of Hartlepool.

**8. BACKGROUND PAPERS**

- 8.1 None

**9. CONTACT OFFICERS**

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Sign Off:-

Managing Director	Date: 07.06.2023
Director of Finance, IT and Digital	Date: 07.06.2023
Director of Legal, Governance and HR	Date: 07.06.2023

# Workforce Strategy 2023-2026

## Building an Inspired Workforce for Hartlepool

**Our Vision** is to enable and innovate a workforce that has the community at its heart delivering the best of services. This will be driven by strong and effective leaders who demonstrate and promote the Council values to look after and develop the workforce making it a great place to work.

**Creative**

**Aspirational**

**Respectful**

**Inclusive**

**Nurturing**

**Genuine**

### Leading an Inspired Workforce

*An inspired workforce led by effective, visionary, and innovative leaders*

- promote our vision and values and lead by example
- strengthen senior leadership development
- enable the workforce to engage with Members and the community to promote understanding and build relationships
- embrace the digital era to develop our workplaces and our people
- develop management styles and work environments that engage and inspire the workforce
- develop a leadership and management programme which includes career pathways for future leaders
- develop a coaching culture reflecting empowerment and accountability
- trust the workforce and empower them to motivate and improve performance

### Striving to be the best

*An enabled workforce that performs and works hard to drive improvement*

- Modernise the learning experience of our workforce and re-energise our passion for learning and development
- develop a behavioural framework for all employees linked to the values and embed across the Council
- provide a strong and consistent induction and on-boarding experience
- support new managers by providing them with a mentor from within the Council
- ensure our workforce values inclusion and diversity
- support national and regional approaches to skills development practice including development of apprenticeship pathways
- ensure our workforce has the skills and competencies to fully utilise digital services and technology
- be clear about our performance targets and standards
- develop networks through collaboration and partnerships
- celebrate the achievements of our workforce

### A healthy and resilient workforce

*A workforce whose wellbeing is at the heart of what we do*

- implement hybrid and flexible working to help modernise the working culture and attract talent
- develop a wellbeing offer for employees to be able to access 1 paid working day to engage in Council wellbeing initiatives or to volunteer in the Hartlepool community
- support mental wellbeing and develop an evidence based strategy
- ensure the workforce balance their home and work lives
- develop our wellbeing services
- support climate change
- Research and develop plans to minimise musculo-skeletal disorders

### Building an empowered workforce

*A workforce that is ready to meet the demands of the future*

- ensure strategies, policies and priorities are 'knitted' together corporately with capacity, skills and resources aligned to key organisational goals and risks.
- ensure the workforce have the right people, with the right skills, behaviours and values, in the right jobs (Corporate Workforce Plan) with a focus on the Council's aging workforce profile
- focus on areas where there are key skills shortages and explore actions to improve recruitment and retention in order to maximise capacity and support future skills planning
- ensure our workforce reflects the diversity of the Hartlepool community
- ensure that our workforce has a pay strategy that balances cost, equal pay and the need to recruit and retain talent
- continue to develop the apprenticeship programme
- utilise vacant posts to consider opportunities for apprentices leading to permanent work
- support the social and health care integration agenda

# FINANCE AND POLICY COMMITTEE

3<sup>RD</sup> JULY 2023



**Subject:** FINAL REPORT – CHILD AND FAMILY POVERTY IN HARTLEPOOL

**Report of:** Audit and Governance Committee

**Decision Type:** Non Key

## 1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

## 2. PURPOSE OF REPORT

- 2.1 To present the findings of the Audit and Governance Committee following completion of its investigation into Child and Family Poverty in Hartlepool.

## 3. BACKGROUND

- 3.1 The Final Report, attached at **Appendix A**, outlines the overall aim of the scrutiny investigation, terms of reference, methods of investigation, findings, conclusions, and subsequent recommendations.
- 3.2 The conclusions of the Committee's investigation into Child and Family Poverty in Hartlepool are detailed as follows:-
- 1) Despite the Government's 1999 commitment to eradicating child poverty by 2020, it continues to affect millions of people in the *UK, making them unable* to heat homes, pay rent, or buy essentials for their children.



- 2) Child poverty is a cross cutting priority for the council and the reviewed Child and Family Poverty Strategy needs to be grounded in real life experiences, creative and innovative with support from experts, practitioners and residents.
- 3) The long term societal impacts of COVID-19 are not fully known, however, it is highly probable that this will further exacerbate poverty levels in Hartlepool.
- 4) The North East is seeing a much steeper rise in child and family poverty than the rest of the UK, this includes families both in and out of work. There are also direct causational links between higher levels of poverty and health inequalities.
- 5) Poverty services in Hartlepool are predominantly focused on mitigation which help in the 'here and now' and do not lead to impactful change. Mitigation services in Hartlepool are, however, exceptional and need to continue going forward, in conjunction with an increased emphasis on the provision of prevention and routes out of poverty.
- 6) Learning from the lived experience is at the heart of delivering socio economic equality and the adoption of the voluntary Socio Economic Duty would be a progressive step in tackling poverty, embedding collaboration, partnership working and resident led service design and development of services. It would also complement the anti-poverty, inclusive economy, and equalities approaches already being undertaken by the Council, including to some degree the Poverty Impact Assessments required as part of the process for submission of reports to Committee.
- 7) Additional activities would be required as part of the adoption and implementation of the Socio Economic Duty and a working group should be established to look further into:
  - What would be required to facilitate the formal adopt the Socio Economic Duty;
  - What would be the benefits of its adoption;
  - How might it reduce poverty; and
  - What all of the above mean in practical and financial terms for the Council.
- 8) A considerable amount of work is being undertaken by partners that could deliver examples of best practice and service improvement. Whilst it is recognised that time is needed for the true impact / benefits of these pieces of work to be known in time for consideration as part of the ongoing review of Hartlepool's Child and Family Poverty Strategy, a review of best practice / service change in other areas should be undertaken at a later date as part of a refresh of a refresh of the Strategy.
- 9) The needs of those in destitution are likely to be the most complex, with a need for the most intense support. As levels of destitution increase in

Hartlepool, pressure on services and the budgets that provide them continue to rise and a review of welfare service provision is needed to:

- Support an effective Child and Family Poverty Strategy;
  - Move away from responding to crisis; and
  - Focus on impactful interventions that make long term change was supported by the Committee.
- 10) Effective communication with residents (to really listen to them) is essential in the creation of an effective Child and Family Poverty Strategy, and the development of the services that support its implementation. The establishment of a Hartlepool Poverty Truth Commission, as an effective way of facilitating this, would not have to involve significant financial input, although it would require a genuine desire to bring residents around the table.
  - 11) Whilst poverty and the pandemic have combined to hit people who are struggling the hardest, Hartlepudlians are resilient, good neighbours who come together to make change happen. The key to success is trust between people, agencies and organisations.
  - 12) Whilst the investigation focused on child and family poverty, the factors that influence poverty, and the challenges identified in this report, are equally applicable across the whole population (individuals, couples, pensioners, etc.).
  - 13) It is important that the development of schemes and strategies of the impact across individual wards. This being particularly relevant given that whilst 39% of children across Hartlepool live below the headline, some wards have poverty levels in excess of 50%.
  - 14) It is important that the implementation of the recommendations contained within the report are monitored by the Audit and Governance Committee.
  - 15) Working with third sector organisations (VCS), hyper local needs are identified to inform the development and delivery of targeted activities / interventions at a local level. This includes the targeting of certain areas of the community for school holidays and play schemes, etc.
  - 16) Mechanisms, including 'Hartlepool Now', are already in place to raise awareness of help available to residents. However, awareness of the help and support available did need to be explored, with resident involvement in the development process.
  - 17) It is essential that mechanisms are in place to ensure that residents are aware of the help and support available to them. Mechanisms including 'Hartlepool Now' were already in place, however, evidence had shown that the effectiveness of signposting could be improved with input from residents.
  - 18) Schools have a role to play in the identification of children and families that are experiencing the impacts of poverty. Assistance to help schools

do this is available via the 'Poverty Proofing' exercise offered by Children North East. Indication are that only 30% of schools in Hartlepool utilise the service offered by Children North East.

- 19) It is essential that the impact of poverty and socio economic disadvantage be considered as part of the process for consideration of 'key' decisions and development of strategies.

- 3.3 An Action Plan (attached at **Appendix B**) has been produced to assist Members in consideration of the investigations recommendations.

#### 4. PROPOSALS

- 4.1 No options submitted for consideration other than the recommendation(s).

#### 5. OTHER CONSIDERATIONS/IMPLICATIONS

<b>RISK IMPLICATIONS</b>	The Council agreed the Risk Management Framework in June 2019 and this ensures that appropriate arrangements are in place for the management of the Council's key strategic risks. The investigations recommendations feed in to the Child and Family Poverty Strategy and Plan which are included as 'existing internal controls' in the risk register.
<b>FINANCIAL CONSIDERATIONS</b>	Outlined in the Action Plan produced in response to the recommendations of the investigation (Appendix B).
<b>LEGAL CONSIDERATIONS</b>	None.
<b>CHILD AND FAMILY POVERTY</b>	The recommendations in the report work to reduce child and family poverty within Hartlepool.
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	Since the first equality objectives were published in April 2012 the Council has continued to demonstrate that equality and diversity is a core part of what we do as an organisation. The recommendations of the investigation further demonstrate the Councils' commitment to this.
<b>STAFF CONSIDERATIONS</b>	No implications.
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	No implications.
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS</b>	No implications.

<b>CONSULTATION</b>	Throughout its investigation the Committee utilised consultation results from a variety of established sources and welcomed evidence from residents, and a wide range of organisations and bodies, across Hartlepool (and beyond).
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## 6. RECOMMENDATIONS

- 6.1 The Finance and Policy Committee is requested to approve the recommendations of the Audit and Governance Committee, following their investigation into Child and Family Poverty in Hartlepool, as detailed below:-
- 1) Exceptional services are provided in Hartlepool to mitigate the effects of poverty and these are the predominant focus of Hartlepool Council poverty activities. However, going forward, strategies and services need to move towards a more hands up/prevention/route out of poverty focused model lead to deliver more impactful change. As is being planned by the Trussell Trust Foodbank and The Joseph Rowntree Foundation.
  - 2) The voluntary Socio Economic Duty be potentially adopted with the assistance of a working group that will look into:
    - What is required to facilitate the formal adopt the Socio Economic Duty;
    - What would be the benefits of its adoption;
    - How might it reduce poverty; and
    - What all of the above mean in practical and financial terms for the Council.
  - 3) The establishment of a Hartlepool Poverty Truth Commission be progressed with the assistance from Thrive Teesside and the Poverty Truth Network. The purpose being to incorporate lived experience of socio economic disadvantage at all levels of decision making and policy development.
  - 4) As and when the outcomes of ongoing national work in relation to best practice and service improvement becomes available, a further refresh of the new Child and Family Poverty Strategy be undertaken.
  - 5) The implementation of the recommendations contained within the report to be monitored by the Audit and Governance Committee. Alongside an update on the poverty position in Hartlepool.
  - 6) National targets have been removed for the reduction of poverty, however, national indicators have been created. It would be beneficial to set a series of Hartlepool specific indicators, against which outcomes (including the activities of the Poverty Truth Commission and adoption of the Socio Economic Duty) can be measured.
  - 7) Ward based poverty data to be sent to Cllrs on an annual basis.

- 8) In terms of Schools, a poverty update is to be provided at a Head Teachers Briefing, as part of which schools:
  - Will be reminded of the value of the 'Poverty Proofing' exercise offered by Children North East; and
  - Asked to promote the second hand uniforms scheme (Hartlepool Preloved Clothing) as a means of reducing costs for parents.
- 9) In terms of decision making:
  - Impact assessments are a part of the 'key' decision making process and development of strategies and Child and Family Poverty Impact Assessment and Equability and Diversity Impact Assessments are to be amalgamated to simplify the process; and
  - Where the process for monitoring the implementation of decisions identifies a potential 'new' or 'increased' poverty impact, the Impact Assessment should be revisited to gain a full understanding of the position and any action that may be required.
- 10) In terms of debt collection:
  - The impact of debt collection on those experiencing poverty needs to be evaluated with a view to supporting the provision of focused assistance and support; and
  - Where debt is poverty related, options for changes to procedures for debt collection be explored in terms of the provision of additional support / assistance.
- 11) In terms of advice and support:
  - Citizens Advice and other debt counselling services to be promoted to local groups and the VCS.
  - Awareness rolled out to partners/voluntary sectors on initiatives such as Baby Bank/Sensory spot.
- 12) The Council to seek from the Joseph Rowntree Foundation (JRF) an ongoing strategic commitment to work with Hartlepool Borough Council on Hartlepool's poverty issues.

## **7. REASONS FOR RECOMMENDATIONS**

- 7.1 Despite tireless work to mitigate the impact of poverty on children and families in Hartlepool, numbers continue to rise at an alarming rate; and
- 7.2 The societal costs of people living in poverty outweigh the costs of eradicating it. Health, social security, education and aspiration are compromised by poverty.

**8. BACKGROUND PAPERS**

8.1 The following background paper(s) were used in the preparation of this report:

- Audit and Governance Committee – Reports and minutes (9 September 2021, 12 October 2021, 11 November 2021, 16 December 2021, 13 January 2022, 28 February 2022, 24 November 2022 and 16 December 2022).

**9. CONTACT OFFICERS**

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Sign Off:-

Managing Director	Date: 22 <sup>nd</sup> June 2023
Director of Finance, IT and Digital	Date: 22 <sup>nd</sup> June 2023
Director of Legal, Governance and HR	Date: 22 <sup>nd</sup> June 2023



# **AUDIT AND GOVERNANCE COMMITTEE FINAL REPORT**

## **CHILD AND FAMILY POVERTY IN HARTLEPOOL**

**MAY 2023**





## EXECUTIVE SUMMARY

### Introduction

Despite the Government's commitment to eradicating child poverty by 2020, millions of families in the UK are unable to heat homes, pay rent, or buy essentials for their children. The prevalence and impact of poverty on a local, regional and national level is in fact continuing to rise, with the North East seeing the UK's biggest increase in child poverty.

In recognition of this, and the impact on family incomes of the pandemic, changes to national insurance levels and inflation, the Committee identified 'Child and Family Poverty in Hartlepool' as a critically important, crosscutting, priority issue for investigation.

### Conclusions

- 1) Despite the Government's 1999 commitment to eradicating child poverty by 2020, it continues to affect millions of people in the UK, making them unable to heat homes, pay rent, or buy essentials for their children.
- 2) Child poverty is a cross cutting priority for the council and the reviewed Child and Family Poverty Strategy needs to be grounded in real life experiences, creative and innovative with support from experts, practitioners and residents.
- 3) The long term societal impacts of COVID-19 are not fully known, however, it is highly probable that this will further exacerbate poverty levels in Hartlepool.
- 4) The North East is seeing a much steeper rise in child and family poverty than the rest of the UK, this includes families both in and out of work. There are also direct causational links between higher levels of poverty and health inequalities.
- 5) Poverty services in Hartlepool are predominantly focused on mitigation which help in the 'here and now' and do not lead to impactful change. Mitigation services in Hartlepool are, however, exceptional and need to continue going forward, in conjunction with an increased emphasis on the provision of prevention and routes out of poverty.
- 6) Learning from the lived experience is at the heart of delivering socio economic equality and the adoption of the voluntary Socio Economic Duty would be a progressive step in tackling poverty, embedding collaboration, partnership working and resident led service design and development of services. It would also complement the anti-poverty, inclusive economy, and equalities approaches already being undertaken by the Council, including to some degree the Poverty Impact Assessments required as part of the process for submission of reports to Committee.
- 7) Additional activities would be required as part of the adoption and implementation of the Socio Economic Duty and a working group should be established to look further into:
  - What would be required to facilitate the formal adopt the Socio Economic Duty;
  - What would be the benefits of its adoption;
  - How might it reduce poverty; and
  - What all of the above mean in practical and financial terms for the Council.

- 8) A considerable amount of work is being undertaken by partners that could deliver examples of best practice and service improvement. Whilst it is recognised that time is needed for the true impact / benefits of these pieces of work to be known in time for consideration as part of the ongoing review of Hartlepool's Child and Family Poverty Strategy, a review of best practice / service change in other areas should be undertaken at a later date as part of a refresh of the Strategy.
- 9) The needs of those in destitution are likely to be the most complex, with a need for the most intense support. As levels of destitution increase in Hartlepool, pressure on services and the budgets that provide them continue to rise and a review of welfare service provision is needed to:
  - Support an effective Child and Family Poverty Strategy;
  - Move away from responding to crisis; and
  - Focus on impactful interventions that make long term change was supported by the Committee.
- 10) Effective communication with residents (to really listen to them) is essential in the creation of an effective Child and Family Poverty Strategy, and the development of the services that support its implementation. The establishment of a Hartlepool Poverty Truth Commission, as an effective way of facilitating this, would not have to involve significant financial input, although it would require a genuine desire to bring residents around the table.
- 11) Whilst poverty and the pandemic have combined to hit people who are struggling the hardest, Hartlepudlians are resilient, good neighbours who come together to make change happen. The key to success is trust between people, agencies and organisations.
- 12) Whilst the investigation focused on child and family poverty, the factors that influence poverty, and the challenges identified in this report, are equally applicable across the whole population (individuals, couples, pensioners, etc.).
- 13) It is important that the development of schemes and strategies of the impact across individual wards. This being particularly relevant given that whilst 39% of children across Hartlepool live below the breadline, some wards have poverty levels in excess of 50%.
- 14) It is important that the implementation of the recommendations contained within the report are monitored by the Audit and Governance Committee.
- 15) Working with third sector organisations (VCS), hyper local needs are identified to inform the development and delivery of targeted activities / interventions at a local level. This includes the targeting of certain areas of the community for school holidays and play schemes, etc.
- 16) Mechanisms, including 'Hartlepool Now', are already in place to raise awareness of help available to residents. However, awareness of the help and support available did need to be explored, with resident involvement in the development process.

- 17) It is essential that mechanisms are in place to ensure that residents are aware of the help and support available to them. Mechanisms including 'Hartlepool Now' were already in place, however, evidence had shown that the effectiveness of signposting could be improved with input from residents.
- 18) Schools have a role to play in the identification of children and families that are experiencing the impacts of poverty. Assistance to help schools do this is available via the 'Poverty Proofing' exercise offered by Children North East. Indication are that only 30% of schools in Hartlepool utilise the service offered by Children North East.
- 19) It is essential that the impact of poverty and socio economic disadvantage be considered as part of the process for consideration of 'key' decisions and development of strategies.

## **Recommendations**

- 1) Exceptional services are provided in Hartlepool to mitigate the effects of poverty and these are the predominant focus of Hartlepool Council poverty activities. However, going forward, strategies and services need to move towards a more hands up/prevention/route out of poverty focused model lead to deliver more impactful change. As is being planned by the Trussell Trust Foodbank and The Joseph Rowntree Foundation.
- 2) The voluntary Socio Economic Duty be potentially adopted with the assistance of a working group that will look into:
  - What is required to facilitate the formal adopt the Socio Economic Duty;
  - What would be the benefits of its adoption;
  - How might it reduce poverty; and
  - What all of the above mean in practical and financial terms for the Council.
- 3) The establishment of a Hartlepool Poverty Truth Commission be progressed with the assistance from Thrive Teesside and the Poverty Truth Network. The purpose being to incorporate lived experience of socio economic disadvantage at all levels of decision making and policy development.
- 4) As and when the outcomes of ongoing national work in relation to best practice and service improvement becomes available, a further refresh of the new Child and Family Poverty Strategy be undertaken.
- 5) The implementation of the recommendations contained within the report to be monitored by the Audit and Governance Committee. Alongside an update on the poverty position in Hartlepool.
- 6) National targets have been removed for the reduction of poverty, however, national indicators have been created. It would be beneficial to set a series of Hartlepool specific indicators, against which outcomes (including the activities of the Poverty Truth Commission and adoption of the Socio Economic Duty) can be measured.
- 7) Ward based poverty data to be sent to Cllrs on an annual basis.

8) In terms of Schools, a poverty update is to be provided at a Head Teachers Briefing, as part of which schools:

- Will be reminded of the value of the 'Poverty Proofing' exercise offered by Children North East; and
- Asked to promote the second hand uniforms scheme (Hartlepool Preloved Clothing) as a means of reducing costs for parents.

9) In terms of decision making:

- Impact assessments are a part of the 'key' decision making process and development of strategies and Child and Family Poverty Impact Assessment and Equability and Diversity Impact Assessments are to be amalgamated to simplify the process; and
- Where the process for monitoring the implementation of decisions identifies a potential 'new' or 'increased' poverty impact, the Impact Assessment should be revisited to gain a full understanding of the position and any action that may be required.

10) In terms of debt collection:

- The impact of debt collection on those experiencing poverty needs to be evaluated with a view to supporting the provision of focused assistance and support; and
- Where debt is poverty related, options for changes to procedures for debt collection be explored in terms of the provision of additional support / assistance.

11) In terms of advice and support:

- Citizens Advice and other debt counselling services to be promoted to local groups and the VCS.
- Awareness rolled out to partners/voluntary sectors on initiatives such as Baby Bank/Sensory spot.

12) The Council to seek from the Joseph Rowntree Foundation (JRF) an ongoing strategic commitment to work with Hartlepool Borough Council on Hartlepool's poverty issues.

## **1. PURPOSE OF REPORT**

- 1.1 To update on the findings of the Audit and Governance Committee's investigation into Child and Family Poverty in Hartlepool.

## **2. SETTING THE SCENE**

- 2.1 As part of the requirements of the Health and Social Care Act 2012, the Council's Audit and Governance Committee consideration of a range of potential topics for investigation under its statutory health scrutiny responsibilities. One topic identified as being of particular interest to the Committee was Child and Family Poverty in Hartlepool.
- 2.2 The Committee was exasperated to find that despite the Government's commitment to eradicating child poverty by 2020, millions of families in the UK are unable to heat homes, pay rent, or buy essentials for their children. The prevalence and impact of poverty on a local, regional and national level continues to rise. Initial data<sup>1</sup> showing that:
- 4.3million children remained in poverty in the UK in 2019/20, which represented an increase of 200,000 from the previous year and up 500,000 over five years;
  - In the three years before the Covid-19 pandemic, the North East had the second highest rate of child poverty in the UK at an average of 37% (behind London at 38%, and compared with a UK average of 31%). This equated to 11 children and young people in a classroom of 30 in the North East;
  - The North East saw the UK's biggest increase in child poverty from 2014/15 to 2019/20 (rising by over a third from 26% to 37% - meaning child poverty in the North East has risen from just below the UK average to the second highest of any region, after London). One third of this overall increase came between 2018/19 and 2019/20; and
  - Of the 20 Parliamentary constituencies across the UK with the highest increases in child poverty rates from 2014/15 to 2019/20, more than four fifths are in the North East. Hartlepool's rates for the percentage of children in poverty being 27.4% (2014-15) and 37.8% (2019/20) which represents a 10.4% increase over the period.
- 2.3 Whilst the pre-covid data was in itself shocking, Members were exceptionally concerned that the true impact on family incomes of the pandemic, changes to national insurance levels and inflation were not yet known. With this in mind, the Committee identified 'Child and Family Poverty in Hartlepool' as a critically important, crosscutting, priority issue for investigation by the Audit and Governance Committee. The Committee's decision to focus on this issue was further justified by the cost of living crisis that has faced during 2022.
- 2.4 The Committee met formally on five occasions, during 2021/2022, to discuss and receive evidence relating to this investigation. A detailed record of the issues raised during these meetings is available from the Council's Democratic Services.

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<sup>1</sup> Prof. Donald Hirsch and Dr Juliet Stone (Centre for Research in Social Policy at Loughborough University)

### **3. AIM AND TERMS OF REFERENCE FOR THE INVESTIGATION**

3.1 Key to the success of the investigation was clarity in terms of the Committee's aim for the outcome of the piece of work, a defined terms of reference and agreed methods of investigation. All of these were agreed by the Committee on the 29<sup>th</sup> July 2021 and are detailed below:-

i) Investigation Aim:- To evaluate the true impact of child poverty and identify what the Council, and its partners, can do to make the positive changes required to reduce / eradicate it in Hartlepool.

ii) Terms of Reference:-

a) Agree a definition of child poverty for the purpose of the investigation.

b) To gain an understanding from a local, national, regional and peer perspective of the:-

i) Scale and extent of child poverty;

ii) Causes of child poverty; and

iii) Impact of Covid-19.

c) To examine barriers out of child poverty and explore their prevalence and impact in Hartlepool.

d) To explore the effectiveness of activities and services currently in place to prevent, eradicate and remove barriers out of child poverty:-

i) In Hartlepool; and

ii) Across other geographical areas and sectors (areas of potential best practice).

e) To identify service improvements or additions through which tangible reductions in child poverty levels across Hartlepool can be delivered.

### **4. MEMBERSHIP OF THE AUDIT AND GOVERNANCE COMMITTEE**

4.1 The membership of the Audit and Governance Committee was as detailed below:-

Councillors Ashton (replaced by Hall during the course of the investigation), Boddy\*, Cook, Cowie\*, Feeney, B Loynes, D Loynes, Picton\*, Richardson and Riddle.

\* Added to the membership during the course of the investigation.

### **5. WHAT IS POVERTY**

5.1 The Committee welcomed evidence from the Head of Housing, Hardship and Welfare Services, on behalf of the Director of Children's and Joint Commissioning Services, and as a starting point for its investigation gained an understanding of the drivers of poverty, the ways in which poverty data is presented and potential definitions for the purpose of the investigation.

## Drivers of Poverty

- 5.2 Attention was drawn to the common perception that poverty relates predominantly to the availability of financial resources, and the absence of paid work. It was recognised that money management, and debt, were important contributing factors with most people receiving their financial support from the government monthly, resulting in them struggling to reach the end of the month with enough to pay for food and energy. Debt and interest repayment schedules also meant that residents never had the 'full' amount of benefit to make ends meet.
- 5.3 It was, however, clear to the Committee that an array of additional factors also drive poverty. These include:
- Unemployment - linked to this is skills and abilities of the workforce, ill-health (too sick to work), caring responsibilities and the cost of childcare.
  - Low skilled, low paid, part time work, insecure jobs and zero hours contracts, with 75% of children living in relative poverty in households where at least one adult works.
  - Housing costs – linked to this is the use of the Private Rented Sector due to lack of availability of social housing and/ or renters unable to meet social housing criteria.
  - The benefit system – administratively burdensome, difficult to navigate and currently not able to meet the needs of those that have to use it when times are hard.
- 5.4 It was not unexpected to find that all of the above drivers are present in Hartlepool, alongside other significant problems around money management and debt. Most people receive their financial support from the government monthly and are struggling to reach the end of the month with enough to pay for food and energy and debt / interest. Repayment schedules often also mean that people never have the 'full' amount of benefit to make ends meet, even at the start of the month.
- 5.5 All of these factors having the capacity to:-
- i) Impact on the severity of poverty experienced by residents, with the below groups of individuals most at risk of poverty:
    - Lone parents.
    - Families with young children under the age of five.
    - Families with three or more children.
    - Families with an adult and/ or child with a disability.
    - Black and minority ethnic families.
    - Women (more likely to have lower paid work or not work at all due to caring responsibilities).
  - ii) Quickly escalate poverty from below the minimum income standard to not being able to eat or keep warm, as detailed in Diagram 1 over the page.

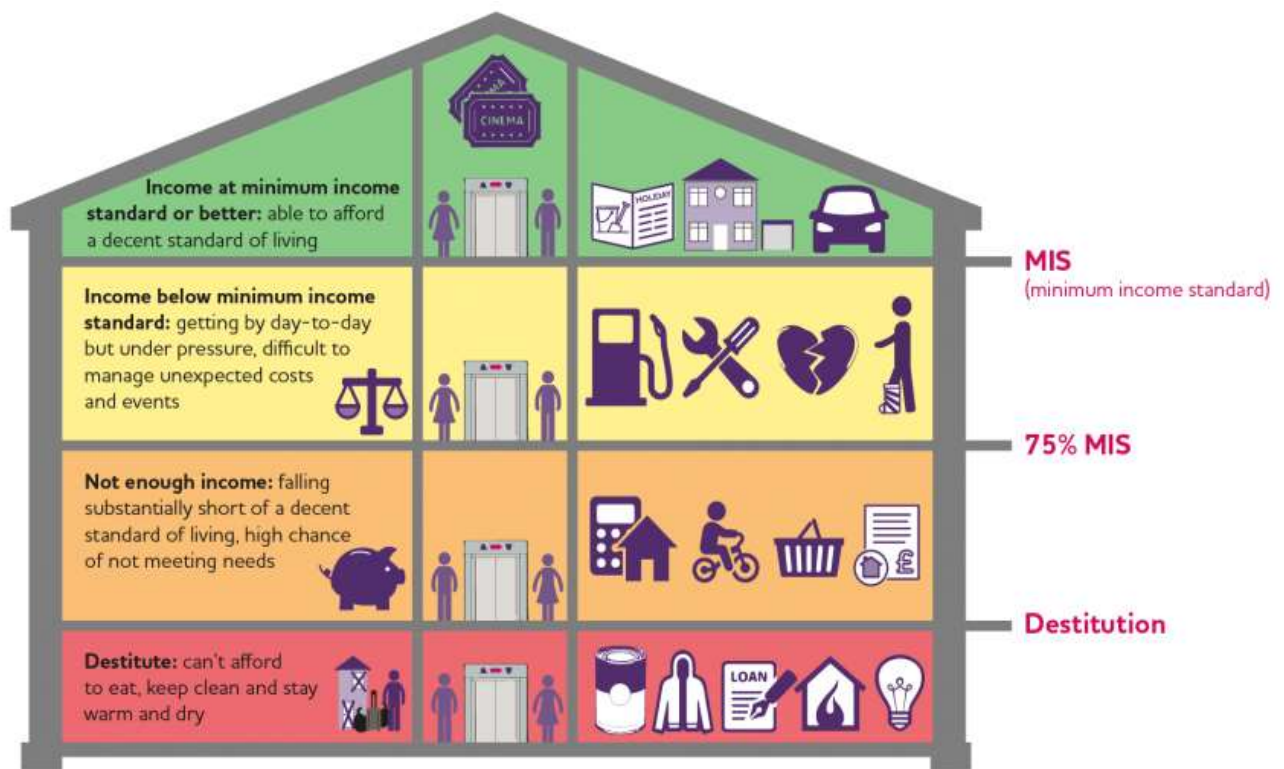


Diagram No. 1 – Levels of Poverty - Joseph Rowntree Foundation

## 6. HOW IS POVERTY DEFINED?

6.1 As part of the process for the identification of a definition of poverty the Committee was surprised to find that no unilaterally agreed definition was applied by bodies / organisations across the sectors. Attention was, however, drawn to the annual Government survey of income poverty in the UK, called 'Households below Average income' (HBAI), which set the poverty line in the UK at 60 per cent of the median UK household income. This formed the base for two potential definitions of poverty for consideration by the Committee:-

- i) **Relative**: the level below which a citizen has the economic capacity to participate fully in the society in which they live and is routinely set as below 60% of the median UK household income. Relative poverty is sometimes described as "relative deprivation" because the people falling under this category are not living in total poverty, but they are not enjoying the same standard of life as everyone else in the country; and
- ii) **Absolute**: when household income is below 60 per cent of the median as it stood in 2011, below which people lack the necessary food, clothing, or shelter to survive. This being a less widely used definition.

6.2 A further consideration in the identification of a definition was the way in which poverty data is produced with two potential indicators used in the form of income 'before' and 'after' housing costs. Members were of the view that calculating poverty 'after' housing costs was the most accurate, and relative, way to measure the true impact on families and on, this basis, the below definition was to be used for the purpose of the investigation:-

*Relative Poverty - The level below which a citizen has the economic capacity to participate fully in the society in which they live and is routinely set as below 60% of*



*the median UK household income. Relative poverty is sometimes described as “relative deprivation” because the people falling under this category are not living in total poverty, but they are not enjoying the same standard of life as everyone else in the country.*


## 7. POVERTY DATA - WHAT DOES IT TELL US?

- 7.1 At the meeting of the Committee on the 9<sup>th</sup> September 2021, evidence from the Head of Housing, Hardship and Welfare Services provided an understanding of poverty levels across the country, regionally and more specifically in Hartlepool.
- 7.2 Particular reference was made to data compiled by Loughborough University’s Centre for Research and Social Policy<sup>2</sup>, as an independent source of poverty data for over 10 years. The study utilised the ‘relative’ poverty indicator and Members noted with concern that, as of May 2021, Hartlepool featured 8<sup>th</sup> in the top 20 authorities across the country with the highest increase in relative poverty in a year (See Table 1 below).

### Poverty from a National Perspective

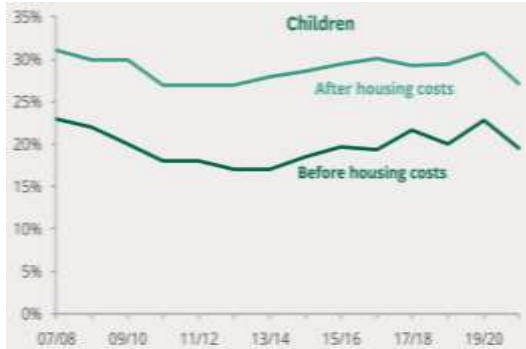
- 7.3 Data provided gave the Committee an understanding of the noted with interest that:-
- Across the UK 31% of children live in a household 60% below median income after housing costs (relative poverty).
  - The top 20 local authorities with the highest child poverty rates range from 55.8% (Tower Hamlets) to 39.0% (Lewisham). Middlesbrough features in the top 20 list at 39.4%.
  - Across the UK there has been an average 2% increase in relative poverty however, the top 20 authorities with the highest increase in poverty range from Newcastle upon Tyne (12.8% increase in five years) to North Lincolnshire (5.9% increase in five years).
  - Levels of poverty had fluctuated over a number of years, as detailed in **Table 2** over the page, with attention drawn to the relationship between trends and changes to the tax and benefits regime (e.g. when the Government increased investments in families’ social security, there was a notable reduction in child poverty).

**Table 2** - % Over a 3 year average<sup>3</sup>

Relative Poverty (After housing costs) Percentage of whole population in poverty in England		
Year	% - 3 year average	Poverty Trends
1999/00 - 2001/02	23%	 Between 1998/9 and 2004/5 child poverty rates declined at a steady rate and research studies concluded that this stemmed from a number of policy interventions, including: <ul style="list-style-type: none"> <li>- Efforts to increase employment for lone parents;</li> <li>- Additional benefits targeted specifically at children (such as child tax credit; and</li> <li>- Significant investments in early year’s education and care.</li> </ul>
2000/01 - 2002/03	22%	
2001/02 - 2003/04	22%	
2002/03 - 2004/05	21%	
2003/04 - 2005/06	21%	

<sup>2</sup> Loughborough University - ‘Local indicators of child poverty after housing costs’ (May 2021)

<sup>3</sup> Source: DWP, [Households Below Average Income](#), 2020/21

2004/05 - 2006/07	22%	↑ Between 2004/5 and 2009/10 the child poverty began to drift upwards again at the beginning of this period, but it started to decline again from 2008/09.
2005/06 - 2007/08	22%	
2006/07 - 2008/09	23%	
2007/08 - 2009/10	23%	
2008/09 - 2010/11	22%	↓ Child poverty rates declined.
2009/10 - 2011/12	22%	
2010/11 - 2012/13	21%	
2011/12 - 2013/14	21%	
2012/13 - 2014/15	21%	
2013/14 - 2015/16	21%	
2014/15 - 2016/17	22%	↑ The 2010 Child Poverty Act had been dissolved in 2016 and replaced with the Welfare Reform and Work Act, removing the duty for local authorities to have a Child Poverty Strategy, Needs Assessment and Plan. In addition to this, the government had moved its focus to social mobility, away from its commitment to eradicating child poverty.
2015/16 - 2017/18	22%	
2016/17-2018/19	22%	
2017/18-2019/20	22%	
2019/20 - 2020/21	20%	↓ Child poverty rates declined. 

7.4 Updated data, however, brought to the Committee's attention an unexpected fall in relative, and child poverty, between 2019/20 and 2020/21, although the reduction in relative poverty could have been due to uncertainty in the data over the period of the pandemic. Two potential reasons for the fall had been identified as<sup>4</sup>:-

- i) Median incomes fell due to furloughed workers receiving 80% of their pay and job loss among low paid workers, pushing down the relative poverty line; and
- ii) An increase in benefits such as the £20 per week Universal Credit uplift increased the incomes of benefit recipients.

#### Poverty across the Tees Valley / North East

7.5 Evidence provided demonstrated that:-

- i) Poverty levels across the Tees Valley had increased by between 9.8% and 10.6% between 2014 and 2020 (as detailed in Table 1 over the page).

**Table 1 – Poverty Levels (Tees Valley - 2021)**

Local authority	2014/15 indicator	2019/20 indicator	% point increase
Middlesbrough	29.2%	39.4%	10.3%
Hartlepool	27.4%	37.8%	10.4%
Darlington	25.7%	36.1%	10.4%
Redcar & Cleveland	26.2%	36.8%	10.6%
Stockton on Tees	25.5%	35.3%	9.8%
<b>UK</b>	<b>29%</b>	<b>31%</b>	<b>2%</b>

<sup>4</sup> the Joseph Rowntree Foundation

- ii) 'Child poverty was expected to continue to grow at an alarming rate across the urban areas of the North East, whereas the greatest changes elsewhere are more localised. This was likely to be influenced by the presence in the region of a large proportion of low-paid workers who had only been just above the poverty line, and were being pushed below by the freeze in their in-work benefits.'<sup>5</sup>
- iii) Projections from The Institute for Fiscal Studies suggested that rates would continue to rise and that by 2025 relative poverty would have risen by 50%, unless significant intervention are put in place;
- iv) The North East has the second highest rate of child poverty in the UK at 37% (behind London at 38%)<sup>6</sup>;
- v) The North East saw the UK's biggest increase in child poverty from 2014/15 to 2019/20 (rising from 26% to 37% - meaning child poverty in the North East has increased from just below the UK average to the second highest of any region in that time)<sup>7</sup>; and
- vi) All 12 North East councils are included in the 20 UK local authority areas which saw the highest increases in child poverty from 2014/15 to 2019/20<sup>8</sup>.

### Poverty in Hartlepool

7.6 Members discovered that work with residents had shown that all of the factors outlined in Section 5.3 are experienced in Hartlepool and were shocked to find that in 2021 poverty rates in Hartlepool were such that:-

- i) Destitution is becoming increasingly prevalent in the town and those who are destitute are likely to have the most complex needs, requiring the most intense support;
- ii) As of 2022, 39% of children in Hartlepool now live below the breadline (i.e. living in relative poverty in a household with less than 60% of the national median income), in some areas of the town this is in excess of 50%. On this basis, out of a class of 100 children, 39 live in poverty, as **Diagram 2** demonstrates;

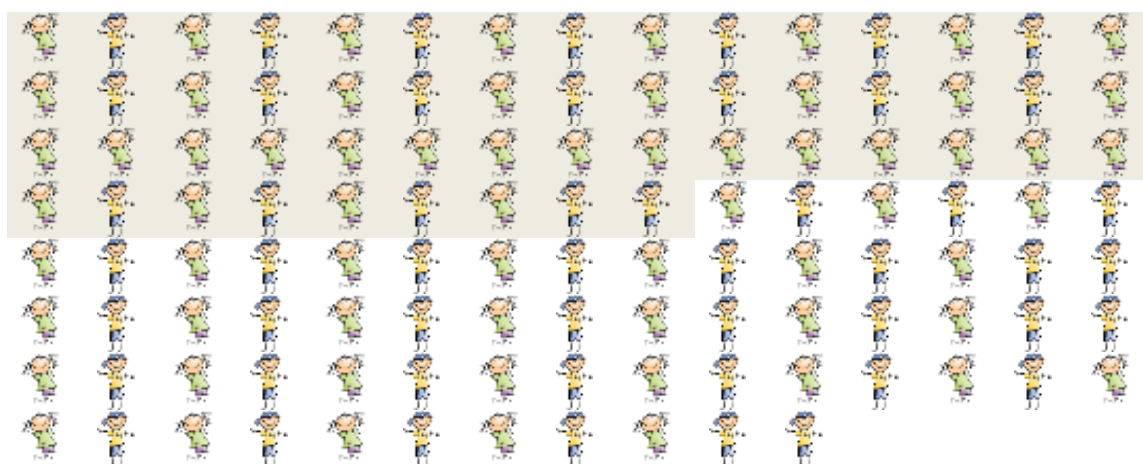


Diagram 2 – Children in a class of 100 who are in poverty.

<sup>5</sup> Loughborough University  
<sup>6</sup> End Child Poverty coalition  
<sup>7</sup> End Child Poverty coalition  
<sup>8</sup> End Child Poverty coalition

- iii) Hartlepool featured 8<sup>th</sup>, in the top 20 authorities across the country, with the highest increase in relative poverty in a year (up 10.4% since 2014/15);
- iv) Hartlepool was ranked as 18 in the top 20 towns and cities experiencing destitution. Middlesbrough was 1<sup>st</sup>, Newcastle was 5<sup>th</sup>. According to JRF 1.21% of the total number of residents was destitute<sup>9</sup>;
- v) 11 Hartlepool children in every classroom of 30 are living on or below the poverty line (37.8%);
- vi) Hartlepool has the second highest growth in poverty across the North East in the last five years; and
- vii) Pensioner poverty is increasing and is more prevalent in women, currently this stands at 18%.

7.7 With due regard to the overall data provided, attention was drawn to the differing needs of those in poverty and destitution, as detailed in Diagram 1. It was noted that the needs of those in destitution are more likely to be the most complex with a need for the most intense support. As a result of this as the levels of destitution increase in Hartlepool, pressure on services and the budgets that provide them also continue to rise. This is a significant issue as funding challenges continue to face the local authority and the need for a review of welfare service provision to support an effective Child and Family Poverty Strategy was supported by the Committee.

7.8 Whilst it came as no surprise to the Committee that poverty rates in the Tees Valley and Hartlepool continue to be higher than the national average; The failure of national and local activities / interventions to reduce poverty levels below 20% over the last twenty plus years was, however, a contentious issue for Members. Members were also concerned to learn that:-

- i) An increasingly large proportion of the UK was experiencing the very deepest level of poverty;
- ii) The proportion of people living 50% or more below the poverty line being 7% in 2019/20 (compared to 5% in 2000/01);
- iii) Child poverty rates were predicted to rise and that by 2020, relative child poverty would rise by 50% unless significant intervention is put in place<sup>10</sup>;
- iv) There is increasing evidence to show a direct causal link between poverty and the significant levels of rising child protection intervention and numbers of children becoming looked after;
- v) A number children who hover 'above' the relative poverty line live in a low income family (and are ineligible for a free school meal);
- vi) Persistent poverty leads to physical and mental ill health and can lead to low educational attainment;
- vii) Persistent poverty (living in relative poverty for at least three out of the last four years) leads to a greater likelihood of physical and mental ill-health and has a lasting impact on a child's life chances, education and aspirations; and

<sup>9</sup> JRF report Destitution in the UK 2020,

<sup>10</sup> Institute for Fiscal Studies

viii) The proportion at all other depths of poverty had remained stable, or had fallen over the same time period<sup>11</sup>, reflecting a disproportionate impact on the most vulnerable members of communities.

## **8. THE IMPACT ON POVERTY OF COVID-19 AND THE RISING COST OF LIVING**

8.1 With the assistance of the Head of Housing, Hardship and Welfare Services, the Committee explored the societal impact of the COVID-19 pandemic and the unprecedented pressure placed upon everyone, especially those who were already deemed 'vulnerable'.

8.2 It was clear that the long term societal impacts of COVID-19 were not fully known, however, it was highly probable that it would further exacerbate poverty levels in Hartlepool, with those most severely affected by the pandemic being more likely than average to already be in poverty. The reasons for this being:

- Low paid workers:
  - Median wages in the sectors shut down by the pandemic were among the lowest in the economy;
  - Low paid workers were less likely to be able to work from home which meant that they were more likely to have lost their jobs or been furloughed; and
- Minority ethnic groups: workers from minority ethnic groups make up a larger than average proportion of the jobs in sectors vulnerable to the coronavirus pandemic;
- Lone parents: lone parents are more reliant on local jobs, and more likely to have struggled with childcare during lockdown;
- Private renters and social renters: private renters have higher housing costs and social renters tend to have lower incomes; and
- People living in areas of the UK where there were already higher levels of unemployment, poverty, and deprivation.

8.3 Members appreciated that interventions had been put in place on a local and national basis to respond to the challenges facing residents (e.g. furlough, business grant support, extra £20 Universal Credit, stay on evictions). There was, however, concern at the time of the investigation that these measures were coming to an end, in particular around the withdrawal of the £20 universal credit support, with evidence showing that 75% of children who live in relative poverty are in a household where at least one adult works. This was largely due to zero hours contracts, part time and low paid work.

8.4 Moving forward emphasis was placed upon the importance of the continued provision of measures that are developed / influenced by the use of research<sup>12</sup> in order to identify the correct actions to re-shape life after COVID. Potential measures being:

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<sup>11</sup> Commons Library Research Briefing, 29 September 2022

<sup>12</sup> The British Academy (the UK's national academy for the humanities and social scientist)

- Empowering participation, engagement and cooperation to strengthen local capacity and help people to respond and meet local needs. – local ‘actors’ with a strong sense of social justice.
- Improving the way data and information is shared to enable a shared understanding of facts so that help and support can be directed to the right people at the right time.
- Digital infrastructure as critical to public service not only for communication but for education and employment.
- Empowering ‘local actors’ to work together with a sense of social purpose to help drive a solid strategy for recovery across the board.
- Collaboration with key stakeholders across the town and the region to secure support to change.
- Explore best practice in other areas and harness knowledge, skills and experience of other leading agencies.
- Talking to residents about their experiences and enabling local people to reduce the stigma surrounding poverty and work to effect change.
- Utilise the power of the collective response to influence whole system change.

### Socio Economic Duty

- 8.5 As part of the Committee’s examination of ways to reduce poverty, and the consequences of social economic disadvantage, Members gained an understanding of the Equality Act, as a legal framework to protect the rights of individuals and advance equality of opportunity, and the statutory obligations contained within it.
- 8.6 Of particular interest was Section 1 of the Act (the socio economic duty) which requires *‘public bodies to adopt transparent and effective measures to address the inequalities that result from differences in occupation, education, place of residence or social class*. In considering the potential benefits of adopting the Duty it was noted that the Council would be required to consider how their decisions and policies could increase or decrease inequality that results from socio economic disadvantage. Members learned that from a practical perspective the Council would need to:
- Formally incorporate poverty and socio economic disadvantage in decision making processes and strategies (already incorporated to some degree in Hartlepool’s decision making processes and strategies via Poverty Impact Assessment);
  - Recognise the value of engaging with people with lived experience of socio economic disadvantage at all levels of decision making and commit to valuing this engagement in finding new ways of making policy;
  - Work with residents and the voluntary and community sector to develop strategies to tackle socio economic disadvantage; and

- Identify what works through evaluation, skills sharing and innovative ways of working.

8.7 It was noted that voluntary implementation of the duty would complement the anti-poverty, inclusive economy, and equalities approaches already being undertaken by the Council, including to some degree the Poverty Impact Assessments required as part of the process for submission of reports to Committee. However, it was recognised that additional activities would be required and establishment of a working group to look further into what is required to formally adopt the duty, its benefits, how this might reduce poverty and what this means in practical terms for officers of the council prior to adoption of the duty was considered.

### Cost of living

8.8 Whilst information provided as part of the initial evidence gathering sessions did not specifically explore the impact of the rising cost of living, additional information provided drew attention to its specific impact on poverty levels.

8.9 The correlation between rises in the cost of living and poverty, Members were exceptionally concerned to find that rising prices was expected to increase material deprivation and increase absolute poverty by over 3 million people between 2021/21 and 2022/23<sup>13</sup>. Rising energy / food prices also disproportionately affect low-income households who spend a larger than average proportion of their income on these items<sup>14</sup>.

## **9. ACTIVITIES AND SERVICES PROVIDED TO PREVENT, ERADICATE AND REMOVE BARRIERS OUT OF CHILD POVERTY**

9.1 Details of the services provided nationally and locally, via statutory, voluntary and community sectors, were provided to the Committee, including examples of Best Practice:

- North East Child Poverty Commission (NEDPC). A network that believes all children should have an equal chance in life and is hosted by Newcastle University. The Committee welcomed confirmation of Hartlepool Borough Council's active involvement in the group and noted the extensive research that had been undertaken into local welfare support (LWS) provision<sup>15</sup> which drew attention to the role of the LWS in the provision of a safety net that the current welfare system does not.
- Thrive Teesside. An award winning organisation working in Teesside aiming to close the gap between the rich and the poor by supporting low-income communities to enact change.
- Poverty Truth Commissions. Evidence provided by Tracey Herrington from Thrive Teesside provided Members with an oversight for the Poverty Truth Commission that operates in Stockton on Tees. The aim of the commission being to ensure that local voices are heard and involved in all aspects of day to day service

<sup>13</sup> The Resolution Foundation

<sup>14</sup> In 2019/20, households with the lowest tenth of incomes spent 13.8% of their overall spending on food and 7.1% on electricity and gas. In comparison, households with the highest tenth of incomes spending 8.5% of their overall spending on food and 2.5% on electricity and gas.

<sup>15</sup> <https://www.nechildpoverty.org.uk/news/time-to-strengthen-the-safety-net>

development. They are also places where transformational relationships are formed / nurtured.

- The Poverty Truth Network. Offers support, advice and guidance to local areas looking to develop a Poverty Truth Commission.
- 'Addressing Poverty through Lived Experience (APLE)' Collective. Based in Stockton for over 15 years the collective has spoken at national party conferences, etc. and are consulted on matters relating to welfare and lobby tirelessly on issues such as Universal Credit.
- Brent Council. Levels of poverty led to the establishment of an Independent Poverty Commission bringing together experts, practitioners and people with lived experience of the issues.
- The North of the Tyne Combined Authority. Has embarked on a child poverty prevention programme and have agreed a plan to:
  - Introduce poverty interventions at a school level;
  - Provide welfare and benefit advice in schools; and
  - Work with employers to reduce in-work poverty.

9.2 The Committee was particularly interested in the poverty truth commission model, the basis of which was that lasting social change couldn't happen unless those who experience the struggle participate in generating change ("Nothing about us, without us, for us"). In order to enable the Committee to make an informed decision on the viability of implementing the voluntary duty, evidence was provided on the additional impact of adopting the duty in Hartlepool and the implementation of the practical steps contained within the guide to local authorities. Subsequent clarification was welcomed that the creation of a Hartlepool Poverty Truth Commission would not have to involve significant financial input, although it would require a genuine desire to bring residents around the table.

9.3 With due regard to all of the information provided, the value of 'lived experiences' could add to the development of interventions / strategies, this was recognised by the Committee and exploration of the establishment of a Hartlepool Poverty Truth Commission was supported by the Committee. The offer of assistance from Thrive Teesside and the Poverty Truth Network in the development of the commission was welcomed by Members.

#### Hartlepool Borough Council Services

9.4 Attention was drawn to the wide range of support measures in place directly through government funding:

- Some support is universal;
- Some is benefit dependent or means tested;
- Some you have to apply for; and
- Some are automatically paid.

9.5 A full list can be found at [www.helpforhouseholds.campaign.gov.uk](http://www.helpforhouseholds.campaign.gov.uk). The range of services offered specifically in Hartlepool include:



- The Household Support Fund
- Warm Hubs
- Discretionary Housing Payments
- Free School Meals (financial)
- Energy efficiency schemes, inc. Energy Bills Support Scheme – (universal payment of £400 towards energy costs between October and March 2023)
- The Winter Fuel Payment – (between £100 and £300 per pensioner depending on circumstances).
- The Cost of Living Payment (means tested, £650 in two lump sums)
- The Household Support Fund - [www.hartlepool.gov.uk/household-support-fund](http://www.hartlepool.gov.uk/household-support-fund)
- Childcare
- Healthy Start
- The Bread and Butter Thing
- Local Council Tax Support Scheme
- Welfare Support Service (crisis and non-crisis)
- Access to the Trussell Trust Foodbank
- Recycled School Uniform Scheme
- Action against holiday hunger
- Routes to Work
- Community Hubs and navigation to support services
- Social prescribing
- Links to voluntary and community sector services
- Additional help for Disability and Pensioner households (benefit / means tested)
- And more... as detailed on the Hartlepool Now website (<https://www.hartlepoolnow.co.uk/>)

9.6 In addition to these, the Committee discussed the partnerships arrangement the Council participates in, with the aim to tackle poverty. Including but are not limited to:

- ‘Hartlepool Food Council’ – a group of organisations that aims to reduce food waste and ensure there is adequate food for all;
- ‘Hartlepool Financial Inclusion Partnership’ – a group of organisations that aims to support residents at risk of exclusion and to secure support from agencies that in turn can help reduce financial burdens; and
- Hartlepool Action Lab (HAL) which provides an opportunity for a diverse range of organisations and individuals to join together to better understand the challenges experienced by people in Hartlepool and develop working solutions to provide routes out of poverty.

9.7 The significant role of the VCS in the provision of support was also recognised. This included:

- The Hartlepool Food Council – a collective of food aid groups in the town offering food poverty relief;
- Worrying About Money – a directory of money advice agencies and services;
- School Uniform – now offered via ‘Hartlepool Uniform Recycling’; and
- The range of information provided by ‘Hartlepower’ and ‘HOP’.

#### Welfare Support Service

9.8 A key element of the Councils support measures is the provision of ‘crisis’ support to residents via the Local Welfare Support Schemes. Members were shocked to learn

over the past 18 months a total of £4,864 of crisis awards, and £2,385 of non-crisis awards had been allocated. **Table 3** outlines the allocations in greater detail.

**Table 3**

<b>Crisis awards approved – (daily support) – 4,017</b>	<b>Non Crisis awards approved - (settling into community) – 2,217</b>
1,009 gas / electricity top ups	931 white goods awards (one or more items) 1,209 furniture awards (one or more items) 56 carpets (one or two rooms or a full house) 21 misc. awards (baby items, bedding, clothes, travel etc.)
3,008 shopping vouchers, bags of food, food parcels	
<b>Crisis awards declined – 847</b>	<b>Non-crisis awards declined - 168</b>
Total: 4,864	Total: 2,385

*NB – all ‘declined’ applicants are supported to gain help elsewhere.*

- 9.9 It was noted that the scheme had been revised on a number of occasions following its creation in 2013 and it was to be looked at again to determine how it can support a plan to reduce poverty. Given the concerns raised around welfare support and proposed budget savings, Members supported an urgent review of welfare support.
- 9.10 Members were impressed by the level of services provided to mitigate the effects of poverty but were exceptionally concerned about the level of foodbank activity. Data showing that from January to December 2021, 1,887 foodbank vouchers had been used. Table 4 breaks down the use of these vouchers.

**Table 4**

<b>Total No. of Food Vouchers - 1,887 (January to December 2021)</b>	
<b>No. of People Supported</b>	<b>Groups Supported</b>
3557 people	218 couples
	116 families
2447 adults	1098 single people
	337 single parents
1110 children.	74 other (including residents seeking asylum and those who were furloughed)

- 9.11 It was apparent to the Committee from the evidence provided that poverty services in Hartlepool are predominantly focused on mitigation and concern was expressed that whilst they help in the ‘here and now’, they do not lead to impactful change. In addition to this, the continuing increase in the level of child poverty in Hartlepool reinforced the opinion that a mitigation only focus service model is not working. This view was shared by a number of national organisations, including the national Trussell Trust Foodbank and The Joseph Rowntree Foundation, with changes planned to move from a ‘hand outs’ to ‘hands up’ model.

- 9.12 Despite these concerns, the Committee was keen to emphasise that mitigation services in Hartlepool are exceptional and need to continue going forward. This, however, needed to be in conjunction with an increased emphasis on the provision of prevention and routes out of poverty. The change in emphasis to be delivered alongside a review of the Child and Family Poverty Strategy, the child poverty needs assessment and development of a different response for crisis, poverty and destitution.
- 9.13 It was recognised that considerable amount of work is being undertaken which could deliver examples of best practice and service improvement, however, they are not yet in a position where the impact of change can be effectively evaluated. On this basis, the Committee recommended that when the Child and Family Poverty Strategy currently being developed is reviewed, a review of best practice / service change in other areas should also be undertaken.

## **10. CONCLUSIONS**

10.1 The Audit and Governance Committee concluded that:-

- 1) Despite the Government's 1999 commitment to eradicating child poverty by 2020, it continues to affect millions of people in the UK, making them unable to heat homes, pay rent, or buy essentials for their children.
- 2) Child poverty is a cross cutting priority for the council and the reviewed Child and Family Poverty Strategy needs to be grounded in real life experiences, creative and innovative with support from experts, practitioners and residents.
- 3) The long term societal impacts of COVID-19 are not fully known, however, it is highly probable that this will further exacerbate poverty levels in Hartlepool.
- 4) The North East is seeing a much steeper rise in child and family poverty than the rest of the UK, this includes families both in and out of work. There are also direct causal links between higher levels of poverty and health inequalities.
- 5) Poverty services in Hartlepool are predominantly focused on mitigation which help in the 'here and now' and do not lead to impactful change. Mitigation services in Hartlepool are, however, exceptional and need to continue going forward, in conjunction with an increased emphasis on the provision of prevention and routes out of poverty.
- 6) Learning from the lived experience is at the heart of delivering socio economic equality and the adoption of the voluntary Socio Economic Duty would be a progressive step in tackling poverty, embedding collaboration, partnership working and resident led service design and development of services. It would also complement the anti-poverty, inclusive economy, and equalities approaches already being undertaken by the Council, including to some degree the Poverty Impact Assessments required as part of the process for submission of reports to Committee.
- 7) Additional activities would be required as part of the adoption and implementation of the Socio Economic Duty and a working group should be established to look further into:

- What would be required to facilitate the formal adopt the Socio Economic Duty;
  - What would be the benefits of its adoption;
  - How might it reduce poverty; and
  - What all of the above mean in practical and financial terms for the Council.
- 8) A considerable amount of work is being undertaken by partners that could deliver examples of best practice and service improvement. Whilst it is recognised that time is needed for the true impact / benefits of these pieces of work to be known in time for consideration as part of the ongoing review of Hartlepool's Child and Family Poverty Strategy, a review of best practice / service change in other areas should be undertaken at a later date as part of a refresh of a refresh of the Strategy.
- 9) The needs of those in destitution are likely to be the most complex, with a need for the most intense support. As levels of destitution increase in Hartlepool, pressure on services and the budgets that provide them continue to rise and a review of welfare service provision is needed to:
- Support an effective Child and Family Poverty Strategy;
  - Move away from responding to crisis; and
  - Focus on impactful interventions that make long term change was supported by the Committee.
- 10) Effective communication with residents (to really listen to them) is essential in the creation of an effective Child and Family Poverty Strategy, and the development of the services that support its implementation. The establishment of a Hartlepool Poverty Truth Commission, as an effective way of facilitating this, would not have to involve significant financial input, although it would require a genuine desire to bring residents around the table.
- 11) Whilst poverty and the pandemic have combined to hit people who are struggling the hardest, Hartlepudlians are resilient, good neighbours who come together to make change happen. The key to success is trust between people, agencies and organisations.
- 12) Whilst the investigation focused on child and family poverty, the factors that influence poverty, and the challenges identified in this report, are equally applicable across the whole population (individuals, couples, pensioners, etc.).
- 13) It is important that the development of schemes and strategies of the impact across individual wards. This being particularly relevant given that whilst 39% of children across Hartlepool live below the headline, some wards have poverty levels in excess of 50%.
- 14) It is important that the implementation of the recommendations contained within the report are monitored by the Audit and Governance Committee.
- 15) Working with third sector organisations (VCS), hyper local needs are identified to inform the development and delivery of targeted activities / interventions at a local level. This includes the targeting of certain areas of the community for school holidays and play schemes, etc.

- 16) Mechanisms, including 'Hartlepool Now', are already in place to raise awareness of help available to residents. However, awareness of the help and support available did need to be explored, with resident involvement in the development process.
- 17) It is essential that mechanisms are in place to ensure that residents are aware of the help and support available to them. Mechanisms including 'Hartlepool Now' were already in place, however, evidence had shown that the effectiveness of signposting could be improved with input from residents.
- 18) Schools have a role to play in the identification of children and families that are experiencing the impacts of poverty. Assistance to help schools do this is available via the 'Poverty Proofing' exercise offered by Children North East. Indication are that only 30% of schools in Hartlepool utilise the service offered by Children North East.
- 19) It is essential that the impact of poverty and socio economic disadvantage be considered as part of the process for consideration of 'key' decisions and development of strategies.

## **11. RECOMMENDATIONS**

- 11.1 The Audit and Governance Committee has taken evidence from a wide range of sources and is clear in its support for the prevention of Child and Family Poverty in Hartlepool. The Committee's key recommendations are that:-
  - 1) Exceptional services are provided in Hartlepool to mitigate the effects of poverty and these are the predominant focus of Hartlepool Council poverty activities. However, going forward, strategies and services need to move towards a more hands up/prevention/route out of poverty focused model lead to deliver more impactful change. As is being planned by the Trussell Trust Foodbank and The Joseph Rowntree Foundation.
  - 2) The voluntary Socio Economic Duty be potentially adopted with the assistance of a working group that will look into:
    - What is required to facilitate the formal adopt the Socio Economic Duty;
    - What would be the benefits of its adoption;
    - How might it reduce poverty; and
    - What all of the above mean in practical and financial terms for the Council.
  - 3) The establishment of a Hartlepool Poverty Truth Commission be progressed with the assistance from Thrive Teesside and the Poverty Truth Network. The purpose being to incorporate lived experience of socio economic disadvantage at all levels of decision making and policy development.
  - 4) As and when the outcomes of ongoing national work in relation to best practice and service improvement becomes available, a further refresh of the new Child and Family Poverty Strategy be undertaken.

- 5) The implementation of the recommendations contained within the report to be monitored by the Audit and Governance Committee. Alongside an update on the poverty position in Hartlepool.
- 6) National targets have been removed for the reduction of poverty, however, national indicators have been created. It would be beneficial to set a series of Hartlepool specific indicators, against which outcomes (including the activities of the Poverty Truth Commission and adoption of the Socio Economic Duty) can be measured.
- 7) Ward based poverty data to be sent to Cllrs on an annual basis.
- 8) In terms of Schools, a poverty update is to be provided at a Head Teachers Briefing, as part of which schools:
  - Will be reminded of the value of the 'Poverty Proofing' exercise offered by Children North East; and
  - Asked to promote the second hand uniforms scheme (Hartlepool Preloved Clothing) as a means of reducing costs for parents.
- 9) In terms of decision making:
  - Impact assessments are a part of the 'key' decision making process and development of strategies and Child and Family Poverty Impact Assessment and Equability and Diversity Impact Assessments are to be amalgamated to simplify the process; and
  - Where the process for monitoring the implementation of decisions identifies a potential 'new' or 'increased' poverty impact, the Impact Assessment should be revisited to gain a full understanding of the position and any action that may be required.
- 10) In terms of debt collection:
  - The impact of debt collection on those experiencing poverty needs to be evaluated with a view to supporting the provision of focused assistance and support; and
  - Where debt is poverty related, options for changes to procedures for debt collection be explored in terms of the provision of additional support / assistance.
- 11) In terms of advice and support:
  - Citizens Advice and other debt counselling services to be promoted to local groups and the VCS.
  - Awareness rolled out to partners/voluntary sectors on initiatives such as Baby Bank/Sensory spot.
- 12) The Council to seek from the Joseph Rowntree Foundation (JRF) an ongoing strategic commitment to work with Hartlepool Borough Council on Hartlepool's poverty issues.

## **12. ACKNOWLEDGEMENTS**

- 12.1 The Committee is grateful to all those who have presented evidence during the course of our investigation. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:-

Hartlepool Borough Council:

- Danielle Swainston, Assistant Director, Joint Commissioning
- Penny Thompson, Head of Housing, Hardship and Welfare Services

External Representatives:

- The Joseph Rowntree Foundation / Housing Trust (Richard Sorton)
- Thrive Teesside / APLE Collective (Tracey Herrington)
- Incontrol-Able (Michael Slimmings)
- Trussell Trust (Lisa Lavender)

**Councillor Rob Cook**  
**CHAIR OF THE AUDIT AND GOVERNANCE COMMITTEE**

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## **14. BACKGROUND PAPERS**

- 14.1 The following background papers were consulted or referred to in the preparation of this report:
- Local indicators of child poverty after housing costs 2019/20, Hirsch & Stone, Loughborough University, May 2021.
  - Shaping the Covid Decade: addressing the long term societal impacts of Covid-19, The British Academy, March 2021.
  - Child Poverty Action Group, [www.cpag.org.uk](http://www.cpag.org.uk).
  - UK Poverty 2021/21, Joseph Rowntree Foundation, January 2021.
  - North East Child Poverty Commission briefing, Amanda Bailey, Newcastle University, May 2021.
  - Joseph Rowntree Foundation - <https://www.jrf.org.uk/>
  - Thrive Teesside - <https://thrive-teesside.org.uk/>
  - North East Child Poverty Commission - <https://www.nechildpoverty.org.uk/>
  - Brent Council - <https://www.brent.gov.uk/media/16416717/poverty-commission-report-launched-17-august-2020.pdf>
  - Just Fair - <https://justfair.org.uk/>
  - The Poverty Truth Network - <https://povertytruthnetwork.org/>
  - Audit and Governance Committee Investigation - Child Poverty and Financial Inclusion in Hartlepool (2010)
  - Audit and Governance Committee – Reports and minutes (9 September 2021, 12 October 2021, 11 November 2021, 16 December 2021, 13 January 2022 and 28 February 2022).

**AUDIT AND GOVERNANCE SCRUTINY ENQUIRY ACTION PLAN****NAME OF COMMITTEE:** Audit and Governance Committee**NAME OF SCRUTINY ENQUIRY:** Child and Family Poverty

+ please detail any risk implications, financial / legal / equality &amp; diversity / staff / asset management considerations

\* please note that for monitoring purposes a date is required rather than using phrases such as 'on-going'

RECOMMENDATION	RESPONSE / PROPOSED ACTION <sup>+</sup>	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
1) Exceptional services are provided in Hartlepool to mitigate the effects of poverty and these are the predominant focus of Hartlepool Council poverty activities. However, going forward, strategies and services need to move towards a more hands up/prevention/route out of poverty focused model lead to deliver more impactful change. As is being planned by the Trussell Trust Foodbank and The Joseph Rowntree Foundation.	Welfare Support has been adjusted to move from a 'hand outs' to 'hands up' model of help.		PT	Complete
	The Head of Service responsible for hardship is part of the Trussell Trust working group leading on implementing their strategic change plan.		PT	Five year plan – to 2027
	Work has begun to develop a local 'anti-poverty' strategic group tasked with grounding any strategic actions based on lived experience and the need to support change.		DS/PT/ and others internal to HBC and external VCSE	2024
2) The voluntary Socio Economic Duty be potentially adopted with the assistance of a working group that will look into:  - What is required to facilitate	Establish task group based on recommendation.		PT	September 2023
	Research other councils/ anchor organisations who have successfully implemented the		PT	Complete



the formal adopt the Socio Economic Duty; - What would be the benefits of its adoption; - How might it reduce poverty; and - What all of the above mean in practical and financial terms for the Council.	duty			
3) The establishment of a Hartlepool Poverty Truth Commission be progressed with the assistance from Thrive Teesside and the Poverty Truth Network. The purpose being to incorporate lived experience of socio economic disadvantage at all levels of decision making and policy development.	<p>Meet with Poverty Truth Network to establish what is required to establish a PTC</p> <p>Work with Voices of Hartlepool, a small resident voice group that aims to become a PTC</p> <p>Identify further residents that want to be actively part of a PTC</p> <p>Engage with Thrive Teesside, local experts in PTC work</p>		<p>DS/ PT – local anti-poverty strategic group</p> <p>PT</p> <p>DS/ PT – local anti-poverty strategic group</p> <p>DS/ PT – local anti-poverty strategic group</p>	<p>Complete</p> <p>Underway</p> <p>Autumn 2023</p> <p>Underway</p>
4) As and when the outcomes of ongoing national work in relation to best practice and service improvement becomes available, a further refresh of the new Child and Family Poverty Strategy be undertaken.	Based on PTC work, adoption of SED, engagement of internal HBC colleagues, external key anchor organisations and VCSE, establish the framework for an anti-poverty strategy using local proven successful action and learning from other areas that have tried something different		DS/ PT – local anti-poverty strategic group	First draft to be consulted on Autumn 2023

**Appendix B**

5) The implementation of the recommendations contained within the report to be monitored by the Audit and Governance Committee. Alongside an update on the poverty position in Hartlepool.	As outlined in all points above		PT	6 monthly check-ins
6) National targets have been removed for the reduction of poverty, however, national indicators have been created. It would be beneficial to set a series of Hartlepool specific indicators, against which outcomes (including the activities of the Poverty Truth Commission and adoption of the Socio Economic Duty) can be measured.	Collate a local data set that indicates need – based on e.g. Free School Meals (financial), Local Council Tax Support, access to Foodbanks, take up on advice and debt services		PT and Hartlepool Financial Inclusion Partnership	Autumn 2023
7) Ward based poverty data to be sent to Cllrs on an annual basis.	This would be based on national datasets (households below average income) together with FSM and LCTS data		PT	Annually
8) In terms of Schools, a poverty update is to be provided at a Head Teachers Briefing, as part of which schools:  - Will be reminded of the value of the 'Poverty Proofing' exercise offered by Children North East; and	PT to provide a briefing at Director's Headteachers briefing outlining Poverty Proofing the School Day opportunities and continuing discussions around the impact of the cost of school uniform to households		PT	Autumn 2023

- Asked to promote the second hand uniforms scheme (Hartlepool Preloved Clothing) as a means of reducing costs for parents.				
<p>9) In terms of decision making:</p> <ul style="list-style-type: none"> <li>- Impact assessments are a part of the 'key' decision making process and development of strategies and Child and Family Poverty Impact Assessment and Equability and Diversity Impact Assessments are to be amalgamated to simplify the process; and</li> <li>- Where the process for monitoring the implementation of decisions identifies a potential 'new' or 'increased' poverty impact, the Impact Assessment should be revisited to gain a full understanding of the position and any action that may be required.</li> </ul>	Task group to be established to begin to address impact assessments, to merge them together and to establish processes to track impact		Catherine Grimwood	Autumn 2023
<p>10) In terms of debt collection:</p> <ul style="list-style-type: none"> <li>- The impact of debt collection on those experiencing poverty needs to be evaluated with a view to</li> </ul>	Task group to be established to determine how the council takes action on households for e.g. non-payment of council tax, the administration and court charges attached to this and the impact of		James Magog, Penny Thompson	No later than March 2024

supporting the provision of focused assistance and support; and - Where debt is poverty related, options for changes to procedures for debt collection be explored in terms of the provision of additional support / assistance.	attachment of earnings on households			
11) In terms of advice and support: - Citizens Advice and other debt counselling services to be promoted to local groups and the VCS; and - Awareness rolled out to partners/voluntary sectors on initiatives such as Baby Bank/Sensory spot.	Communications strategy will be part of the anti-poverty strategy namely – Who offers what help, how and where with a variety of options of how to access the information from traditional methods (print) to digital methods (websites and social media)		DS/ PT – local anti-poverty strategic group	December 2023
12) The Council to seek from the Joseph Rowntree Foundation (JRF) an ongoing strategic commitment to work with Hartlepool Borough Council on Hartlepool's poverty issues.	MD has sent a letter to the new Chief Exec and senior leaders in JRF  This is to be followed up by the strategic poverty group  Ongoing meetings locally with JRF staff working on the ground		DM  PT/DS  PT	Commitment secured no later than December 2023

# FINANCE AND POLICY COMMITTEE

3<sup>RD</sup> JULY 2023



**Subject:** FINAL REPORT – FINAL REPORT –  
ACCESSIBILITY OF COUNCIL SERVICES IN  
HARTLEPOOL FOR THOSE WITH DISABILITIES  
AND LONG TERM CONDITIONS

**Report of:** Audit and Governance Committee

**Decision Type:** Non Key

## 1. COUNCIL PLAN PRIORITY

<b>Hartlepool will be a place:</b>
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

## 2. PURPOSE OF REPORT

- 2.1 To present the findings of the Audit and Governance Committee following completion of its investigation into the Accessibility of Council Services in Hartlepool for those with Disabilities and Long Term Conditions.

## 3. BACKGROUND

- 3.1 The final report, attached at **Appendix A**, outlines the overall aim of the scrutiny investigation, terms of reference, methods of investigation, findings, conclusions, and subsequent recommendations.
- 3.2 The conclusions of the Committee's investigation are summarised as follows:-
- 1) Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has

invested in state-of-the-art facilities such as the Centre for Independent Living (CIL). There is, however, always more that can be done to ensure that the voices of residents are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.

- 2) Hartlepool staff are to be commended on their activities to support and signpost residents with disabilities and long term conditions. Experience being that where services are easy to access for those with disabilities or long term conditions, they are easier for all to access!
- 3) Accessibility is so much more than just physical access and must be given high priority in the development and provision of services. As such:
  - It is essential to have a clear understanding of Hartlepool's disabled community, its needs and challenges if the right services are to be provided in the right way. Only with this will the true level of need be identified to support the requirement for service change and adjustments.
  - Departments need to be supported within the available resources to make any necessary improvements and provided with specialist advice and support where required.
  - The needs of people with disabilities and long term conditions need to be represented in the development and delivery of services. A good example, as identified by the disabled community, is the involvement of CLIP in the development of the Highlight building. This being identified as good practice by the disabled community.
  - Where residents with a disability or long term condition are involved in consultation / engagement as part of the development of services, there is a need to ensure that they are updated on the outcome of consultations and decisions as a matter of course. This should be done at an early stage in the process with participants involved in ongoing conversations throughout the development, deliver and review of services. Not as a one off event.
  - Workforce development is essential in terms of training to increase disability awareness and an understanding of what reasonable adjustments can be made.
- 4) Hartlepool Borough Council should at every opportunity champion the provision of accessible services with its partners, local business' and other organisations across the town.
- 5) Emphasis needs to be placed on the promotion of the social model of disability, changing attitudes towards disabled people and improving disability awareness.
- 6) There needs to be a consistent approach to asking people about additional needs at the first point of contact. Services that are accessed regularly by disabled people and those with long term conditions should share best practice.

- 7) The completion of Impact Assessments to inform the decision making process is an essential part of the service development process. These assessments need to be undertaken as early as possible in the development of services and in order to simplify the process, it has been agreed that the Child and Family Poverty Impact Assessment and Equality and Diversity Impact Assessment will be amalgamated.
  - 8) Many adjustments do not require significant investment in terms of time or resources. A great deal can be achieved by taking a flexible approach to service delivery and making small changes to the way in which things are done. This is where involving disabled people in conversations around service delivery could be particularly beneficial.
  - 9) Subject to compliance with the requirements of the Equality Act, any proposals for the provision of additional activities, or service changes, must be considered alongside the financial challenges facing the local authority and be within available resources.
  - 10) Making every contact count (MECC) needs to be a priority with improved communication between departments to remove the need for residents to repeat their issues.
  - 11) Following calls for involvement in the investigation from groups and individuals across the town, the most significant level of input was received from Hartlepool's Deaf community. The investigation findings have subsequently been heavily influenced by their response and it is recognised that it may be beneficial to undertake further consultation as part of the process for the implementation of the Committee's recommendations.
  - 12) The mystery shopper process was a beneficial element of the consultation process undertaken as part of the investigation and should be used more frequently as a means of assessing lived experiences.
- 3.3 An Action Plan (**Appendix B – 'to follow'**) has been produced to assist Members in consideration of the investigations recommendations.

#### 4. PROPOSALS

- 4.1 No options submitted for consideration other than the recommendation(s).

#### 5. OTHER CONSIDERATIONS/IMPLICATIONS

<b>RISK IMPLICATIONS</b>	Failure to meet in full the requirements of the requirements within the Equality Act 2010 and the Public Sector Equality Duty.
<b>FINANCIAL CONSIDERATIONS</b>	Outlined in the Action Plan produced in response to the recommendations of the investigation (Appendix B).

<b>LEGAL CONSIDERATIONS</b>	None.
<b>CHILD AND FAMILY POVERTY</b>	None.
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	Since the first equality objectives were published in April 2012 the Council has continued to demonstrate that equality and diversity is a core part of what we do as an organisation. The recommendations of the investigation further demonstrate the Councils' commitment to this.
<b>STAFF CONSIDERATIONS</b>	No implications.
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	No implications.
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS</b>	No implications.
<b>CONSULTATION</b>	The Committee undertook an extensive consultation and engagement exercise to seek residents' opinions and lived experiences. The consultation was undertaken via a public survey, organisational / professional survey, quick poll, consultation workshops and mystery shopper exercise. Details of the consultation process are outlined over the page and an evaluation summary is provided in Section 11 of the final report attached at Appendix A.

## 6. RECOMMENDATIONS

6.1 The Finance and Policy Committee is requested to approve the recommendations of the Audit and Governance Committee, following their investigation into the accessibility of council services in Hartlepool for those with disabilities and long term conditions, as detailed below:-

- 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
  - i) Develop a communications campaign to:
    - Highlight the various support schemes and reasonable adjustments that are already in place;
    - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance



with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and

- Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
  - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
  - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
  - iv) Create an “accessibility” tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
- i) A Text Relay Service should be introduced;
  - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
  - iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;
  - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
  - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.
- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).
- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-

- i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and
  - ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
  - i) Read options for documents, to allow access by blind or visually impaired residents;
  - ii) Captions / signing on social media posts / videos; and
  - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
- 7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-
  - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
  - ii) Promotion of use of a document accessibility checker.
- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

## **7. REASONS FOR RECOMMENDATIONS**

- 7.1 To identify opportunities to improve the accessibility of Council services for those with Disabilities and Long Term Conditions.

## 8. BACKGROUND PAPERS

- 8.1 The following background paper(s) were used in the preparation of this report:
- a) Hartlepool Joint Strategic Needs Assessment
  - b) Long Term Conditions – Working Well – Health – Hartlepool Borough Council
  - c) Care Act 2014
  - d) [EQUALITY ACT 2010 PUBLIC SECTOR DUTY.pdf](#)
  - e) Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018
  - f) [https://www.accessible.co.uk/organisations/hartlepool-borough-council/access\\_guides?vtag=false](https://www.accessible.co.uk/organisations/hartlepool-borough-council/access_guides?vtag=false)
  - g) <https://www.gov.uk/government/publications/public-sector-equality-duty>
  - h) <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>
  - i) Audit and Governance Committee – Reports and minutes

## 9. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 22 June 2023
Director of Finance, IT and Digital	Date: 22 June 2023
Director of Legal, Governance and HR	Date: 22 June 2023



# **AUDIT AND GOVERNANCE COMMITTEE FINAL REPORT**

## **ACCESSIBILITY OF COUNCIL SERVICES IN HARTLEPOOL FOR THOSE WITH DISABILITIES AND LONG TERM CONDITIONS**

### **MAY 2023**



## EXECUTIVE SUMMARY

### Introduction

Over many years Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions, including investment in state-of-the-art facilities such as the Centre for Independent Living (CIL) and partnership working with the health and community / voluntary sector. More was, however, needed if Hartlepool was to become a truly accessible town for all residents and visitors, ensuring that the voices of residents living with disabilities and long term conditions are:

- Sought;
- Heard; and
- Incorporated into future Council initiatives which may impact on the physical, economic and social environment of the town.

A Council Motion drew attention to the effect of the COVID-19 pandemic, highlighting the extent of pre-existing health inequalities in many towns and cities, in particularly those in the North of England. With particular reference to high numbers of Hartlepool residents with disabilities and long term conditions, attention was drawn to the impact on their ability to access services, facilities and many aspects of day-to-day life which many take for granted. Further impacting on their physical and mental wellbeing and leading to isolation, loneliness and exclusion.

In response to this Motion, Full Council agreed that the Audit and Governance Committee would undertake a review of Council regeneration & development activity and accessibility to services for those with disabilities and long term conditions. This was to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made.

### Conclusions

- 1) Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL). There is, however, always more that can be done to ensure that the voices of residents are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2) Hartlepool staff are to be commended on their activities to support and signpost residents with disabilities and long term conditions. Experience being that where services are easy to access for those with disabilities or long term conditions, they are easier for all to access!
- 3) Accessibility is so much more than just physical access and must be given high priority in the development and provision of services. As such:
  - It is essential to have a clear understanding of Hartlepool's disabled community, its needs and challenges if the right services are to be provided in the right way. Only with this will the true level of need be identified to support the requirement for service change and adjustments.

- Departments need to be supported within the available resources to make any necessary improvements and provided with specialist advice and support where required.
  - The needs of people with disabilities and long term conditions need to be represented in the development and delivery of services. A good example, as identified by the disabled community, is the involvement of CLIP in the development of the Highlight building. This being identified as good practice by the disabled community.
  - Where residents with a disability or long term condition are involved in consultation / engagement as part of the development of services, there is a need to ensure that they are updated on the outcome of consultations and decisions as a matter of course. This should be done at an early stage in the process with participants involved in ongoing conversations throughout the development, deliver and review of services. Not as a one off event.
  - Workforce development is essential in terms of training to increase disability awareness and an understanding of what reasonable adjustments can be made.
- 4) Hartlepool Borough Council should at every opportunity champion the provision of accessible services with its partners, local business' and other organisations across the town.
  - 5) Emphasis needs to be placed on the promotion of the social model of disability, changing attitudes towards disabled people and improving disability awareness.
  - 6) There needs to be a consistent approach to asking people about additional needs at the first point of contact. Services that are accessed regularly by disabled people and those with long term conditions should share best practice.
  - 7) The completion of Impact Assessments to inform the decision making process is an essential part of the service development process. These assessments need to be undertaken as early as possible in the development of services and in order to simplify the process, it has been agreed that the Child and Family Poverty Impact Assessment and Equality and Diversity Impact Assessment will be amalgamated.
  - 8) Many adjustments do not require significant investment in terms of time or resources. A great deal can be achieved by taking a flexible approach to service delivery and making small changes to the way in which things are done. This is where involving disabled people in conversations around service delivery could be particularly beneficial.
  - 9) Subject to compliance with the requirements of the Equality Act, any proposals for the provision of additional activities, or service changes, must be considered alongside the financial challenges facing the local authority and be within available resources.
  - 10) Making every contact count (MECC) needs to be a priority with improved communication between departments to remove the need for residents to repeat their issues.
  - 11) Following calls for involvement in the investigation from groups and individuals across the town, the most significant level of input was received from Hartlepool's Deaf community. The investigation findings have subsequently been heavily influenced by their response and it is recognised that it may be beneficial to undertake further consultation as part of the process for the implementation of the Committee's recommendations.

- 12) The mystery shopper process was a beneficial element of the consultation process undertaken as part of the investigation and should be used more frequently as a means of assessing lived experiences

## **Recommendations**

- 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
  - i) Develop a communications campaign to:
    - Highlight the various support schemes and reasonable adjustments that are already have in place;
    - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and
    - Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
  - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
  - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
  - iv) Create an "accessibility" tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
  - i) A Text Relay Service should be introduced;
  - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
  - iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;
  - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
  - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.



- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).
- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-
  - i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and
  - ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
  - i) Read options for documents, to allow access by blind or visually impaired residents;
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  - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
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  - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
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- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

## 1. PURPOSE OF REPORT

- 1.1 To present the findings of the Audit and Governance Committee's investigation into the 'Accessibility of Council Services for those with Disabilities and long term Conditions in Hartlepool'.

## 2. SETTING THE SCENE

- 2.1 On the 25<sup>th</sup> February 2021 Full Council approved the below motion and referred the review to the Audit and Governance for consideration.

"The COVID-19 pandemic has highlighted and emphasised the extent of pre-existing health inequalities in many towns and cities and particularly those in the North of England. Hartlepool has high numbers of residents with disabilities and long term conditions which often impact massively on their ability to access services, facilities and many aspects of day-to-day life which many of us take for granted. This can impact on physical and mental wellbeing and subsequently lead to isolation, loneliness and exclusion".

- 2.2 Over many years Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL) and worked closely with health and community and voluntary sector partners.
- 2.3 However, it is recognised that more can be done to make Hartlepool a truly accessible town for all of our residents and visitors to ensure that the voices of residents living with disabilities and long term conditions are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2.4 To this end, the Labour Group called upon the Council to agree that the Audit and Governance Committee examine the contents of the Motion in the next municipal year:

**"A review of Council regeneration & development activity and accessibility to services for those with disabilities and long term conditions to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made"**

- 2.5 In accordance with the process for consideration of mandatory referrals from Full Council, a meeting of the Audit and Governance Committee was convened to receive the referral and 'scope' the process for its consideration (including detailed written evidence and extensive public engagement). Further meetings of the Scrutiny Co-ordinating Committee were subsequently held on the 13 January 2022 and the 28 February 2022 at which the Committee received evidence and information to assist in the formulation of its views, conclusions and recommendations.

### **3. AIM AND TERMS OF REFERENCE FOR THE INVESTIGATION**

- 3.1 The Audit and Governance Committee met to receive the referral and agreed that the aim of its investigation would be to *‘Review the accessibility of Council services for those with disabilities and long term conditions to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made in Hartlepool’.*
- 3.2 The Committee also agreed the ‘scope’ of the investigation, including detailed sources of evidence and mechanisms for extensive public engagement which were to be used to inform the formulation of conclusions and recommendations (as set out in Sections 12 and 13 of this report). A detailed record of the issues raised during these meetings is available from the Council’s Democratic Services and a summary of the terms of reference for the investigation are outlined in **Appendix 1.**

### **4. MEMBERSHIP OF THE AUDIT AND GOVERNANCE COMMITTEE**

- 4.1 The membership of the Audit and Governance Committee was Councillors Councillors Allen\*, Boddy, Cook, Cowie, Creevy\*, Falconer\*, Feeney, Hall, Loynes, D Nicholson\*, Picton, Richardson, Riddle and Smith.

\* Added to the membership during the course of the investigation.

### **5. DEFINITIONS OF ACCESSABILITY, DISABILITY, LIFE-LONG CONDITIONS AND DISCRIMINATION**

- 5.1 As a starting point the Committee gained an understanding of what is meant by ‘accessibility’, ‘disability’, ‘life-long conditions’ and ‘discrimination’ for use as a baseline for the investigation.
- 5.2 Members appreciated that as part of discussions a clear differentiation needed to be made between ‘accessibility’ with ‘usability’:
- Usability being the extent to which a product (such as a device, service, or environment) can be used by specified users to achieve specified goals.
  - Whilst accessibility is:-
    - The concept of whether a product or service can be used by everyone and refers to the design of products, devices, services, or environments to be usable by people with disabilities. Ensuring both "direct access" (i.e. unassisted) and "indirect access" (compatible with a person's assistive technology).
    - More than just physical access, it is also relates to accessibility of lifetime opportunities (e.g. financial inclusion, routes to employment and transport, etc.).

5.3 It was agreed by Members that consideration of both “direct” and “indirect” access needed to form part of the investigation, however, only one of the protected characteristics laid down within the Equality Act was to be focused on. That being ‘disability’.

5.4 It was agreed that the definition of ‘disability’<sup>1</sup> to be applied for the purpose of the investigation would be ‘a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities’.

5.5 Other definitions were:

- Substantial is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task like getting dressed’; and
- Long term conditions<sup>2</sup>. The effect of an impairment is long-term if:
  - (a) It has lasted for at least 12 months,
  - (b) It is likely to last for at least 12 months, or
  - (c) It is likely to last for the rest of the life of the person affected.



## 6. NATIONAL EQUALITY LEGISLATION AND HOW IT APPLIES TO LOCAL AUTHORITIES

6.1 The Committee explored the legal requirements within the Equality Act 2010 and the Public Sector Equality Duty, as detailed below.

The Equality Act 2010. Protection of people from discrimination in the workplace and wider society; and

The Public Sector Equality Duty. Supporting local authorities in making good decisions, ensuring that they are aware of how different people are affected by their activities and are providing activities that are appropriate, accessible and meet different people’s needs.

6.2 Looking specifically at how the Public Sector Equality Duty applies to Hartlepool Borough Council services and activities, Members found that the Council is required to **‘ensure that the needs of all individuals are considered in their day to day work, in shaping policy, delivering services and in relation to their own employees.’** There is also a requirement to have due regard to the need to:-

- a) Eliminate unlawful discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act;
- b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it:

<sup>1</sup> Equality Act 2010

<sup>2</sup> kingsfund.org.uk

- Removing or minimising disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
  - Taking steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it; and
  - Encouraging persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it, with due regard to:
- Tackling prejudice; and
  - Promoting understanding.
- d) Publish equality objectives, at least every four years, and information to demonstrate their compliance with the public sector equality duty.

6.3 The Committee recognised that the Equality Framework<sup>3</sup> for Local Government plays a key part in fulfilling these obligations and was interested to find out how Hartlepool Borough Council services perform against the framework. Members also acknowledged the importance of equality as part of the decision making process and the need to:-

- i) Embed the below principles into the decision making processes and activities:-

*Knowledge* – those who exercise the public body’s functions need to be aware of the requirements of the Equality Duty. Compliance with the Equality Duty involving a conscious approach and state of mind.

*Timeliness* – the Equality Duty must be complied with before and at the time that a particular policy is under consideration or decision is taken – the Equality Duty cannot be satisfied by justifying a decision after it has been taken.

*Real consideration* – consideration of the three aims of the Equality Duty must form an integral part of the decision-making process and must be exercised in substance, with rigor and an open mind in such a way that it influences the final decision.

*Sufficient information* – the decision maker must consider what information they have and what further information is needed in order to give proper consideration to the Equality Duty.

*No delegation* – public bodies are responsible for ensuring that any third parties which exercise functions on their behalf are capable of complying with the Equality Duty, are required to comply with it and that they do so in practice and this duty cannot be delegated.

*Review* – public bodies must have regard to the Equality Duty not only when a policy is developed and decided up but also when it is implemented and reviewed as it is a continuing duty.

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<sup>3</sup> Equality Framework (<https://www.local.gov.uk/publications/equality-framework-local-government-eflg-2021>)

ii) Ensure that key people are aware of the requirements of the Equality Duty:

- Board / Committee members;
- Senior Managers;
- Equality and Diversity staff;
- Human Resources staff;
- Policy makers;
- Communication staff;
- Analysts;
- Front line staff; and
- Procurement and Commissioning staff.

6.4 The Committee gained an understanding of the mechanisms the local authority already has in place to ensure that the principles of the framework are embedded into the decision making processes and activities. Members were familiar with the requirement for completion of various needs assessments as part of decision making processes and it was suggested that it could be beneficial to consider merging the equality and poverty assessments going forward.

6.5 In addition to this, attention was drawn to the availability of awareness training in terms of the provision of services for people with disabilities and long term conditions. This was discussed in greater detail later in the report.

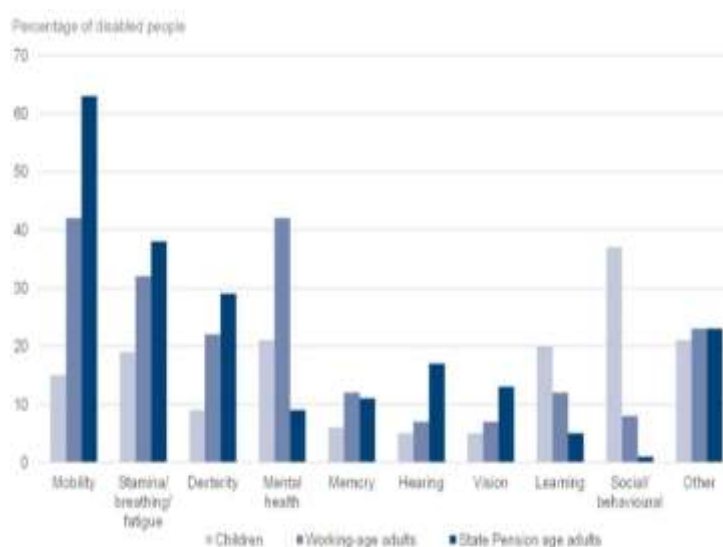
## 7. DISABILITY AND LONG TERM CONDITIONS - NATIONAL AND LOCAL DATA

7.1 Evidence provided allowed the Committee to compare and contrast data in relation to disabilities and long term conditions on a national and local basis.

### National Levels of Disability

7.2 Members noted with interest that Census 2021 results for England showed that in England a smaller proportion, but larger number, of people reporting a disability (17.7%, 9.8 million), compared with 2011 (19.3%, 9.4 million)<sup>4</sup>. Further examination of the data also showed that:

- 18.7% of females report a disability, compared to 16.5% of males
- 59% of people aged 80 and over reported a disability
- 9% of children are disabled<sup>5</sup>
- 21% of working age adults are disabled<sup>6</sup>
- 42% of pension age adults are disabled<sup>6</sup>
- Disabilities cover a range of Conditions



<sup>4</sup> Census 2021

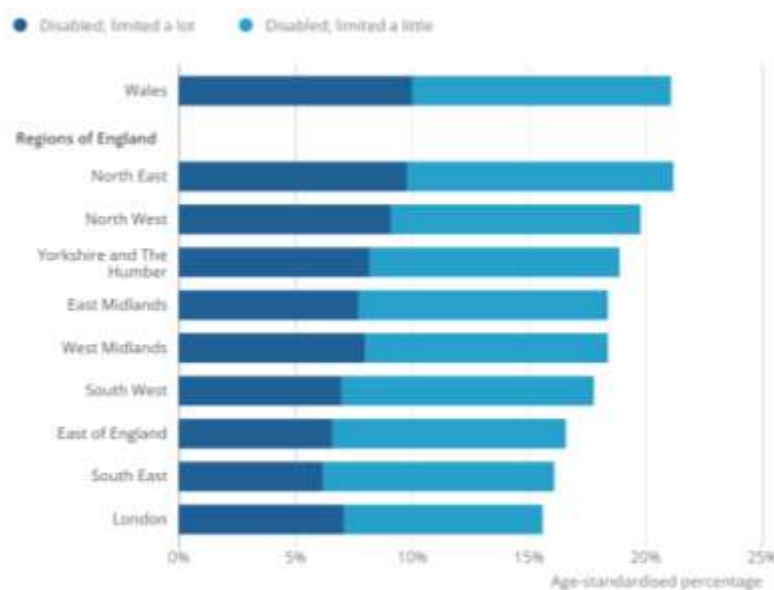
<sup>5</sup> UK disability statistics: Prevalence and life experiences – House of commons Research briefing July 2022

7.3 The impact of deprivation on the health and wellbeing of populations was recognised by the Committee, however, Members were concerned to find that whilst 21.6% of 40 to 44 year-olds were disabled in the most deprived areas only 8.1% were disabled in the least deprived areas. Concern was also expressed regarding the impact of the increasing costs of living for disabled residents, with:

- i) 53% of disabled people employed, compared to 82% of non-disabled people (disabled people being 3 times as likely to be economically inactive<sup>6</sup>).
- i) Life costs are £583 more on average a month if you're disabled and for almost a quarter (24%) of families with disabled children, extra costs amount to over £1,000 a month<sup>7</sup>.
- ii) After housing costs, the proportion of working age disabled people living in poverty is 27%. This is, however, higher than the proportion of working age non-disabled people at 19%<sup>8</sup>.

#### Regional and Hartlepool Levels of Disability

7.4 In setting the context for the investigation, the Committee was not surprised to find (as shown in Table 1) that the North East of England has the highest proportion of people reporting a disability in England (21.2%, 567,000), compared to the national rate of 17.7%<sup>9</sup>.



**Table 1 - How disability (age-standardised) varies across local authorities in England and Wales, 2021**

7.5 Breaking this down even further to focus specifically on the position in Hartlepool, Members discovered that:

- i) 21,150 people in Hartlepool have some form of disability (22.9% of the population compared to 17.7% in England)<sup>8</sup>;

<sup>6</sup> Labour Market Survey (<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/datasets/labourmarketstatusofdisabledpeoplea08>) quoted by Scope at <https://www.scope.org.uk/media/disability-facts-figures/>

<sup>7</sup> Scope "The Disability Price Tag" report (2019) <https://www.scope.org.uk/campaigns/extra-costs/disability-price-tag/>

<sup>8</sup> Scope's analysis of the Government's "Households Below Average Income" report (2019-20) (<https://www.gov.uk/government/statistics/households-below-average-income-for-financial-years-ending-1995-to-2020/households-below-average-income-an-analysis-of-the-income-distribution-fye-1995-to-fye-2020>) quoted at <https://www.scope.org.uk/media/disability-facts-figures/>

<sup>9</sup> Census 2021



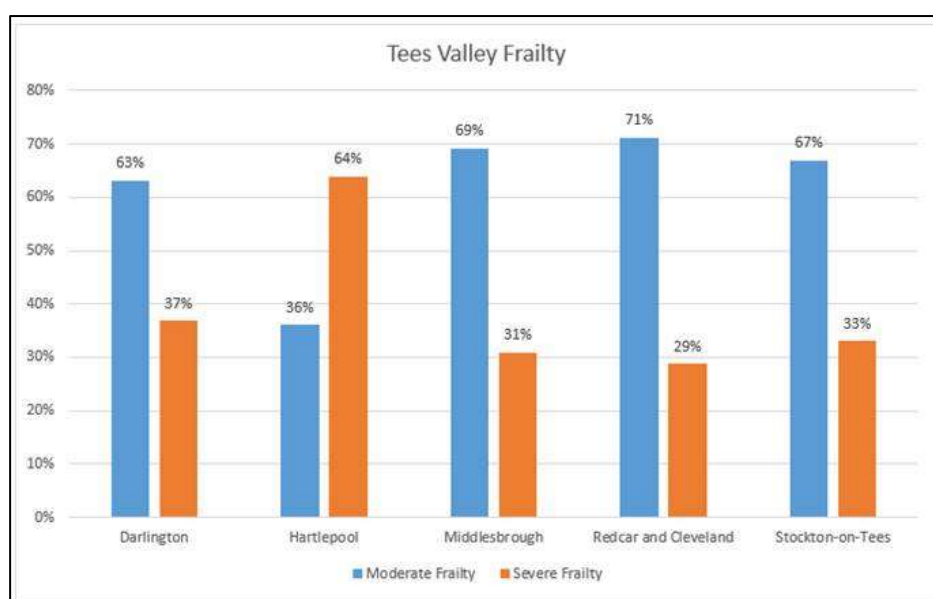
- ii) 11,645 females in Hartlepool have a disability (23.9% of the female population compared to 18.7% in England)<sup>8</sup>;
- iii) 9,490 males in Hartlepool have a disability (21.7% of the male population compared to 16.5% in England)<sup>10</sup>;
- iv) Rates of disability in Hartlepool are the highest in the Tees Valley (as shown in Table 2)<sup>9</sup>; and
- v) The percentage of homes in Hartlepool with 2 or more disabled residents is the highest in the Tees Valley, and is above the England and Wales figure (as shown in Table 4)<sup>9</sup>.
- vi) The prevalence of sever frailty in Hartlepool is higher than other Tees Valley authorities, where frailty is predominantly moderate (as shown in Table 3<sup>11</sup>).

Area	Disabled under the Equality Act (%)
England	17.7%
Hartlepool	22.9
Middlesbrough	21.9
Redcar and Cleveland	21.4
Stockton-on-Tees	20.1
Darlington	19.4

**Table 2 – Disability Rates across the Tees Valley (2021)<sup>9</sup>**

**Table 3 - How disability within households varied across local authorities in England and Wales, 2021<sup>9</sup>**

Area	1 person disabled in household (%)	2 or more people disabled in household (%)
England and Wales	25.6	6.7
Hartlepool	30.9	8.7
Middlesbrough	29.4	7.8
Redcar and Cleveland	30.1	8.2
Stockton-on-Tees	27.4	7.7
Darlington	27.2	6.6



**Table 4 – Frailty Levels<sup>10</sup>**

<sup>10</sup> Census 2021

<sup>11</sup> [\[MI\] GP Contract Services - England, 2021-22 - NHS Digital](#)



- 7.6 The Committee was concerned to find that across the Tees Valley, Hartlepool not only has the highest rate of disability, but also the highest percentage of households with two or more disabled residents and highest prevalence of severe frailty. The data provided reinforced to Members the importance of having in place truly accessible services.

## 8. PARTNER EVIDENCE

- 8.1 Evidence provided by the Community Led Inclusion Partnership (CLIP) brought to the attention of the Committee three models of disability (charity, medical and social) and provided a first-hand / lived experience perspective on each (detailed in Table 5).

**Table 5 – Disability Models**

Model	First-hand perspective
<i>The Charity Model</i>	Can depict disabled people as victims of circumstance, deserving of pity, unable to look after themselves or manage their own affairs and need charity in order to survive.
<i>The Medical Model</i>	Can assume that the first step solution is to find a cure or to use terminology to make disabled people more “normal”.
<i>The Social Model</i>	Depicts the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical or social barriers. Barriers can be physical, like buildings not having accessible toilets. Or they can be caused by people's attitudes to difference, like assuming disabled people can't do certain things.

- 8.2 Member were interested to find that the charity and medical models of disability tend to be used by non-disabled people to define / explain disability and that the charity model in particular was not supported by the disabled community due to the exceptionally negative perception it creates. Members noted these concerns and supported the view that going forward emphasis needed to be placed on the promotion of the social model of disability, changing attitudes towards disabled people, improving disability awareness and learning from feedback obtained from the disabled community. Particular emphasis to be placed on the importance of feedback from, and involvement with, the disabled community to improve:
- i) Access to social activities, employment, transport, education, parking, healthcare (Inc. GP appointments), independent living, local places, drop curbs and events (some of which was within the remit of the investigation);
  - ii) Understanding of the disabled community, its needs and challenges;
  - iii) Co-production of services development and delivery in Hartlepool; and
  - iv) Workforce and Councillor Disability awareness.

## 9. CONSULTATION AND ENGAGEMENT

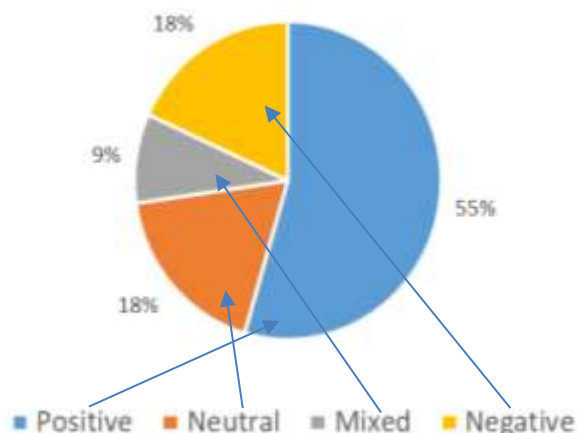
- 9.1 The Committee undertook an extensive consultation and engagement exercise between the 9<sup>th</sup> May 2022 and the 23<sup>rd</sup> October 2022 to seek residents' opinions and lived experiences. The consultation was undertaken via a public survey, organisational / professional survey, quick poll, consultation workshops and mystery shopper exercise. Details of the consultation process are outlined over the page and an evaluation summary is provided in Section 11.

9.2 **Public Survey and Quick Poll** - An online public survey and quick poll was run on the public consultation project page via the Your Say consultation platform. The quick poll posing the question “On the whole, do you think the Council does enough to make its services accessible for people with disabilities and their carers?”

9.3 Extensive efforts were made to promote the consultation, and ensure that the survey itself was accessible to all. Details of how this was achieved are outlined in **Appendix 2**.

9.4 58 residents participated in the consultation, of which 14 participated in the quick poll and 49 in the survey<sup>12</sup>. Members were disappointed to find that 78% (11 people) had said they did not think the Council does enough to make its services accessible for people with disabilities and their carers. It was, however, clear that the number of responses had been very low and the statistical relevance of the data needed to be taken in to consideration.

9.5 Whilst bearing in mind the statistical relevance of the data provided, given the level of response, Members were pleased to find that the majority of respondents had a positive experience when accessing Council services (as shown in Chart 1).



**Chart 1** - How was your experience?

9.6 Members noted that compared to other projects, and in view of how heavily the consultation had been promoted, it had been expected that responses would have been higher. Overall, the majority of visits were from the project page and unusually, only a small number of visitors came via social media. In addition to this, the Committee noted that face to face engagement, including the Mystery Shopper, had proven to be an exceptionally beneficial addition to the wide mix of online and offline consultation measures implemented.

9.7 The Committee also noted with interest that:

- i) Of those who had asked for assistance, the majority (26%) had asked for help from their social worker or from staff in one of the community hubs (18%). It

<sup>12</sup> individuals may participate in more than one activity

was felt that this was very positive, as this is one of the primary purposes of the hubs.

- ii) Only 3% of respondents had asked for help with online services. This was surprising as many of the departmental survey responses highlighted that assistance was being used by the public. It is, however, unclear if the low level of those asking for assistance was due to the user friendly nature of online services, or whether they were just not being used.
- iii) 66% of respondents had requested assistance since 2018. Members found it encouraging that people felt increasingly able, and willing to ask for assistance. The most commonly selected factors that made for a positive experience were; accessing the service online, information being easy to find, understand and use, staff explained things in a way that could be understood. The Committee was pleased to find that throughout the consultation helpfulness of staff (especially reception staff) was voiced.
- iv) In terms of what could be done to build on positive experiences or improve further, the most common suggestions were:
  - The provision of staff training and awareness / empathy around disability and access needs;
  - Physical access to buildings (including ensuring that all Entry doors to the council buildings have automatic doors or a button visible to press to be able to open the door from a wheelchair);
  - Increased use of digital technology, which had been a recurring suggestion; and
  - Increasing capacity to reduce waiting times and making physical access improvements.
- v) Members were disappointed that a lack of staff knowledge about, or appreciation of, service users' needs had been a recurring theme in terms of negative experiences in accessing services. There was also concern that problems with online services (e.g. not being able to find information on the website), phones not being answered promptly and not being able to speak to the person they wanted to, were recurring issues. Members were, however, optimistic that many of these issues could be easily rectified.

9.8 The Committee considered the following potential options for improvement:-

- i) Increased promotion of Community Hubs as a place where people can find support to access other council services. It was highlighted that the Hubs are already set up to provide this service and Members were of the view that it would be beneficial to promote this service more to make other people aware that it is available.
- ii) Promote the assistance that is available for people who need help going online. As a service that many departments are already able to provide, Members were of the view that it could be beneficial to promote this service more, particularly to those who may find using online services particularly difficult. There was, however, a need to bear in mind that digital exclusion is an issue locally and some residents cannot easily access services online.

- iii) Look at what the uptake is for home visits for service users who cannot attend in person. Again this was something that many services were able to offer, although data from the survey suggested that uptake was low. It was unclear if this was because the services were able to help people in other ways or because people were not aware that it was an option. The Committee recognised that additional work to explore this was needed.
- iv) Improved staff training and awareness around disability, including access needs and lived experiences. Members were pleased to find that almost everyone had been quick to praise staff but supported the need for additional training and awareness raising.
- v) Linking postal letters to online accounts; the letter would appear in their online account (as well as being posted if this is a legal requirement) with the option to respond via the account. The Committee recognised that additional work to explore this was needed.
- vi) A “live chat” function via the website. It was suggested that this could be useful for all customers, but particularly for deaf people who use written English, as an instant means of communicating with customer services. The Committee recognised that additional work to explore this was needed.
- vii) Improve physical access to council buildings (Civic Centre and Bevan House in particular). The Committee recognised that additional work was needed to explore any potential outstanding access.
- viii) Improvements to the website and making information easier to find online. The Committee appreciated the issues raised in relation to accessibility of the website (including the absence of a document read function for people with disabilities). Members supported the need for a review of the Council website to ensure that all content meets web content accessibility guidelines going forward.

9.9 **Organisational / Professional Survey** - Organisations were asked to complete a survey based on their experience of assisting clients to use Council services or any anecdotal feedback they had received from their clients about their own experiences of accessing services. Despite being heavily promoted to a wide range of organisations only one response was received from Hartlepool Deaf Centre and details of the free text comments received are outlined in **Appendix 3**.

9.10 It came as no surprise to the Committee that many of the points raised mirrored those received via the public survey. These included:

- i) Good customer service and friendly, helpful and understanding staff.
- ii) Confusion on behalf of the Council. This could take the form of lost paper work, directing someone to the wrong room or failing to get back to people.
- iii) The need for the Council to be more creative in how it interacts with deaf people, for example advertising events as being deaf-friendly (and making them so). Also, reducing the reliance on interpreters by investigating other solutions.

- iv) There is a need to listen to people with disabilities and long term conditions and ensure that updating them on the outcome of consultation is undertaken as a matter of course. Concern had been expressed that none of the improvements identified by the Task and Finish Group established to improve accessibility for deaf people at the Community Hub have been implemented and no feedback provided.

9.11 **Consultation Workshops** - As a further mechanism to obtain public input a range of workshops were held with local community support organisations (CLIP, Hartlepool Deaf Centre, Hartlepool and Hartlepool Healthwatch) alongside an open session in the Central Hub / Library. BSL interpreters were provided for the workshops and a BSL signed video was embedded into the consultation project page and shared widely on social media to increase awareness amongst the Deaf community

9.12 Each workshop explored:-

- i) What the local authority does well?
- ii) What are the challenges in accessing council services
- iii) How good is the local authority at providing help?
- iv) How should the local authority approach identifying and understanding people's needs?

9.13 Members welcomed the breadth and balance of comments received and found the examples of lived experience gathered via the workshops particularly informative. Details of the evidence provided as a result of the workshops is summarised in **Appendix 4.**

9.14 **Mystery Shopper** - A mystery shopper exercise was carried out with volunteer shoppers recruited from some of the groups that took part in the earlier consultation sessions (Healthwatch and the deaf community (via the Deaf Centre)). The below scenarios were designed, and chosen by volunteers, for a range of frontline Council services and guidance provided on how to carry out the mystery shopper events and submit feedback.

- i) Apply for / renew a bus pass
- ii) Visit Hartlepool Art Gallery
- iii) Visit a leisure centre
- iv) Carry out a task on the HBC website x 2
- v) Reablement or occupational therapy
- vi) Visit a Community Hub or library
- vii) Make an enquiry at the Civic Centre reception

9.15 Members welcomed this alternative option for the gathering of evidence and suggested that it be used again where appropriate. The Committee did, however, exercise caution in relation to the results of the exercise, given the very small study and limited number of participants and services. The feedback was alongside the wider sources of evidence presented as part of the investigation. In doing so, Members learned that eight service areas had been tested by seven mystery shoppers, four of which had been "happy" or "very happy" with their visit, while 2 had been "unhappy". The results highlighted to the Committee issues in terms of:-

- i) Access to / availability of information in an accessible format - All felt information was very easy to find.
- ii) Staff interactions:
  - Arrival and first impressions were mixed with respondents' impressions either really positive or negative.
  - Staff were visible and approachability feedback was good with those who answered this question all complementary about front-of-house staff.
- iii) Getting around the site (a physical site and the HBC website):
  - Negative feedback included the lift being out of order for a long time in the Central Hub and different information appearing on the website each time the respondent looked.
  - The website, in particular, received negative feedback with respondents finding it was difficult to use with unclear navigation, missing and out of date information and expired links.
- iv) Facilities - Feedback on the facilities provided in venues (where tested) was generally positive. However, the toilet facilities in the Central Hub were described as "abysmal".
- v) Deaf access - Feedback tallied with deaf respondents comments during the wider consultation. Staff were unable to deal with their disability and the lack of easy and immediate access to a BSL interpretation service was a major stumbling block to Deaf residents being able to access services in the same way that a hearing person would be able to (even if disabled in other ways).

9.16 Summarising the results of the mystery shopper exercise, the Committee concluded that from a positive perspective, staff are consistently described as friendly and helpful and basic information about the services tested was "easy to find". From a negative perspective, the Deaf mystery shopper experienced additional difficulties in carrying out their scenarios to those shoppers with other types of disability. In addition to this, there had been a view that:

- The website is difficult to use and does not meet accessibility requirements.
- Poor outcomes (e.g. signposting and keeping people informed and updated).
- The ongoing effects of the Covid pandemic had led to reduced services.
- Multiple trips / appointments had to be made to find out simple pieces of information.

## 10. DEPARTMENTAL SURVEY

10.1 In addition to the consultation and engagement exercise referenced in Section 9, a piece of work was carried out to gain an understanding of accessibility across Council departments, with each department asked about:

- i) Their current access arrangements;
- ii) Who their customer base was; and
- iii) What barriers they had to making the service more accessible.

10.2 The Committee was pleased to find that a total of 47 responses had been received from across all departments, a list of which together with details of the survey results is outlined in **Appendix 5**. Based on the survey results, Members:-

- i) Welcomed confirmation that the majority of services remain face to face, by phone or email but acknowledged the role of on-line and hybrid working as part of the package of delivery mechanisms to meet the diverse needs of Hartlepool's population.
- ii) Noted that whilst some services actively ask people about additional needs when they make contact, others appear to take a more passive approach. The need for a more consistent approach was apparent to the Committee.
- iii) Had anticipated that the most common adjustment would be the provision of interpreters (13%), both British Sign Language (BSL) interpreters and other languages. However, the range of other barriers were noted with interest:
  - Limitations of existing buildings
  - Reliance on other services / agencies (e.g. to provide front of house services or alternative meeting locations)
  - Technology (either due to expense of upgrading to keep pace with guidance or a lack of knowledge of how technology can be used to enhance access)
  - Lack of engagement with the disabled community
  - Lack of specialist support / advice and insufficient need identified to justify the change were also comparatively high.
- iv) Were of the view that a review of information / communication materials produced by the Council, and production of guidance to assist officers in the production of documents, to ensure consistency of production, would be beneficial.
- v) Noted with interest that the use of the staff intranet as one of the main points for access information and training. Further to discussion, it was felt that a review of accessibility information (e.g. what is available and in what form) would be beneficial to assist in enhancing staff and Councillor training and awareness. This being particularly useful for those staff whose roles do not involve regular contact with disabled people.
- vi) Had anticipated that finance and capacity would be identified as key barriers to making services more accessible. Subsequently, the survey results came as no surprise with 21% of responses identifying finance / budget, and 8% identifying lack of capacity, as barriers. In addition to this, an improved digital offer, more engagement with the disabled community, access to experts / specialist advice and a better understanding of issues were all identified as ways of making services more accessible.
- vii) Welcomed assurances that some services were thought to be fully accessible, however, it was suggested that more could perhaps be done across all departments to identify people with additional needs, share information and seek feedback from users to see if their experience of using the service matches up with the departmental view.
- viii) Explored the provision of adjustments and:
  - Expressed concern that a number of services do not have anything in place for service users that need adjustments to be made:

- Current arrangements are enough – 1%
- Not applicable – 1%
- Information says to ask if adjustments are required (i.e. only available on request) – 1%
- Nothing currently in place – 1%

Members appreciated that this could be due to an assumption that service are fully accessible so no further adjustment would be required, it could also be that service users with additional needs do not use the service because there are no adjustments available. With this in mind, Members reiterated the need for consistency of approach in assessing / asking about additional needs at the first point of contact.

- Found that most adjustments were made on an as-required basis and almost half of adjustments had been in place for a “long time / unknown”. Members were of the view that as most adjustments seem to be made on an ad-hoc basis, or have been in place for a very long time, a refresh of how and when adjustments are embedded may be timely.
- Learned that by far the most common ways of making service users aware of adjustments were:
  - Via information / communications – 22%
  - Via the Council website – 20%
  - Through initial contact with staff (i.e. people are told when they first speak to a member of staff) – 19%
  - Through general contact with staff (unspecified which stage of contact) – 19%

The Committee suggested that it might be useful to carry out a review of information / communications materials put out by the Council to see what proportion of materials include accessibility information and what form this takes.

- ix) Noted indications that the majority of staff know what adjustments, alternative arrangements or additional support can be put in place to support someone who needs it. Interestingly 6% of comments referenced finding information on the staff intranet, however, indications were that this is not always easy. The Committee was of the view that it might be beneficial to carry out a review of accessibility information on the staff intranet to ensure that the information provided is current and up to date and also that general information that would be useful to all staff is included and, most importantly, easy to find. This could include, for example, plain-English writing guides, web content guidelines, carrying out access audits, etc. This could be particularly useful for those staff whose roles do not involve regular contact with disabled people so the information is ready to hand when needed.

## **11. EVALUATION OF CONSULTATION / ENGAGEMENT RESULTS**

- 11.1 With due regard to the issues raised via the consultation and engagement process, Table 6 (over the page) summarises the key findings presented and a number of potential actions identified by the Committee.



**Table 6 – Evaluation of Consultation and Engagement Results**

Key findings from the consultation	Potential Action
<p>1. People are not always aware that they can have help. Whether because they don't know that help is available or because they think they won't be eligible.</p> <p>A number of issues had been raised in relation to public and staff awareness of arrangements to facilitate the accessibility of services, including access to Council buildings for assistance dogs. Contact was made with Civic Centre, Hartlepool Central Library, Hartlepool Art Gallery, The Bis and The CIL and all services advised they would welcome those with assistance dogs.</p>	<p>Increased promotion of:</p> <ul style="list-style-type: none"> <li>- Assistance schemes and the help available to access services – ensure that this promotion is targeted towards disabled service users i.e. in a form and location that is accessible to them.</li> <li>- Community hubs as a place where people can find support to access other council services.</li> <li>- The role of Community navigators</li> <li>- The various support available to help people with getting online e.g. at the Community Hubs and through community projects such as Hartlepower and Project 65.</li> </ul> <p>Explore the uptake for home visits for service users who cannot attend in person with a view to identifying the need for increased promotion.</p> <p>Clearly display in buildings signs that shows help is available for people with disabilities / long term conditions.</p>
<p>2. Whether the level of service a disabled person receives is poor or excellent very much depends on who they get when they make contact.</p> <p>There seems to be a gap between focussed individual provisions (which is usually very good) and generic or universal services which are not so good. Also services which are used to dealing with disabled people regularly are better at it than those which only rarely have a disabled person make contact.</p>	<p>Improved staff training and awareness around disability, including access needs and lived experiences, including the development of a staff training and disability awareness package.</p> <p>Publicise a set of standards of service that disabled people can expect to receive and ensure that these standards are maintained.</p>
<p>3. Lessons learned from dealing with individual issues are not being embedded for lasting change. This means that issues recur for the same individual or for others.</p>	<p>Ensure lesson learning is shared through team meetings, board meetings and staff supervision sessions and that this is embedded into processes.</p>
<p>4. Consistency is a problem when a disabled person's enquiry or service request goes across teams or departments with people being told one thing by one team and something else by another.</p>	<p>Investigate how this can be mitigated.</p>

Disabled people find having to constantly repeat their stories to different staff members exhausting and demoralising, This is a barrier to some in making contact.	
5. The Council's website and Hartlepool Online are difficult to use for people with disabilities and do not meet WCAG requirements.	<p>Review the Council website and Hartlepool Online to ensure that they are compliant with WCAG guidance. In doing so:</p> <ul style="list-style-type: none"> <li>- Include consumer testing in the review of the web site and Hartlepool Online to check functionality.</li> <li>- Explore the potential of a "live chat" function via the website.</li> </ul>
6. Going digital and moving services online can be beneficial for disabled people, however, digital inclusion / exclusion remains an issue.	Ensure that digital access is not the only means that people can find information or make contact with the Council.
<p>7. The Deaf Community have particular difficulties in contacting the council and accessing services due to a lack of BSL interpretation facilities in community buildings and an over-reliance on written English and telephone contact.</p> <p>Particular attention was drawn to the provision of assistance to those who cannot use telephones to make contact with the Council, or progress contact, via telephone. A text relay service and text messaging service had previously been available.</p>	<p>i) Investigate the feasibility of introducing video calling, to sit alongside traditional phone and email functions to allow a Deaf person to communicate with a BSL signer, and Relay UK.</p> <p>ii) The Text Relay Service has already been reintroduced, however, it could be better advertised.</p> <p>iii) Increase the number of BSL trained front line staff with the aim that there will always be at least one BSL trained staff member in each community building at any one time.</p>
8. Council efforts to make things easier for people with autism and dementia are laudable but people with other forms of disability feel forgotten, particularly the Deaf Community, parents of profoundly disabled children and those with Downs syndrome.	<p>Ensure that any disability awareness training includes a wide range of disabilities.</p> <p>Involve people with a wide range of disabilities, and groups such as CLIP, in conversations around improving access / services.</p>
9. Some disabled people feel that although they are regularly asked to give feedback or input into consultations around accessibility nothing every changes and their recommendations are not implemented	<p>Ensure that where consultation is carried out that the "feedback loop" is closed so that people's contributions are acknowledged and acted upon.</p> <p>Ensure that they are informed of the outcome of the consultation to tell them what has been changed and where change has not been possible why it was not possible.</p>

	Where changes requested are not possible ensure that the conversation is continued to try and find alternative outcomes rather than just making that the end of the discussion.
10. A lack of public toilets in Hartlepool is having an impact on disabled people's ability to get out and about and engage in their communities. Where toilets are available the accessible toilet is often locked	Look to try and increase the provision of public toilets, or at least make the existing ones more accessible.
11. Disabled parking is an issue, the location of parking meters in relation to the disabled bays and the size of the text on the sign boards	Investigate how this can be improved.
12. In conversations around disability and accessibility, children and young disabled people are being forgotten, particularly the 16-18 age group who are between school and adult social care support	Expand consultations and conversations to include children and young people to get their perspective.
13. There appears to be an issue with people not getting called back and enquiries / requests not being followed up. This is unlikely to be confined to disabled people but the impact on disabled people is much greater, particularly for those with problems with memory / understanding.  Disabled people and carers reported not getting called back caused feelings of frustration and stress, and having to be the one to chase things up all the time was exhausting and "yet another thing to have to remember to do".	Ensure that staff training on disability and awareness includes the importance of calling people back and an understanding of why it is such an issue for disabled people and carers. Ensure this training is rolled out to all staff, not just front line staff.
14. Household waste recycling centre is less accessible than it used to be. Having to book an appointment in advance is difficult for those who can't plan ahead because of their health conditions or caring responsibilities. This is compounded for those who can't get online easily. No assistance on site anymore means people with reduced strength or limited mobility cannot get the items out of the car.	Review the need for pre-booked appointments at HWRC. If this is being retained as a cost cutting measure consider how the accessibility implications can be mitigated e.g. pre-booked for weekends and drop-in on weekdays or "just turn up" passes for disabled people.
15. Despite access aids at the civic centre (including BSL trained staff, step-free access, hearing loop, etc.)	Promote the range of services that can be accessed at other venues such as the Community Hubs where there is

many elderly / disabled people consider the civic to be inaccessible due to the lack of disabled parking at the building.	disabled parking so people can go elsewhere.  Investigate how the disabled parking at the rear of the building can be better utilised (without having to walk all the way around the building)
16. Awareness of the role and range of services offered by the Community Hubs and Community Navigators is low.	Deliver a communications campaign to raise awareness. Make sure this is targeted to elderly / disabled people (i.e. in a suitable format and location).
17. The need to look more at planning and implementation to ensure accessibility is not treated as an after-thought or add-on. If services are easy to access for people with accessibility issues then it is easy to access for everyone.	Undertake an internal review of literature and processes within the Council to see if they meet requirements/legal guidance/council plans similar to the physical building audit but of our literature and website.

11.2 Whilst it was recognised that some adjustments could require more significant investment which would not be possible at this time, given the Council's current financial position, it was suggested that others may be possible quickly, easily and for very little cost. During the course of the consultation a number of potential "quick wins" were identified that could be implemented whilst more fundamental improvements are considered. Those were as follows:-

- i) Plan and implement an ongoing communications campaign, in an accessible format / location, to highlight all the various support schemes and reasonable adjustments that we already have in place and ensure this is repeated regularly. Services which offer adjustments for disabled people should ensure that this is included in all the information they put out. Ensure this is put out in a range of communications methods, not just on social media.
- ii) When time-critical videos are posted on social media and there is not time to set up closed captions first the video should include a text card to say that subtitles will be added as soon as possible – and ensure that this is followed up. This should be standard for all videos. For videos which are not time-critical subtitles should be added before they are uploaded.
- iii) Some people find the range of Council touch-points confusing and don't know where they need to be for particular services. Communicate that there are a number of "one-stop-shop" touch points such as civic centre reception and the Community Hubs where people can get everything done in one place, this will also make people who find accessing the civic difficult aware that they can get the same services elsewhere.
- iv) Promote the role of the Community Hubs and Community Navigators more to increase understanding of the services they offer.
- v) Ensure that community buildings and touch points have a range of posters and leaflets on display for a range of disability support groups and charities.
- vi) Introduce a facility for people coming in to reception to ask for a private room using the small rooms off the reception area if they wish to discuss something

confidential and make people aware that this is available (e.g. by putting signs on the glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).

- vii) Circulate some basic guidance to staff on font size and type, use of plain English and how to book an interpreter when one is required and put this information in an easy to find location on the intranet.

## **12. CONCLUSIONS**

### **12.1 The Audit and Governance Committee concluded that:-**

- 1) Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL). There is, however, always more that can be done to ensure that the voices of residents are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2) Hartlepool staff are to be commended on their activities to support and signpost residents with disabilities and long term conditions. Experience being that where services are easy to access for those with disabilities or long term conditions, they are easier for all to access!
- 3) Accessibility is so much more than just physical access and must be given high priority in the development and provision of services. As such:
  - It is essential to have a clear understanding of Hartlepool's disabled community, its needs and challenges if the right services are to be provided in the right way. Only with this will the true level of need be identified to support the requirement for service change and adjustments.
  - Departments need to be supported within the available resources to make any necessary improvements and provided with specialist advice and support where required.
  - The needs of people with disabilities and long term conditions need to be represented in the development and delivery of services. A good example, as identified by the disabled community, is the involvement of CLIP in the development of the Highlight building. This being identified as good practice by the disabled community.
  - Where residents with a disability or long term condition are involved in consultation / engagement as part of the development of services, there is a need to ensure that they are updated on the outcome of consultations and decisions as a matter of course. This should be done at an early stage in the process with participants involved in ongoing conversations throughout the development, deliver and review of services. Not as a one off event.
  - Workforce development is essential in terms of training to increase disability awareness and an understanding of what reasonable adjustments can be made.

- 4) Hartlepool Borough Council should at every opportunity champion the provision of accessible services with its partners, local business' and other organisations across the town.
- 5) Emphasis needs to be placed on the promotion of the social model of disability, changing attitudes towards disabled people and improving disability awareness.
- 6) There needs to be a consistent approach to asking people about additional needs at the first point of contact. Services that are accessed regularly by disabled people and those with long term conditions should share best practice.
- 7) The completion of Impact Assessments to inform the decision making process is an essential part of the service development process. These assessments need to be undertaken as early as possible in the development of services and in order to simplify the process, it has been agreed that the Child and Family Poverty Impact Assessment and Equality and Diversity Impact Assessment will be amalgamated.
- 8) Many adjustments do not require significant investment in terms of time or resources. A great deal can be achieved by taking a flexible approach to service delivery and making small changes to the way in which things are done. This is where involving disabled people in conversations around service delivery could be particularly beneficial.
- 9) Subject to compliance with the requirements of the Equality Act, any proposals for the provision of additional activities, or service changes, must be considered alongside the financial challenges facing the local authority and be within available resources.
- 10) Making every contact count (MECC) needs to be a priority with improved communication between departments to remove the need for residents to repeat their issues.
- 11) Following calls for involvement in the investigation from groups and individuals across the town, the most significant level of input was received from Hartlepool's Deaf community. The investigation findings have subsequently been heavily influenced by their response and it is recognised that it may be beneficial to undertake further consultation as part of the process for the implementation of the Committee's recommendations.
- 12) The mystery shopper process was a beneficial element of the consultation process undertaken as part of the investigation and should be used more frequently as a means of assessing lived experiences.

## **13. RECOMMENDATIONS**

- 13.1 The Audit and Governance Committee has taken evidence from a wide range of sources and its recommendations are as follows:-

- 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
  - i) Develop a communications campaign to:
    - Highlight the various support schemes and reasonable adjustments that are already have in place;
    - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and
    - Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
  - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
  - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
  - iv) Create an "accessibility" tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
  - i) A Text Relay Service should be introduced;
  - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
  - iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;
  - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
  - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.
- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).

- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-
  - i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and
  - ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
  - i) Read options for documents, to allow access by blind or visually impaired residents;
  - ii) Captions / signing on social media posts / videos; and
  - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
- 7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-
  - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
  - ii) Promotion of use of a document accessibility checker.
- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

## **ACKNOWLEDGEMENTS**

The Committee would like to place on record our appreciation, in particular of the willingness and co-operation we have received from all those involved in the investigation.



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**Terms of Reference for the Investigation**

- a) To gain an overarching understanding of national equality legislation, and in particular statutory duties as they relate to the activities of Hartlepool Borough Council.
- b) To gain an understanding of data in relation to the number of residents in Hartlepool with disabilities and long term conditions and consider existing evidence of the challenges they face in accessing services;
- c) From a Hartlepool Borough Council perspective:
  - i. Explore how the Council complies with its Equality Duty in ensuring accessibility to all areas of service provision (as detailed in the referral); and
  - ii. Evaluate the effectiveness of the Council's activities to ensure that people with disabilities and long term conditions have easy access to its services.
- d) To examine the barriers (physical, procedural and other) that may inhibit access to Hartlepool Borough Council services / activities, and day to day living, and ascertain their prevalence and impact (including the impact of Covid-19); and
- e) To identify if any changes / additions are needed to deliver tangible improvements to the accessibility of Hartlepool Borough Council Services.

### How people were made aware of the consultation?

- The Your Say Our Future consultation platform, including in the monthly newsletters sent to all registered participants
- Extensive promotion on social media
- Posters and leaflets in all public Council buildings including the Community Hubs and libraries
- Posters and leaflets distributed to GP surgeries, health centres, pharmacies, etc.
- Written invitations to take part and request to share with contacts sent to:
  - Elected members
  - Residential homes, nursing care homes and other providers of adult and children's social care
  - Youth Council
  - Housing associations
  - Parish Councils
  - Alice House Hospice
  - Health and Wellbeing Board and Safer Hartlepool Partnership
  - Healthwatch Hartlepool
  - Hartlepool and Stockton CCG and North Tees and Hartlepool NHS Trust
  - Various local community and disability support groups including Hartlepool Deaf Centre, Incontrol-able, Hartlepool Carers and the Hospital of God

### How the consultation was made accessible to disabled people?

- The Your Say online platform is compliant with the Web Content Accessibility Guidelines. It is compatible with screen readers and other assistive technology.
- The Committee commissioned two BSL signed videos to promote the consultation. These were shared extensively on social media, embedded onto the Your Say platform and shared by local deaf organisations with their members. BSL signers were also booked for all the workshop sessions.
- Easy-read and large print versions of the survey were available to download from the Your Say platform and also to pick up from Council buildings. Copies were given to disability groups to pass on to their members.

## ORGANISATIONAL SURVEY FREE TEXT COMMENTS (DEAF CENTRE)

### **Please tell us about a positive experience of using a Council service.**

*iSPA contact centre staff are amazing, they are helpful and always willing to help get me to the right person or find a solution to a problem. One person in particular, shows real passion and commitment to the Deaf Community including studying BSL in her own time. She has a wealth of knowledge around Deaf equipment and resources and has fantastic Deaf awareness. Officers have a long track record of support to the Deaf Community but do not appear to have the resources to carry out some of the work they champion.*

### **What do you think we could do to build on this positive experience or improve further?**

*Implement accessible contact methods to council services to support HDC to build confidence in people's own abilities to manage their own affairs. HDC can support this work by supporting clients to make contact, but without accessible contact methods HBC are removing people's independence, thus creating further barriers and the assumptions that the council do not care or do not know they have Deaf residents in the town. Promote council services by always ensuring subtitles are added to social media video content and any important announcements please consider BSL interpretation added to video content.*

### **Please tell us about a negative experience of using a Council service.**

*I have a client at present who is unhappy with their social work support, they feel because they are Deaf the social worker is not in regular contact and does not update the client because of the communication barrier and needing to book interpreters. This client was very happy with the previous arrangements of having a Deaf council member to contact and receive support from. The client would like social care to be better deaf aware, receive Deaf Awareness training and social worker to learn BSL (Stockton, Middlesbrough and Darlington Council have social workers who can sign).*

*My own personal experience of offering to contact services on behalf of Deaf people is very counterproductive to the work we aim to achieve in empowering Deaf people. I get quick results because I am a hearing person with no disabilities or long-term health conditions, this again reinforces that we live in a town and have a wider society that practices audism openly despite legislation on local councils to provide accessible information, to be accessible themselves and to provide information that is accessible to the public (including those with protected characteristics).*

### **What do you think we should have done differently or how do you think we could improve for the future?**

*My client asked me to feedback to the social worker and ask why my client waited so long for a follow up meeting. Eventually the social worker turned up at the client's door with an interpreter but without informing the client to expect her, the client sent her away because they were expecting a family visit. A subsequent visit was arranged and booked in with the client. My client remains unsatisfied, they feel the social worker does not understand them as a profoundly deaf person - it is important that Deaf people feel their support is from someone with good deaf awareness with an understanding of the clients background and culture. My client does not like to have an interpreter present for private discussions with their social worker but recognises this is required due to the communication barrier, however it makes them feel very*

*uncomfortable. Sometimes interpreters create barriers of their own, they are not the only solution to working well with Deaf people.*

**If there is anything that worries you or puts you off using Council services with or on behalf of your clients please tell us about it here.**

*Community Hub - York Road What puts me off the council... a continued lack of accessibility for Deaf people. Council events are never offered with BSL Interpreter, so the fantastic opportunities at the community hub are not open to Deaf people. Hard of hearing people say they would welcome it if the Hub to advertised they are deaf friendly - they want to see a big sign on the front door that shows the council understand the needs of deaf and hard of hearing people, and that events will be accessible, not just providing interpreters but arranged and adapted so that deaf and HoH people are fully included rather than left to fend for themselves, if they are brave enough to enter the doors*

*What worries me about council services... HDC carried out a Deaf Audit of the Community Hub in June 2021, delivered Deaf Awareness training to 15 library and outreach staff and have spent the charities self-funded hours to attend a 3 meeting Task and Finish group in Feb/March 2022 to be told there are no funds to implement any of the required improvements. Yesterday I attended a deaf person's support meeting lead by TEWV along with 2 social workers (one from Durham and one from Stockton), luckily I was early and could meet the client at reception because there was major confusion over the room booking and reason for the meeting, hub staff wanted to direct us to the medicine review queue. If the vulnerable deaf client had been exposed to this confusion it would have had a really negative impact on them, negative experiences get shared among the Deaf Community and is counter-productive to the work the council wants to achieve at the hub.*

**If you have any other comments or suggestions about making Council services accessible to people with long-term conditions and carers please write them in the box**

*The toilets in the community hub are not suitable for use, especially for people who are blind or have visual impairment. Accessible toilet is locked.*

## WORKSHOP FINDINGS

CONCERNS / CHALLENGES IN ACCESSING COUNCIL SERVICES	POSITIVE FEEDBACK / THINGS WE DO WELL
<ol style="list-style-type: none"> <li>1) <b>Council website</b> (difficult to use accessibility software) <b>telephone systems and Hartlepool Online</b> not easy to use.</li> <li>2) <b>Variations in the quality of service</b> for people with disabilities and long term conditions.</li> <li>3) <b>Awareness of available help.</b></li> <li>4) <b>Awareness of the Community Navigators</b> role is low.</li> <li>5) Lack of clarity in terms of <b>access for assistance dogs</b> (other than guide dogs) in Council buildings.</li> <li>6) Lack of <b>access to computers.</b></li> <li>7) The <b>absence of remote video calling service.</b></li> <li>8) <b>Inaccurate Hartlepool Alerts</b> (e.g. told have to pay for parking and ticket machines too far away from parking spaces – only to find that blue badge holders don't have to pay).</li> <li>9) Civic Centre - Poor access to <b>disabled parking</b> and <b>access to the lift</b> to the reception.</li> <li>10) The <b>absence of a named contact that deaf people can contact</b> to ask about deaf-related issues.</li> <li>11) <b>Making contact with the Council for those who are not able to use the telephone.</b></li> <li>12) Difficulty <b>getting help with confidential matters</b> without divulging information to an unrelated third party to act as an interpreter (e.g. getting to speak to a social worker).</li> <li>13) <b>Making anonymous complaints</b> about staff when a phone or computer cannot be used (ab example of this being a complaint about a carer requiring the form to be handed to the carer in question).</li> <li>14) <b>Charging Blue Badge holders</b> for parking.</li> <li>15) <b>Access to BSL signers or interpreters</b> (inc. Community Navigators)</li> <li>16) <b>Drop kerbs</b> at Elizabeth Way Shops.</li> <li>17) When involved in <b>access audits and focus groups nothing seems to come from them.</b></li> <li>18) <b>Digital exclusion</b></li> <li>19) <b>Recreation and sport not always accessible</b> (e.g. no disabled access to Rift House Rec. Sports and recreation grounds)</li> <li>20) <b>Dropped kerbs</b> are often in the wrong position</li> </ol>	<ol style="list-style-type: none"> <li>1) <b>Improved physical access to Council buildings</b> was good and improving (though still improvements to be made).</li> <li>2) <b>Staff helpful</b> throughout various services and <b>focused individual provision</b> for people with disabilities and long term health conditions is good.</li> <li>3) <b>HBC house adaptations done to a very high standard</b>, making a big difference to the quality of life.</li> <li>4) Staff offering to <b>help with form filling and signposting</b>, particularly in the Civic Centre reception, Hubs and over the phone.</li> <li>5) <b>Hartlepool Now website</b> (though seems to be better known by the public than by officers).</li> <li>6) <b>Partnerships with CLIP working well to improve accessibility</b> at an early stage are (Highlight Leisure Centre, Tall Ships, Train Station and Summerhill improvements.</li> <li>7) <b>Assisted bin collection</b> is a good scheme but not well publicised so people don't know they can have help.</li> <li>8) <b>"Borrow boxes"</b> from the library have been well received.</li> <li>9) <b>Central and South Hubs do a good job</b> – North Hub not so much but West View Resource Centre is very good</li> <li>10) <b>Communication and information</b> in general is good.</li> <li>11) Dealings with <b>adult social care</b> have been very positive.</li> <li>12) The majority of <b>Brierton Sports Centre staff</b> are understanding, friendly and welcoming</li> <li>13) <b>Health trainers</b> are accommodating to people with</li> </ol>

<p>21) <b>Maintenance of council buildings</b> e.g. holes in access ramps, uneven surfaces, etc.</p> <p>22) Newer hearing aids are increasingly incompatible with the hearing induction <b>loop system</b></p> <p>23) <b>Having to specifically ask for support.</b> It also depends on who you get when you make contact</p> <p>24) A lot of <b>people with substance misuse problems have disabilities but services are not accessible</b> to them because of their issues</p> <p>25) <b>Mill House - Reduced water</b> temperature and suitable changing tables.</p> <p>26) <b>Lack of public toilets.</b></p> <p>27) No <b>accessible play equipment</b> in any of the play areas in Hartlepool.</p> <p>28) Need to improve the <b>support through schools</b>, particularly for mental health, bullying and the pressures of social media.</p> <p>29) People with BSL as their birth language can <b>struggle to read letters</b> sent by post</p> <p>30) <b>Can't just turn up</b> to do what they want.</p> <p>31) The <b>glass screens</b> - difficult to lip read or sign.</p> <p>32) Tend to think of disabled people as being older, <b>younger disabled people are overlooked</b></p> <p>33) <b>Lack of consistency</b> between members of staff and services e.g. getting passed from pillar to post</p>	<p>disabilities and will adjust the programmes to suit people's abilities</p> <p>14) <b>Disabled facilities at CIL</b> are very good and having social workers based in there means people using the day services have easy access to them for support.</p> <p>15) Council is <b>good at resolving issues for individuals</b></p> <p>16) Introduced of <b>dementia-friendly sessions at Mill House</b></p>
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## IMPROVEMENTS THAT COULD BE MADE

- 1) **An SMS notification service would be useful** for people who cannot use the phone or other technology
- 2) **Instant video remote interpreter service** so don't have to wait for an interpreter
- 3) **Need for the community to be involved in making services accessible**
- 4) **A lift to get from Victoria Road to the level of the reception area**
- 5) Better **system for anonymous feedback**
- 6) Use **Hartbeat more to publicise help arrangements** as it goes to every household (an **electronic version** be made available screen readers)
- 7) **Encourage private organisations** to be better at accessibility
- 8) Council is good at resolving issues for individuals but need to **embed learning to prevent issues recurring**
- 9) Need to consider the **"spontaneity" of services** (so disabled person can just turn up and do what they need to do)
- 10) **Public toilets**
- 11) **Focus on the person** and not what's "wrong" with them
- 12) Need **someone to oversee accessibility within the council**, leaving it to departments to self-police is not working
- 13) **Involving groups like CLIP in the development of services**
- 14) Should be asking:
  - a. What do we know about our local populations and communities and their needs?
  - b. **What training do staff get** on accessibility as a matter of course?

- c. How can we **improve access to governance and democracy** e.g. increase disabled members of committees.
- 15) **Workforce development** needs to have regard for all disabilities.
  - 16) **Support staff with disabilities** including through workforce development, recruitment and business development
  - 17) System for hidden disabilities like the **lanyards**.
  - 18) Dementia friendly services at Mill House badly attended – **need to develop these types of programmes in consultation with disabled people**
  - 19) **Listen to the deaf community** and implement recommendations
  - 20) **A private room for deaf people** where you can ask the receptionist for when you first arrive (when signing in the reception area anyone who knows sign language can see)
  - 21) More frontline **staff trained in BSL**.
  - 22) **Employ a deaf person to be a contact for other deaf people** (translation for people who speak BSL from birth)

**EXAMPLES OF LIVED EXPERIENCE** (Names have been changed to protect individual's privacy but these are based on conversations with real disabled people via the consultation)

**Example 1- My bin day.** Dave, who is Deaf, wanted to check which day his bin was due to be emptied. He is unable to use the website to check this online. As he cannot use the telephone he says he only has two options to find this information out: either he needs to ask a friend or family member to find the information out for him (which makes him feel un-empowered) or he has to take the bus into town to visit the Civic Centre reception and hope that there is a member of staff available who can use BSL who can tell him this information. Dave says it should not be so difficult to find out a simple piece of information that a hearing person could find out in 2 minutes. He would like the option to use an SMS service or a video call (to someone who can sign) to find the information he needs quickly.

**Example 2 - Benefits check.** Hazel is Deaf and uses BSL to communicate. She is also elderly and a wheelchair user. Hazel would like to find out if she is entitled to any additional benefits or support since her husband passed away. She says that from her previous dealings with the staff at the Civic Centre she expects that they will be helpful, however, she is unable to use the telephone to make an appointment for a home visit. It is difficult for Hazel to get to the Civic Centre as the accessible transport options in the town are limited. She does not know how she can contact the benefits team.

**Example 3 - Crisis support information.** Fred is Deaf and has a history of poor mental health. Recently Fred experienced a mental health crisis and received assistance from the Police. Afterwards, he was sent a letter by the Council with information about mental health support services and the Council's ISPA team. For all of the services listed in the letter there was only a telephone number to be able to contact them. As a Deaf person, Fred is not able to use the telephone and it made him feel even worse to be offered help that he could not access.

**Example 4 - Phoning the Council.** Frank has had a stroke which has left him with slurred speech and needs extra time to process the information he is given. Frank can use the telephone if he has to but he says he feels embarrassed to call the Council on the phone because he thinks that his speech impediment and cognitive difficulties mean that staff will think he is drunk or on drugs when he calls and dismiss him as a nuisance. For this reason Frank avoids using the telephone unless he absolutely needs to.



**Example 5 - Social workers and carers.** Annie is in her 80s. She is Deaf and uses BSL to communicate but she is able to read and write English. She also uses a wheelchair or walker when she goes out. Annie used to have a social worker who could sign but they recently left the authority and the social workers who have been covering do not sign so they need an interpreter to communicate. Annie says sometimes when the social workers and carers come to visit her they do not bring an interpreter with them so Annie does not feel confident that she has understood what they have told her; or that they are understanding and recording her needs correctly.

Annie is also worried that when they do remember to bring a BSL interpreter the interpreters then know her intimate personal business (such as financial information and care needs) as she thinks they discuss this with other Deaf people. She would prefer to have a social worker who can sign which would remove the need for an interpreter. Annie is also having problems with her care package and is worried about her benefits since her husband died. She feels overwhelmed trying to tackle these difficulties when responsibility is shared over so many services and none of them are Deaf-friendly.

## SOURCES OF DEPARTMENTAL SURVEY RESPONSES

ACBS	C&JCS	Public Health	NRS	R&D
<ul style="list-style-type: none"> <li>• Heritage and open spaces</li> <li>• Museum / Art Gallery</li> <li>• Adult social care</li> <li>• Community hubs</li> <li>• Sports and leisure</li> </ul>	<ul style="list-style-type: none"> <li>• Children's Hub</li> <li>• Safeguarding, Assessment &amp; Support and family time contact</li> <li>• Rossmere Children's Centre</li> <li>• Hindpool Children's Centre</li> <li>• 0-19</li> <li>• Through Care Team</li> <li>• Fostering</li> <li>• Virtual school</li> <li>• HSSCP (Hartlepool &amp; Stockton Safeguarding Children Panel)</li> <li>• SENDIASS</li> <li>• Housing</li> <li>• Childcare</li> <li>• Local welfare support</li> <li>• Resettlement</li> <li>• Educational psychology</li> <li>• SEND</li> <li>• School improvement</li> <li>• School place, planning and capital</li> <li>• Youth services</li> <li>• Youth justice service</li> </ul>	<ul style="list-style-type: none"> <li>• Public health</li> <li>• Substance misuse</li> </ul>	<ul style="list-style-type: none"> <li>• Consultancy services</li> <li>• Policy support and facilities management</li> <li>• Passenger transport</li> <li>• Construction &amp; highways</li> <li>• Planning and development</li> <li>• Environmental services</li> <li>• Environmental protection</li> <li>• Housing standards</li> <li>• Emergency planning</li> <li>• Commercial services</li> <li>• Car parking</li> <li>• Community safety</li> </ul>	<ul style="list-style-type: none"> <li>• Legal</li> <li>• Communications and marketing</li> <li>• Customer services</li> <li>• Debt recovery</li> <li>• Economic growth</li> <li>• Health, safety and risk</li> <li>• Corporate strategy and performance</li> <li>• Revenues &amp; benefits</li> <li>• Revenues</li> </ul>

## DEPARTMENTAL ACCESSIBILITY SURVEY - SUMMARY OF FINDINGS

### i) Where services are delivered:

- The majority of services (26%) continue to be delivered face to face. Data indicating that the delivery of services by phone represents 22% of activity, compared to email (18%) or online contact via the portal or app which represented 18% and 15% respectively.
- 59% of services are universal / open to all with only 19% targeted.
- The top 4 locations in descending order are the Civic Centre, people's homes, other buildings and community venues.

### ii) How are services provided:

- Hybrid delivery model (almost 50%), mostly a combination of office/home-based staff, although some front-facing services are a combination of face-to-face and online contact.
- 24% are providing more online services, 6% are totally on line.
- Located or delivered from buildings that are physically accessible (e.g. step-free access, hearing loop, etc. – 10%). Other responses which referenced physical access adjustments included:
  - Access to an induction loop – 5%
  - Accessible toilets at the service location – 3%
  - Disabled parking facilities at the service location – 1%
  - Lighting adjustments can be made at the service location – 1%
  - Accessible vehicles for service users – 1%

iii) **How is need identified:**

- Predominantly by speaking to other professionals (17%) rather than from asking the client. The second most common way is via an assessment or eligibility criteria.
- Some services actively ask people about additional needs when they make contact via conversations with service users / potential users (12%), forms that service users / potential users are asked to complete (12%) or carrying out access audits of the service (4%).
- Other services appear to take a more passive approach by waiting for service users / potential users to make the first move and tell about their needs.

iv) **How are adjustments to services made:**

- The most common adjustment is the provision of interpreters (13%), both British Sign Language (BSL) interpreters and other languages. A further 5% reference the provision of BSL and 4% referenced unspecified "translation".
- Other adjustments, not necessarily relating to physical access, include:
  - Home visits for service users – 9%
  - Reading or understanding information – 5%
  - Appointments in flexible locations – 4%
  - Technology to make the service more accessible – 3%
  - Help doing things online (2%) and filling out forms (2%)
- Information in alternative formats (unspecified – 4%), large print (8%) and easy-read (5%).

v) **Staff Training / Awareness of Adjustments** - 95% of responses indicate that all staff know what adjustments, alternative arrangements or additional support can be put in place. 6% of comments referenced finding information on the staff intranet.

vi) **What do you need to make your service more accessible** - Similarly to the previous questions, the most commonly referenced responses were finance / budget (20%) and more staff (13%). A further 17% of responses referenced improving the digital offer. More engagement with the disabled community – 7%

- Access to experts / specialist advice – 7%
- Better understanding of issues – 3%
- Finance / budget (20%), more staff (13%), improved digital offer (17%), more engagement with the disabled community (7%), access to experts / specialist advice (7%) and better understanding of issues (3%).

vii) **What are the key barriers to your service being accessible to all:**

- 11% stated that services are already fully accessible so no more needs to be done.
- Barriers identified included:
  - Finance / budget (21%), lack of capacity (8%).
  - Limitations of existing buildings (some are historic buildings which may have restrictions due to Listed Building status, others are just old and from a time when accessibility was not a consideration which makes retro-fitting access improvements difficult and expensive)
  - Reliance on other services / agencies (e.g. to provide front of house services or alternative meeting locations)
  - Technology (could be either due to the expense of upgrading technology to keep pace with guidance or a lack of knowledge of how technology can be used to enhance access)
  - Lack of engagement with the disabled community

# FINANCE AND POLICY COMMITTEE

3<sup>RD</sup> JULY 2023



**Subject:** COUNCIL PLAN 2021-2024 – PROGRESS UPDATE

**Report of:** Managing Director

**Decision Type:** For information

## 1. COUNCIL PLAN PRIORITY

<b>Hartlepool will be a place:</b>
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

## 2. PURPOSE OF REPORT

- 2.1 To provide an update to Finance and Policy Committee on the progress made on the delivery of the Council Plan 2021/22 – 2023/24. The report also includes the 2022/23 Performance Indicator Report and the latest version of the Strategic Risk Register.

## 3. BACKGROUND

- 3.1 The Council Plan 2021-24 was agreed by Council on 25<sup>th</sup> February 2021 and sets out a clear vision for Hartlepool and identifies what the delivery of that vision will mean. This reflects what was identified through consultation with residents, elected members and our public, voluntary, community and private sector partners whilst also recognising the emerging and continually evolving challenges the Council faces from the pandemic.

- 3.2 Finance and Policy Committee have received progress update reports at their meetings on 15<sup>th</sup> November 2021, 14<sup>th</sup> March 2022, 26<sup>th</sup> July 2022, 12<sup>th</sup> December 2022 and 13<sup>th</sup> March 2023.

#### 4. PROGRESS UPDATE – MAY 2023

- 4.1 This update outlines the progress made on the delivery of the Council Plan since the last report to Committee in March 2023:

**Hartlepool will be a place where people are enabled to live healthy, independent and prosperous lives.**

##### **Cycling Developments**

The Summerhill Cycle Track has been shortlisted in two categories, Sustainability and Value, at the Constructing Excellence North East (CENE) Awards.

Premises for the Town Centre Cycling Hub have been agreed in principle for a Council property at 15 Church Street.

New cycle parking facilities are currently being developed at Community Hub Central.

Consultation on the Transport Interchange to Headland (LCWIP) Cycleway Scheme has been delayed with an anticipated start of Autumn 2023.

##### **Water Well Being Accreditation**

Mill House Leisure Centre is one of only 18 sites across England to gain Water Well Being Accreditation. The scheme reflects an on-going commitment to provide high-quality opportunities for people who are inactive and/or have long-term health conditions to become physically active in water.

##### **Highlight Leisure Centre**

The Council are undertaking a procurement exercise to identify a suitable partner to construct the new Highlight leisure centre.

##### **Holiday Activities and Food (HAF) Programme**

The Holiday and Activities Food programme is now fully embedded in the business of Children's Services and delivered during the three long school holidays (Easter, Summer and Christmas). The HAF provides free activities and a healthy meal for children and young people from low income families. The reach and uptake from these families is increasing as the booking system has been developed to offer places to children eligible for free school meals in the first instance before making the offer more widely available.

In the last quarter, £38,000 of additional funding for the purchase of equipment was distributed to 26 providers. The Christmas HAF programme was delivered by 19 providers and a total of 2,830 children took part in activities, 68% (1,929) of

whom were eligible for free school meals. Parent feedback was extremely positive, with 100% recommending HAF activities.

**Waterfront connectivity (Towns Deal)**

The £6.2m project is now in delivery and contractors started on site on 17th April improving access, waterside edge, footpaths and cycle ways. The works being delivered include resurfacing the promenade and the installation of new accessible ramps at the rear of the Yacht Club. The Phase 1 works are expected to be completed by 30 June 2023 ahead of the Tall Ships.

**Poverty Investigation by Audit and Governance Committee**

The investigation into poverty has been completed and recommendations are being finalised to go back to Elected Members for consideration.

**Public Health - Smoking**

The Public Health team and partners have worked together to complete a smoking needs assessment. The needs assessment aims to analyse the current need and identify any gaps in treatment and support services in Hartlepool by exploring previous and current data relating to smoking related harms. This information will then inform the development of a Tobacco Control Strategy with partners as part of the Hartlepool Tobacco Alliance.

**Public Health – Complex Needs**

Funding to support inequalities and people with complex needs was awarded. Insight work commissioned to review uptake of adolescent vaccinations (inequalities funding) and access to health care for substance misuse service users. A Project Manager was appointed in April 2023 for two years to lead the work to identify the barriers and facilitators for people using substances and how we address their wider health needs. This will also include a commissioned Behavioural Insights study to better understand the complex health needs of people associated with drug/alcohol misuse and how best to meet this need. This will include:

- understanding factors affecting an individual service users health and wellbeing;
- including barriers and facilitators/interventions to meeting these needs; and
- recommendation to inform service delivery

This will then form priorities and service delivery to mitigate and implement services to meet these needs.

**Food Partnership**

Public Health and VCS colleagues from Hartlepool Food Council held a full-day Food Partnership event with more than 50 people from across the food system to co-produce a Food Plan to help ensure healthy, affordable, sustainable food for everyone in Hartlepool. Attendees included a wide variety of people and organisations including farmers, schools/colleges, various parts of the council, VCS and community groups. A local Food Partnership and Plan is important because healthy, affordable food is one of the key building blocks of health and wellbeing for residents and encouraging local sustainable food can be beneficial to

the prosperity of the area, which means this work could help to meet many aspects of the Council Vision.

All attendees contributed to assessment of the current food situation in Hartlepool, discussed what the ideal future would look like and suggested actions that could help ensure healthy, affordable, sustainable food for all in Hartlepool. There was great enthusiasm in the room with many people staying after the official event ending to discuss potential opportunities. Notes from all discussions are being collated into a draft plan that will be shared for comment. The final plan will be actioned by several multiagency action sub-groups. Further information about the Food Partnership and contact details are available on the [Hartlepool Food Partnership website](https://hartlepoolfoodpartnership.co.uk) (<https://hartlepoolfoodpartnership.co.uk>).

### **Health and Wellbeing Strategy**

A stocktake of the current Health and Wellbeing Strategy has been completed against the previous priorities, partners were asked to provide an update against existing priorities and provide additional development opportunities and new priorities to inform the development of the strategy refresh.

### **Public Health – Research Funding**

“Positioning Hartlepool and Stockton-On-Tees Borough Councils to be ready for a future Health Determinants Research Collaboration bid” research report completed.

The Hartlepool and Stockton Council in partnership with Teesside University bid was successful aiming to look at how local authorities can work together with an aim to allow partners to apply for investment to support new research activity, to support expansion and growth in research active areas and to support the development of Research Management and Governance where no established infrastructure exists.

Objective 1: To better understand the current research needs, priorities, capacity, and governance (barriers and facilitators) within each council and identify opportunities to further embed public health and social care-focused research, using learning from the South Tees HDRC.

Objective 2: To provide each council with key recommendations to develop a research culture and governance that will enable them to become more research active in the areas of public health and social care; and to develop a NIHR PHR funding application for the next call for HDRCs.

A report was presented in April 2023 which set out a range of recommendations and opportunities for future research funding opportunities.

**Hartlepool will be a place where those who are vulnerable will be safe and protected from harm.**

### **Special Educational Needs and Disabilities (SEND)**

The action plan for delivery of the 2022/23 SEND strategy has been delivered and the 2023/24 action plan has been developed. This integrates the SEND strategy and the Inclusion Statement of Intent as we work to strengthen the inclusiveness of all schools to support more children in Hartlepool with SEND to attend mainstream settings where it is in their interests to do so. To this end, we have recruited a Senior Adviser for Inclusive Learning and SEND to work with schools to strengthen their offer of what is 'ordinarily available' in schools.

In March 2023, Ofsted and CQC inspected the Hartlepool Local Area arrangements for children and young people with Special Educational Needs and Disabilities. The [final report of the inspection](#) was published on 17th May. The inspectors judged that the local area partnership's arrangements typically lead to positive experiences and outcomes for children and young people with SEND and summarised their findings as follows:

"Leaders, across education, health and social care, articulate their vision for children and young people with SEND well. Leaders understand the issues facing families in the local area. They are committed to providing person-centred services to meet individual needs. School and college leaders agree that there is a shared ambition to develop an inclusive approach to SEND provision across Hartlepool."

Hartlepool achieved the highest judgement and are currently the only area partnership in the country to do this.

The development of the SEMH Free School has been significantly delayed but work has now commenced on the build programme. This is being managed by the Department for Education.

### **Substance Misuse**

The Public Health Team and partners have worked together to complete a substance misuse needs assessment and develop a new Substance Misuse Strategy which is going through the respective committees for approval.

### **Adult Social Care**

Excellent feedback has been received from the recent Annual Health Check. The results for Social Workers in Adult Social Care staff were very positive with 100% of scores identified as outcomes to celebrate and scores against all seven standards improved in comparison to the previous year.

An independent peer review of adult safeguarding arrangements was completed in March 2023 which identified a number of areas of good practice including the Team Around the Individual approach, daily huddles with police colleagues and the delivery of Community Led Support through Community Hubs. The review also identified some challenges and areas for further work, all of which are being progressed.



### **Multi Agency Child Exploitation Hub**

The Hub is now fully embedded within the Children's Hub and working with partners in real time to safeguard children and young people from exploitation and harm outside of the home. New meeting arrangements have been established to assess and manage the risks to children and young people from exploitation and engage parents and the extended family network in safety planning.

The Hartlepool and Stockton Safeguarding Children's Partnership undertook a multi-agency audit of the work within Hartlepool to safeguard children from the risk of exploitation and the findings for Hartlepool were that practice to safeguard these children and young people was strong.

### **Hartlepool will be a place of resilient and resourceful communities with opportunities for all.**

#### **Community Hubs**

Secured £200,000 from the Libraries Improvement Fund to further develop the Community Hub offer in Seaton Carew.

The delivery of Community Led Support through Community Hubs has been shortlisted for a Local Government Chronicle Award.

#### **Civil Engineering Academy (Town Deal)**

The £2.25m Civil Engineering Academy project is underway, with site clearance undertaken at the Brenda Road site and delivery of rail infrastructure and other early works.

#### **Army Reservist Centre**

Following the departure of the 883 Postal and Courier Squadron, the attraction of an alternative reservist unit(s) has been championed by the Council's Managing Director, Leader and Armed Forces Champion. Confirmation has been received of support from the 71 Royal Engineers and 150 Royal Logistics Corps (RLC) for the location of a troop at Easington Road.

### **Hartlepool will be a place that is sustainable, clean, safe and green.**

#### **Council Housing**

The last period has seen the Council's Housing Revenue Account (HRA) take possession of 5 new houses on the Port Homes, Seaton Lane scheme as well as good progress being made on its 18 homes being built by Keepmoat on Brenda Road. There is however a temporary pause in the HRA's own development activity due to the increased costs of Prudential Borrowing and construction cost inflation.

**Air Quality Strategy**

The Council have been undertaking a consultation exercise, following approval by Neighbourhood Services Committee in March 2023, in relation to a new Air Quality Strategy, which is required by Defra.

**Hartlepool Railway Station**

Works are ongoing to re-establish the 2nd platform at Hartlepool Railway Station, with the new bridge installed very recently, which will increase service frequency on the Durham Coast line.

**Tackling Climate Change**

The first Carbon Audit of all council assets and operations is now complete.

A draft of the Council's Net Zero Plan is currently in development following consultation with staff from across the Council.

**A19 / Elwick Road / North Lane Junction and Elwick Road / Hartlepool Western Link Project**

Finance and Policy Committee and Full Council agreed to support the Compulsory Purchase Order process in March 2023 following the presentation of a report and statement of reasons, which allows the Council to secure the necessary land for this scheme. Furthermore a detailed planning application has been submitted and is currently going through the validation process.

Negotiations with developers continue to secure funding towards the Council's new Strategic road linking the A19 to Hartlepool north of Elwick Village (named above), as well as for local road network improvements required to facilitate developments on the western fringe of Hartlepool.

**Road Improvement and Safety Schemes**

The Highway Maintenance Programme for 2023/24 commenced in May 2023 following approval at Neighbourhood Services Committee in March 2023.

Local safety schemes have been completed at Clavering School and Wynyard Road, while others at Mowbray Road, Grange Road, Throston Grange Lane, St. Joseph's School, Park Road and Coronation Drive are at various stages of design and consultation.

**Serious Violence**

The Council were successful in a bid to obtain funding to address serious violence and work continues to implement this programme which includes safety campaigns (Ask for Angela, Anti-Spiking and World Cup), provision of hand held metal detector wands and bleed control kits to licensed premises, provision of support to Hartlepool Town Pastors to enable their work, the introduction of two knife amnesty bins, provision of training to licensed premises staff and provision of an additional CCTV operator on Friday, Saturday and Bank Holiday nights to improve incident detection and management.

**Counter Terrorism**

The Council have successfully completed a pilot project with other local authorities and Police colleagues across the wider North East and Yorkshire area in relation to the impending new counter terrorism legislation relating to Martyn's Law.

**Hartlepool will be a place that has an inclusive and growing economy.****Economic Growth**

The Inclusive Growth Strategy was officially launched in March following consultation with businesses and other key stakeholders on what they perceived the challenges facing the local economy were and how they might be overcome.

A Business breakfast event was held in March in conjunction with Hartlepool Sixth Form College as part of National Careers Week at Sixth Form.

An update on the council's big regeneration schemes including the Town Deal and Levelling Up Fund was given to the Economic Regeneration Forum meeting in March.

The Tees Valley Business Club hosted in April at the Hartlepool College of Further Education was attended by over 100 Tees Valley businesses. The focus of the event was on what was happening in Hartlepool including the Towns Deal, Levelling Up Fund, Film Studios and the Tall Ships.

**Town Deal**

The £3.8m Wesley Chapel redevelopment is underway. Hoardings have been erected, improved site security is in place and site works have begun.

The Grant Determination letter for the £13.8m Reimagining Middleton Grange Business has been received from the Department for Levelling Up, Homes and Communities (DLUHC).

**Levelling Up Fund**

DLUHC have completed due diligence for the Council's £16.45m Levelling Up Fund round 2 project for the development of a Screen Industries Production Village. – project to begin in May

**Tall Ships**

A total of 38 ships are signed up to attend Tall Ships 2023. In addition 85 young people have signed up to be sail trainees and over 400 people have volunteered to support the event in July 2023.

**Hartlepool will be a place with a Council that is ambitious, fit for purpose and reflects the diversity of its community.**

### **Workforce**

Hartlepool Borough Council has formally launched its Hybrid Working Policy demonstrating its commitment to enhance its flexible working offer to employees.

Hartlepool continues to focus on the wellbeing of its workforce through key health campaigns in Q4 2022/23 on Dry January, Cervical Cancer Prevention, National Heart Month, Time to Talk, International Woman's Day, World Better Sleep Day and Ovarian and Prostate Cancer Awareness. Our Strategic Health and Wellbeing Group is embedded and our Health & Wellbeing Advocate network has been launched with the promotion of their Yellow Lanyards.

### **Consultation and Engagement**

The Council's Your Say consultation and engagement platform continues to develop and recent activity has included:

- Levelling Up: Catalysing Hartlepool Screen Industries Production Village
- Member Development Programme
- Employee Communications Survey
- Cost of Living Crisis (youth services)
- Net Zero Staff Consultation
- Family Support Survey Spring 2023
- Air Quality Strategy Survey
- Waterfront: Museum of Hartlepool
- Waterfront: Dam Board
- Waterfront: Wingfield Castle
- Waterfront: Highlight – Hartlepool's New Wellbeing and Leisure Facility
- Waterfront Programme
- Waterfront: Expansion of the National Museum of the Royal Navy

### **Digital Progression**

The Council continues to develop its digital offer and has been providing increasing opportunities for residents to contact the Council through digital channels. At the end of quarter 4 there were 27,379 active HBC self-online accounts and there had been 307,116 transactions delivered digitally across the year. Digital projects delivered in last few months include:

- Garden Waste Subscriptions
- Holiday Activities and Food Programme (Easter Programme)
- a range of Tall Ships projects
- Companion Bus Passes
- Adult Services Booking Solution
- Civic Centre Car Parking.

### **Parish Charter**

The Council and Hartlepool's Parish Councils have reaffirmed their commitment to work together through a newly created Parish Charter. The Parish Charter aims to

improve joint working and ensure the delivery of high quality services that meet the needs of local communities.

### **Information Communication Technology and Cyber Security**

The new ICT managed contract has been awarded, with contract sign off shortly to be finalised. Transition and Office365 migration arrangements are being planned.

### **Corporate Peer Review**

The Corporate Peer Review action plan was agreed by Council in March 2023 and work to deliver the council's response to the team's recommendations is underway.

### **Equality, Diversity and Inclusion (EDI)**

A new Equality, Diversity and Inclusion Policy was approved by Finance and Policy Committee in March 2023. The purpose of the policy is to set out the Council's commitment to EDI, establish who is responsible for EDI, how we consider EDI in what we do and how we will monitor our progress and the effectiveness of our approach.

The Audit and Governance Committee's investigation into the accessibility of Council services for those with disabilities or long-term conditions has been completed and recommendations are being finalised to go back to Elected Members for consideration.

## **4.2 Current areas of concern**

Whilst good progress is being made on the delivery of the Council Plan there are a number of areas of concern that may impact on future progress including:

- Impact of cost of living pressures on residents and issues of poverty and deprivation across Hartlepool;
- Difficulties in the recruitment and retention of employees being felt by both the Council and those who deliver commissioned services on our behalf. There are particular concerns around social care which is affecting market stability and access to services. In addition difficulty in filling post such as mechanical fitters is having an impact on a range of services who rely on the garage for vehicle provision and maintenance, and also poses a risk to income levels from those services delivered externally (taxi tests, MOTs, ATF bay etc.);
- Ageing workforce and potential future knowledge and skills gaps if we are unable to recruit new talent as people retire from the Council;
- Ongoing recovery from Covid and the impact on income in areas such as leisure from this and the cost of living pressures facing residents;
- Potential financial and operational impact of anticipated legislative changes such as the implementation of Liberty Protection Safeguards;
- Difficulties in maintaining service standards and managing expectations in the context of funding reductions and uncertainty around future funding stream availability;

- Delivery of the Tall Ships having increasing pressure on capacity across the Council;
- Land ownership issues, legal and leasehold barriers with third parties, short delivery window for early phases to be completed, expectations from partners and public, inflation, capacity and the recently introduced subsidy control scheme all concerns relating to the delivery of the capital programme;
- Continued delays to the delivery of the Free School for children with social, emotional and mental health needs. This programme is led and delivered by the Department for Education and HBC is working with the Department to expedite the build;
- Impact of inflation on council services and those of local partners in the public, private and voluntary sectors. Concerns may impact on future service delivery and may require further prioritisation of services and schemes;
- Increased incidence of unacceptable and unreasonable behaviour from members of the public across Council services;
- Access to reliable data within the Council, adequate time to deliver a robust, costed Net Zero Plan and capital and revenue resources to deliver interventions have the potential to impact on the delivery of our net zero ambition.

#### 4.3 **Performance Indicators**

A suite of Performance Indicators (PIs) have been identified that demonstrate the delivery of the Council Plan. The latest position on these PIs and comparison with the local and national average where available is set out in the PI report included as **Appendix 1**.

#### 4.4 **Strategic Risk Register**

The Strategic Risk Register sets out the key strategic risks that the Council faces and the areas of concern identified above are reflected within it. Risks within the SRR have been reviewed and the latest full version of the SRR is attached as **Appendix 2** for Finance and Policy Committee's information.

#### 4.5 **Annual Report**

In order to share the progress made on delivering the Council Plan more widely an Annual Report for 2022/23 is being produced which will be shared with all elected members and will be made available to residents, employees and partners. It is anticipated that this should be available to circulate to the Committee at the meeting on 3<sup>rd</sup> July 2023.

### 5. **OTHER CONSIDERATIONS/IMPLICATIONS**

<b>RISK IMPLICATIONS</b>	The Council agreed the Risk Management Framework in June 2019 and this ensures that appropriate arrangements are in place for the management of the Council's key strategic risks. Embedding the identification and management of risk supports the achievement of our
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	<p>Council Plan and provides assurance to elected members that these risks are being appropriately managed.</p> <p>The Council Plan and Strategic Risk Register are monitored regularly to enable early identification and reporting to Members of any emerging risks which might prevent delivery of the strategic priorities identified in the Council Plan. The latest version of the Strategic Risk Register is included as Appendix 2 of this report.</p>
<b>FINANCIAL CONSIDERATIONS</b>	The Council Plan was prepared alongside the Medium Term Financial Strategy and the 5 year Capital Plan as three parts of a single plan to ensure the links between the three are strengthened. In addition, effective risk management arrangements should help improve the use of valuable and limited financial resources.
<b>LEGAL CONSIDERATIONS</b>	Whilst there are no legal requirements to have a Council Plan it is good practice to have one in place.
<b>CHILD AND FAMILY POVERTY</b>	The priorities identified in the Council Plan include work to reduce child and family poverty within Hartlepool. There is no change to the Child and Family Poverty Impact Assessment included within the Council Plan 2021/22 – 2023/24 report to Council on 25th February 2021.
<b>EQUALITY AND DIVERSITY CONSIDERATIONS</b>	Since the first equality objectives were published in April 2012 the Council has based them on the strategic objectives set out in our Council Plan. By doing this the Council demonstrates that equality and diversity is a core part of what we do as an organisation and not an add on activity. The Council's vision as set out in the Council Plan sets out our equality objectives. The priorities identified in the Council Plan aim to have a positive impact on the whole population of Hartlepool and those with protected characteristics. There is no change to the Equality Impact Assessment included within the Council Plan 2021/22 – 2023/24 report to Council on 25th February 2021.
<b>STAFF CONSIDERATIONS</b>	No implications.
<b>ASSET MANAGEMENT CONSIDERATIONS</b>	No implications.
<b>ENVIRONMENT, SUSTAINABILITY AND CLIMATE</b>	No implications.

<b>CHANGE CONSIDERATIONS</b>	
<b>CONSULTATION</b>	The Council Plan was informed by extensive consultation including a 4 week consultation exercise in September 2019, a further 5 week consultation starting in January 2020 and a wide ranging consultation over the summer of 2020. This consultation included Elected Members through Members Seminars on 27th November 2019, 29th January 2020 and 14th July 2020 and through reports to individual Policy Committees in January and February 2020.

## 6. RECOMMENDATIONS

- 6.1 Finance and Policy Committee are requested to:
- note the progress made on the Council Plan 2021-2024 by May 2023;
  - note the Council Plan Performance Indicator report for 2022/23 as set out in appendix 1;
  - note the updated Strategic Risk Register as set out in appendix 2;
  - note the development of the Council Plan Annual Report 2022/23.

## 7. REASONS FOR RECOMMENDATIONS

- 7.1 Finance and Policy Committee have overall responsibility for Performance and Risk Management and are the responsible Committee for a number of service areas contained within the Council Plan.

## 8. BACKGROUND PAPERS

- 8.1 Council Plan 2021/22 - 2023/24 report to Council on 25th February 2021.

Council Plan 2021-2024 – Progress Update report to Finance and Policy Committee on 15th November 2021.

Council Plan 2021-2024 – Progress Update report to Finance and Policy Committee on 14th March 2022.

Council Plan 2021-2024 – Progress Update report to Finance and Policy Committee on 26th July 2022.

Council Plan 2021-2024 – Progress Update report to Finance and Policy Committee on 12th December 2022.

Council Plan 2021-2024 – Progress Update report to Finance and Policy Committee on 13<sup>th</sup> March 2023.



**9. CONTACT OFFICERS**

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Sign Off:-

Managing Director	Date: 22 June 2023
Director of Finance, IT and Digital	Date:
Director of Legal, Governance and HR	Date:

Council Plan 2021/22 – 2023/24

Performance Indicator Update  
June 2023

Key:

Direction of travel (from baseline) =

Improving /

Maintaining /

Declining

RAG Rating England =

Better than /

Same as /

Worse than

RAG Rating North East =

Better than /

Same as /

Worse than

This symbol means that the data is not available. This could be because there was not a sample size big enough in Hartlepool to generate a releasable figure or that the data is not reported every year or that more recent data is not currently available due to the time lag in publication.

Please note that the baseline year has been set as 2019/20 or 2019 where possible in recognition of the potential impact of the covid pandemic on data.

Hartlepool will be a place...	Performance Indicator	Hartlepool		England		North East		Direction of Travel	RAG Rating England	RAG Rating North East
		Baseline	Latest Data	Baseline	Latest Data	Baseline	Latest Data			
...where people are enabled to live healthy, independent and prosperous lives	Percentage of adults aged 18+classified as overweight or obese	72.5% (2019/20)	74.6% (2020/21)	62.8% (2019/20)	63.5% (2020/21)	67.2% (2019/20)	69.7% (2020/21)	▬	▬	▬
	Percentage of obese children in reception year	13.79% (2019/20 Academic)	13.90% (2021/22 Academic)	9.86% (2019/20 Academic)	10.11% (2021/22 Academic)	11.04% (2019/20 Academic)	11.40% (2021/22 Academic)	▬	▬	▬
	Percentage of obese children in year 6	24.46% (2019/20 Academic)	27.40% (2021/22 Academic)	21.05% (2019/20 Academic)	23.45% (2021/22 Academic)	23.20% (2019/20 Academic)	26.60% (2021/22 Academic)	▬	▬	▬
	Successful completion of drug treatment - opiate users (% of those that entered treatment)	3.1% (2019)	3.3% (2021)	5.6% (2019)	5.0% (2021)	3.9% (2019)	3.7% (2021)	+	▬	▬
	Successful completion of drug treatment – non-opiate users (% of those that entered treatment)	23.0% (2019)	27.7% (2021)	34.2% (2019)	34.3% (2021)	27.3% (2019)	28.6% (2021)	+	▬	▬
	Successful completion of drug treatment - alcohol (% of those that entered treatment)	25.6% (2019)	32.8% (2021)	37.8% (2019)	36.6% (2021)	31.2% (2019)	29.8% (2021)	+	▬	+
	Smoking prevalence in adults – current smokers (APS)	19.3 (2019)	17.3 (2021)	13.9 (2019)	13.0 (2021)	15.3 (2019)	14.8 (2021)	+	▬	▬
	Under 18 conception rate per 1,000	27.0 (2019)	19.9 (2021)	15.7 (2019)	13.1 (2021)	21.8 (2019)	19.8 (2021)	+	▬	▬
	Percentage of older people who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (effectiveness of the service)	82.9% (2019/20)	81.1% (2022/23)	82.0% (2019/20)	▲	83.5% (2019/20)	▲	▬	N/A	N/A
	Percentage of service users aged 65+ who reported that they had as much social contact as they would like	53.8% (2019/20)	48.5% (2022/23)	43.4% (2019/20)	▲	48.1% (2019/20)	▲	▬	N/A	N/A
	Percentage of adults in contact with secondary mental health services who live independently with or without support	86% (2019/20)	71.6% (2022/23)	58% (2019/20)	▲	69% (2019/20)	▲	▬	N/A	N/A
	% 16-17 year olds in Education and Training	92.6% (2019)	94.0% (2021)	92.6% (2019)	92.9% (2021)	91.6% (2019)	91.4% (2021)	+	+	+
	Percentage of children living in families with less than 60% of the median UK household income, after housing costs have been taken into account	37.8% (2019/20)	35.3% (2021/22)	30% (2019/20)	31% (2021/22)	37% (2019/20)	35% 2021/22)	+	▬	▬

Hartlepool will be a place...	Performance Indicator	Hartlepool		England		North East		Direction of Travel	RAG Rating England	RAG Rating North East
		Baseline	Latest Data	Baseline	Latest Data	Baseline	Latest Data			
...where those who are vulnerable will be safe and protected from harm	Children looked after rate, per 10,000 children under 18	155 (2019/20)	155 (2021/22)	67 (2019/20)	70 (2021/22)	107 (2019/20)	110 (2021/22)	↔	—	—
	Rate of children who were subject of a child protection plan per 10,000 children	92 (2019/20)	90 (2021/22)	43 (2019/20)	42 (2021/22)	70 (2019/20)	63 (2021/22)	+	—	—
	Second or subsequent child protection plans (percentage)	18.9 (2019/20)	16.4 (2021/22)	21.9 (2019/20)	23.3 (2021/22)	21.9 (2019/20)	21.2 (2021/22)	+	+	+
	Percentage of homelessness applications that were resolved	84% (2019/20)	87% (2021/22)	N/A Local PI		N/A Local PI		+	N/A	N/A
	Percentage 'Good' or 'Outstanding' Adult Social Care Providers	97.8% (2019/20)	97.9% (Dec 2022)	N/A Local PI		N/A Local PI		↔	N/A	N/A
	Deaths from drug misuse per 100,000 population	16.3 (2018-20)	▲	5.0 (2018-20)	▲	9.9 (2018-20)	▲	N/A	N/A	N/A
...of resilient and resourceful communities with opportunities for all	Percentage of primary / secondary schools rated good or outstanding by OFSTED	86.8% (2019/20)	89% (May 2023)	N/A Local PI		N/A Local PI		+	N/A	N/A
	Percentage qualified to level 1 and above (working age population - 16-64 years)	81.1% (2019)	86.2% (2021)	85.8% (2019)	87.8% (2021)	84.8% (2019)	85.0% (2021)	+	—	+
	Percentage of adults in contact with secondary mental health services in paid employment	14% (2019/20)	16.2% (2022/23)	9% (2019/20)	▲	10% (2019/20)	▲	+	N/A	N/A
	Percentage of adults with learning disabilities in paid employment	23.5%* (2019/20)	7.6% (2022/23)	5.6% (2019/20)	▲	5.1% (2019/20)	▲	—	N/A	N/A
...that is sustainable, clean, safe and green	CO <sup>2</sup> emissions estimates – per capita (LA influence)	4.5 tonnes (2019)	4.4 tonnes (2020)	4.1 tonnes (2019)	3.7 tonnes (2020)	4.5 tonnes (2019)	4.1 tonnes (2020)	+	—	—
	Percentage of household waste sent for reuse, recycling and composting in Hartlepool	34.00 (2019/20)	32.60 (2021/22)	43.80 (2019/20)	42.50 (2021/22)	35.50 (2019/20)	33.50 (2021/22)	—	—	—
	Number of affordable homes delivered (gross)	86 (2019/20)	171 (2021/22)	58,964 (2019/20)	59,175 (2021/22)	2,587 (2019/20)	2,294 (2021/22)	+	N/A	N/A
	Number of houses improved through energy efficiency measures.	645 (2021/22)	226 (2022/23)	N/A Local PI		N/A Local PI		—	N/A	N/A

\* Please note that a data collection error has been identified in the previous reporting year for this indicator and therefore the figure for the baseline year is higher than it should have been. The figure reported for 2022/23 is at the correct level and demonstrates that Hartlepool still performs well compared to national and regional averages.

Hartlepool will be a place...	Performance Indicator	Hartlepool		England		North East		Direction of Travel	RAG Rating England	RAG Rating North East
		Baseline	Latest Data	Baseline	Latest Data	Baseline	Latest Data			
...that has an inclusive and growing economy	Employment rate	67.6% (Q4 2019)	68.2% (Q4 2022)	76.0% (Q4 2019)	75.8% (Q4 2022)	70.5% (Q4 2019)	70.5% (Q4 2022)	+	—	—
	Unemployment Rate	7.7% (Q4 2019)	6.1% (Q4 2022)	3.9% (Q4 2019)	3.6% (Q4 2022)	5.8% (Q4 2019)	4.6% (Q4 2022)	+	—	—
	Youth unemployment rate (claimant count aged 16-24)	7.7% (Dec 2019)	7.7% (Dec 2022)	3.2% (Dec 2019)	3.7% (Dec 2022)	5.2% (Dec 2019)	4.8% (Dec 2022)	↔	—	—
	Care leavers who are in education, employment and training aged 17-21	49% (2019/20)	52% (2021/22)	56% (2019/20)	58% (2021/22)	54% (2019/20)	57% (2021/22)	+	—	—
	Qualified to level 3 and above (working age population)	49.8% (2019)	56.3% (2021)	58.5% (2019)	61.3% (2021)	52.1% (2019)	54.5% (2021)	+	—	+
	Percentage of Council spend that goes to local suppliers	35.8% (2019/20)	34.9% (2022/23)	N/A Local PI		N/A Local PI		—	N/A	N/A
	Business density (enterprises per 10,000 population)	303.3 (2019)	300.0 (2021)	502.5 (2019)	509.0 (2021)	321.3 (2019)	329.0 (2021)	—	—	—
	Visitor numbers (STEAM)	3.72m (2019)	1.52m (2020)	N/A Local PI		N/A Local PI		—	N/A	N/A
	Value of visitor economy (STEAM)	£199.46m (2019)	£75.54m (2020)	N/A Local PI		N/A Local PI		—	N/A	N/A
	Self-Employment Rate	7.5% (2020)	8.6% (2021)	9.9% (2020)	9.3% (2021)	7.6% (2020)	7.4% (2021)	+	—	+
	Rate of births of new enterprises	41.0 (2019)	36.7 (2021)	71.6 (2019)	70.4 (2021)	43.1 (2019)	46.3 (2021)	—	—	—
...with a Council that is ambitious, fit for purpose and reflects the diversity of its community	Council's CO <sup>2</sup> emissions data	5,775 tonnes (2021/22)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Number of transactions delivered digitally (internal and/or external)	233,486 (2020/21)	307,116 (2022/23)	N/A Local PI		N/A Local PI		+	N/A	N/A
	HBC employees who agreed that they felt that they were maintaining a healthy work – life balance	70.6% (Summer 2020)	65.1% (Autumn 2022)	N/A Local PI		N/A Local PI		—	N/A	N/A
	HBC employees who agreed that they were having meaningful check ins with their manager	74.9% (Summer 2020)	76.0% (Autumn 2022)	N/A Local PI		N/A Local PI		+	N/A	N/A



# Strategic Risk Register

June 2023

**Risk Scoring Matrix:**

	IMPACT			
LIKELIHOOD	1 NEGLIGIBLE	2 MINOR	3 MAJOR	4 CRITICAL
4 ALMOST CERTAIN	AMBER 4	RED 8	RED 12	RED 16
3 PROBABLE	GREEN 3	AMBER 6	RED 9	RED 12
2 POSSIBLE	GREEN 2	AMBER 4	AMBER 6	RED 8
1 HARDLY EVER	GREEN 1	GREEN 2	GREEN 3	AMBER 4

## HBC Strategic Risk Register

No.	Risk Title	Risk Score	Risk Owner
1	<b>Finance</b> - Failure to deliver a balanced budget for 2024/25 leading to a reduction in services provided, damage to reputation and negative impact on the community.	RED 12	James Magog Director of Finance, IT and Digital
2	<b>Workforce</b> - The skills, expertise, wellbeing, performance and overall size of the workforce available may not be sufficient to support the overall aims of the organisation resulting in the failure to deliver services.	RED 9	Hayley Martin Director of Legal, Governance and HR
3	<b>Communication and Engagement</b> – Failure to deliver effective communication, consultation and engagement could impact adversely on the Council’s reputation and ability to deliver plans and strategies.	AMBER 6	Bev Bearne Assistant Director – Development and Growth
4	<b>Health and Safety</b> - Failure to comply with Health and Safety legislation and ensure appropriate risk controls are in place to ensure the health, safety and wellbeing of individuals at work and those who may be affected by our act or omission.	RED 12	Sylvia Pinkney Assistant Director – Regulatory Services
5	<b>Information Governance and Cyber Security</b> - Failure to comply with legislation and ensure appropriate system safeguards to ensure the confidentiality, integrity and availability of personal and corporate information and data leading to data loss, cyber-attacks, legal proceedings and significant financial penalties.	RED 8	James Magog Director of Finance, IT and Digital
6	<b>Information Technology</b> – Failure to provide a resilient and responsive ICT infrastructure leading to ineffective service delivery or the loss of services.	RED 8	James Magog Director of Finance, IT and Digital
7	<b>Children and Young People</b> – Failure to improve life chances, provide opportunities for education for children and young people particularly those whose circumstances make them vulnerable to poor outcomes.	RED 9	Sally Robinson Director of Children’s and Joint Commissioning Services



## 7.1 Appendix 2

No.	Risk Title	Risk Score	Risk Owner
8	<b>Drugs and Alcohol</b> – Failure of the drugs and alcohol addiction services to prevent, treat and provide recovery for those with substance misuse problems in Hartlepool.	RED 9	Craig Blundred Director of Public Health
9	<b>Safeguarding children</b> – Failure to protect children and young people from harm and promote their welfare.	RED 12	Jane Young Assistant Director - Children and Families
10	<b>Market failure and sufficiency of provision (Adults)</b> – Provider failure within residential or non-residential care leading to insufficient capacity to support vulnerable adults appropriately.	AMBER 6	Danielle Swainston Assistant Director - Joint Commissioning
11	<b>Adult Safeguarding</b> – Failure to protect an adult's right to live in safety, free from abuse and neglect.	AMBER 6	John Lovatt Assistant Director - Adult Social Care
12	<b>Access to Leisure, Community and Preventative services</b> - Failure to engage the at risk population in preventative, cultural, leisure and community based activities could impact on demand led services.	RED 9	Gemma Ptak Assistant Director - Preventative and Community Based Services
13	<b>Highways and Flood Defences</b> – Failure to maintain the Borough Highway infrastructure and protect areas from flooding risks could impact on the economy and quality of life.	AMBER 6	Kieran Bostock Assistant Director – Neighbourhoods
14	<b>Community Safety</b> - Failure to provide a safer Hartlepool where residents and visitors can live free from crime, fear of crime and anti-social behaviour could impact on quality of life and tourism.	AMBER 6	Sylvia Pinkney Assistant Director – Regulatory Services
15	<b>Waste Management</b> - Council are unable to collect and dispose of all household waste within existing financial resources.	RED 9	Kieran Bostock Assistant Director – Neighbourhoods

## 7.1 Appendix 2

No.	Risk Title	Risk Score	Risk Owner
16	<b>Business Continuity</b> - Failure to provide Council services as a result of disruption to the normal day to day activities.	RED 8	Sylvia Pinkney Assistant Director – Regulatory Services
17	<b>Economic Regeneration</b> – Failure to encourage regeneration, support enterprise, reduce unemployment and grow new and existing businesses could impact adversely on the sustainability of Hartlepool.	AMBER 6	Bev Bearne Assistant Director – Development and Growth
18	<b>Housing</b> – Failure to address the housing requirements of the borough and provide affordable, high-quality housing.	AMBER 6	Bev Bearne Assistant Director – Development and Growth / Kieran Bostock Assistant Director – Neighbourhoods / Danielle Swainston Assistant Director - Joint Commissioning
19	<b>Inflation</b> - Increasing inflation leading to increased costs for goods and services resulting in overspend against allocated budgets, reduced level or standard of service delivery, longer waiting times for services or cuts to existing services.	RED 12	Denise McGuckin Managing Director
20	<b>Adult Social Care</b> - Workforce, system and financial pressures within the NHS may negatively impact on Adult Social Care and the broader Council by placing unrealistic expectations on Adult Social Care to assess and provide services to vulnerable and ill people earlier.	RED 8	John Lovatt Assistant Director - Adult Social Care

## 7.1 Appendix 2

No.	Risk Title	Risk Score	Risk Owner
21	<b>Tall Ships</b> – Failure to deliver a successful Tall Ships Race 2023 leading to financial loss, adverse publicity and reputational damage.	RED 12	Gemma Ptak Assistant Director - Preventative and Community Based Services
22	<b>Market failure and sufficiency of provision (Children's)</b> – Failure within the children's care or education sector to provide sufficient foster care, special school and residential care that can meet the needs of children leading to insufficient capacity to support vulnerable children appropriately.	RED 9	Danielle Swainston - Assistant Director - Joint Commissioning

<b>RISK TITLE:</b>	<b>Finance</b> - Failure to deliver a balanced budget for 2024/25 leading to a reduction in services provided, damage to reputation and negative impact on the community.
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DETAILED DESCRIPTION OF CURRENT RISK:		
CAUSES - what could make it happen?	IMPLICATIONS - what impact would it have if it did?	EXISTING INTERNAL CONTROLS – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Changes in government funding leading to the necessity to deliver savings, cuts and efficiencies.</p> <p>Council Tax not increased in line with government referendum limits including the Adult Social Care precept.</p> <p>Individual service pressures for example rising number of looked after children; increasing demands on Adults' services.</p> <p>Higher national pay awards, interest rates and / or inflation than forecast.</p>	<p>Potentially a significant impact on reputation, service delivery, and achievement of Council objectives.</p> <p>Service cuts, redundancies, Section 114 notice etc.</p>	<p>Prepare and deliver a balanced and sustainable Medium Term Financial Strategy including the Capital Strategy and Reserve Strategy.</p> <p>Ongoing monitoring and delivery of savings and efficiency targets.</p> <p>Maximise and safeguard income for the council, including effective treasury management strategy, debt recovery, maximise funding opportunities.</p> <p>Timely and effective financial performance reporting and monitoring.</p> <p>Good understanding and interpretation of changes to funding regimes and analysis of the Government annual budget statements.</p> <p>Robust governance framework.</p>

## 7.1 Appendix 2

<p>Permanent reduction in business rates base – e.g. Power Station and impact of current economic conditions.</p> <p>Impact of inflation on capital programme costs and other service delivery across the Council.</p> <p>Political uncertainty – national and local.</p>		<p>Compliance with relevant accounting principles and standards to satisfy legislative and regulatory requirements.</p> <p>Capital programme monitoring arrangements in place and capital contingency built in to MTFS.</p>
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CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				RED 12
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	James Magog – Director of Finance, IT and Digital
<b>DIVISION</b>	Corporate and Financial Services
<b>DEPARTMENT</b>	Finance, IT and Digital Department
<b>DATE OF ASSESSMENT</b>	June 2023

## 7.1 Appendix 2

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Being prepared to respond quickly to future changes	Close monitoring of future changes to Local Government Finance.	Director of Finance, IT and Digital	December 2023
	Agree savings programme for 2024/5.	Managing Director	November 2023
	On-going revenue budget monitoring, including the impact of inflation and the existing savings programme.	Director of Finance, IT and Digital	March 2024
	On-going capital budget monitoring, including of the impact of inflation pressures on the Capital programme and service delivery arrangements.	Director of Finance, IT and Digital	March 2024

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Workforce</b> - The skills, expertise, wellbeing, performance, and overall size of the workforce available may not be sufficient to support the overall aims of the organisation resulting in the failure to deliver services.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>The necessity to deliver savings and efficiencies has resulted in a reduced workforce.</p> <p>Loss of experienced staff due to retirement, ill health, lack of development opportunities or due to concerns about job security caused by continuing reductions in staffing levels.</p> <p>Recruitment and selection difficulties; attracting applicants to the public sector/Local Government.</p> <p>Recruitment and retention difficulties resulting from an inability to compete in the local/national labour markets if pay levels continue to be suppressed.</p>	<p>Failure to maintain staffing levels, and failure to develop staff performance/Council services, resulting in reduced service delivery impacting on the lives and wellbeing of the Hartlepool community.</p> <p>Increased workloads leading to inefficiencies, increased sickness absence and impact on staff wellbeing and general discontent.</p> <p>Reputational damage.</p> <p>Failure to attract and maintain external contracts resulting in reduced income generation.</p>	<p>Availability of up to date HR policies and procedures, in line with legislative requirements and the strategic aims of the Council.</p> <p>Recruitment and retention of quality staff ensures that the organisation has the necessary knowledge, skills and experience to achieve its objectives.</p> <p>Support the development of Apprenticeships, volunteering opportunities and work experience within the Council.</p> <p>Accurate and timely payment of all employee salaries and administration of all deductions from pay.</p> <p>Administration of pension service.</p> <p>Advisory services providing advice, guidance and support in all employment matters.</p> <p>Support provided to the programme of organisational and structural change being delivered to meet the financial challenge, including service reviews and redundancies.</p> <p>Trade Union negotiation and consultation.</p> <p>Absence management and reporting.</p> <p>Management of Health and Wellbeing contracts, including Occupational Health and Counselling (emergency only) to support the wellbeing of the workforce preventing and supporting the management of sickness absence.</p> <p>Management and administration of employee benefits.</p>

## 7.1 Appendix 2

		<p>Workforce planning, including the Council's values and behavioural standards, succession planning, pay and reward.</p> <p>Employee development and engagement to further enhance the skills and capacity of our workforce.</p> <p>Support the development of the Council's Digital Strategy through My View and HR Dashboard for employee and managers to access and manage employee information.</p> <p>Support the health of the workforce through the Council's Health &amp; Wellbeing of the Workforce Programme.</p> <p>Report on concerns and actions to monitor recruitment and retention across the Council to the Corporate Management Team.</p> <p>Utilise market forces supplements where the criteria is met under the Council's terms and conditions of employment (in the absence of funding a full pay and grading review).</p> <p>Managers encouraged to review essential criteria in person specifications such as qualification level (possible JE implications to pay banding).</p> <p>Introduction of development schemes for career development to attract quality candidates.</p> <p>Development of recruitment platforms with NEREO and other partner agencies to reach a wider audience.</p>
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## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLECTIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE			RED 9	
	POSSIBLE				
	HARDLY EVER				

RESPONSIBLE OFFICER	Hayley Martin - Director of Legal, Governance and HR
DIVISION	HR
DEPARTMENT	Legal Governance and HR
DATE OF ASSESSMENT	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Control measures are regularly reviewed to ensure effectiveness.	Review the effectiveness of the 'existing control measures' related to recruitment.	Director of Legal, Governance and HR	September 2023





## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

RESPONSIBLE OFFICER	Beverley Bearne - Assistant Director – Development and Growth
DIVISION	Development and Growth
DEPARTMENT	Development, Neighbourhoods and Regulatory Services
DATE OF ASSESSMENT	June 2023

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Health &amp; Safety</b> - Failure to comply with Health and Safety legislation and ensure appropriate risk controls are in place to ensure the health safety and wellbeing of individuals at work and those who may be affected by our by act or omission.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Non-compliance with legislation, government guidance and best practice standards</p> <p>Failure to maintain corporate Health and Safety Policy standards</p> <p>Poorly communicated policies and procedures leading to senior leaders, managers and employees not being aware of their individual Health and Safety roles and responsibilities</p> <p>Lack of incident reporting and a low near miss to accident reporting ratio</p> <p>Failure to correctly monitor employees health for those exposed to hazardous substances such as HAVS</p> <p>Lack of available resources to manage health and safety on day to day basis</p> <p>Lack of suitable training for staff appropriate to the level of the requirements to manage health and safety at work</p>	<p>Risk to life, including: Fatality, injury, ill health</p> <p>Prosecution under the Health and Safety at Work Act 1974, The Regulatory Reform (Fire Safety) Order 2005, the Occupiers' Liability Act for breach of statutory duty and accompanying regulations.</p> <p>Costs arising from other enforcement actions.</p> <p>Fees for intervention by enforcing authority, such as the HSE. Currently £154 per hour.</p> <p>Torte of negligence (Civil Claim).</p> <p>Fines from prosecution, maximum fine is unlimited; custodial sentences, up to a maximum of 18 years for gross negligence manslaughter; indirect incurred legal costs.</p> <p>Insurance costs; compensation award; excess payments, levied by the insurance company; raised insurance premiums.</p> <p>Costs to the reputation of Hartlepool Borough Council.</p> <p>Indirect costs such as costs arising from investigations, retraining and developing systems.</p>	<p>Corporate Health and Safety Policy</p> <p>Accompanying Health and Safety Policies</p> <p>Employing a qualified Health, Safety and Risk Manager and Health and Safety team to provide advice and assistance to ensure that directors, manager and employees are aware of their responsibilities under health and safety legislation and to ensure that health and safety standards are adequately maintained.</p> <p>Corporate and departmental H&amp;S committees to ensure that managers and trade union representatives are consulted on matters of health and safety</p> <p>CMT oversight in place through quarterly reporting arrangements.</p> <p>An online incident reporting system including near miss reporting system</p> <p>H&amp;S training catalogue, available through the workforce development programme and free to all employees</p> <p>Induction checklist with H&amp;S instructions</p> <p>H&amp;S audit programme conducted by the HS&amp;R team to ensure that H&amp;S performance standards are maintained</p>

## 7.1 Appendix 2

<p>Lack of suitable work place maintenance programmes and condition surveys</p> <p>Lack of suitable health and safety audits, fire risk assessment and inspection programmes to identify health and safety risks across the work force</p>	<p>Loss of income.</p> <p>Costs arising from loss or damage of plant or property</p>	<p>Unannounced site safety inspections conducted by the H&amp;S team to ensure compliance with safety legislation</p> <p>Director appointed to provide resources for H&amp;S safety</p> <p>Monitoring in place for high risk actions including HSE improvement notice actions.</p>
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CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				RED 12
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Sylvia Pinkney - Assistant Director – Regulatory Services
<b>DIVISION</b>	Regulatory Services
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Risk Management Group that has been established to meet fortnightly is working well.	Review the Risk Management Group to ensure it has appropriate membership and is having a demonstrable impact on improving health and safety.	Assistant Director – Regulatory Services	September 2023

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Information Governance and Cyber Security</b> - Failure to comply with legislation and ensure appropriate system safeguards to ensure the confidentiality, integrity and availability of personal and corporate information and data leading to data loss, cyber-attacks, legal proceedings and significant financial penalties.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Non-compliance with legislation and best practice standards.</p> <p>Human error.</p> <p>Deliberate attack.</p> <p>System failure.</p>	<p>If the Council does not effectively manage personal data, a penalty of up to £17.5m or 4% of total annual worldwide turnover (whichever is higher) may be levied by the Information Commissioner.</p> <p>Detrimental impact on end user/customer.</p> <p>Service disruption.</p> <p>Potentially major reputational damage.</p>	<p>Compliance with legislation and information publication requirements.</p> <p>Information management policies, strategies, processes and procedures and associated staff training (mandatory).</p> <p>Data Security and Protection (DPS) Toolkit.</p> <p>Regular monitoring of information governance by Corporate Information Governance Group with all Department's represented and chaired by an Assistant Director.</p> <p>Mandatory for all staff to undertaken IG training once a year.</p> <p>Automatic email encryption where TLS certificates exist.</p> <p>Encryption of removable media – laptops, tablets, USB devices.</p> <p>Security of our system monitored by NEC and reported to HBC monthly through Operations Board.</p> <p>8 weekly meetings with NEC re Cyber security.</p> <p>Information security incident management process incorporating lessons learned improvement action plans.</p> <p>Internal arrangements for the secure disposal of information through shredding.</p> <p>Anycomms secure file transfer between HBC and its partner organisations.</p>

## 7.1 Appendix 2

		<p>Business continuity arrangements in place covering availability of information systems.</p> <p>Cyber security is a standing item on the agenda for the corporate Business Continuity Group.</p> <p>Regular application of security patches and updates to system.</p> <p>Support accessed from external bodies (DLUHC and LGA) to review and ensure our approach to cybersecurity and information governance is up to date with current best practice.</p>
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CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE				RED 8
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	James Magog - Director of Finance, IT and Digital
<b>DIVISION</b>	Customer Services and IT
<b>DEPARTMENT</b>	Finance, IT and Digital Department
<b>DATE OF ASSESSMENT</b>	June 2023

**7.1 Appendix 2**

<b>ADDITIONAL CONTROLS TO BE PUT IN PLACE:</b>			
<b>ADDITIONAL CONTROL</b>	<b>WHAT NEEDS TO BE DONE? (ACTION)</b>	<b>LEAD OFFICER</b>	<b>DUE DATE</b>
Cyber Security Response Plan agreed.	Agree draft cyber response security plan with Business Continuity Group and I.T. provider (NEC)	Director of Finance, IT and Digital	July 2023

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Information Technology</b> - Failure to provide a resilient, flexible and responsive ICT infrastructure leading to ineffective service delivery or the loss of services.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Out of date equipment, software and technology.</p> <p>Lack of robust disaster recovery, business continuity and cyber-crime plans.</p> <p>Environmental threats.</p> <p>Lack of CICT staff knowledge and expertise.</p> <p>Lack of general ICT knowledge and expertise of all staff.</p> <p>Poor user awareness of threats.</p> <p>Failure to protect our ICT assets.</p> <p>Poor contract management of outsourced ICT service and/or collapse of provider.</p> <p>Lack of suitable ICT provider.</p>	<p>Negative impact on productivity and availability of services.</p> <p>Failure to ensure security of personal data.</p> <p>Failure to comply with legislation.</p>	<p>Relevant information security policies and training in place.</p> <p>8 Weekly Cyber Security meetings with NPS which highlight any potential threats to the network</p> <p>Work From Anywhere (WFA) project to introduce a solution to support staff without mobile devices and provide Business Continuity options.</p> <p>Self-help/training videos on intranet support staff 24/7</p> <p>Monthly Operations Board meetings with NPS to monitor Contract and Service issues</p> <p>Dedicated and skilled CICT Team</p> <p>Microsoft office buyout to avoid excessive increase in IT costs</p> <p>Quarterly Partnership Board - manages contract at strategic level</p> <p>Value for Money (VFM) review completed on existing contract with ICT provider NEC and findings implemented.</p>



## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE				RED 8
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	James Magog - Director of Finance, IT and Digital
<b>DIVISION</b>	Customer Services and IT
<b>DEPARTMENT</b>	Finance, IT and Digital Department
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
New contract implemented place for IT provision	Confirm and begin implementing transition period activities.	Director of Finance, IT and Digital	June 2023
	Confirm governance arrangements ahead of the new contract coming into effect.	Director of Finance, IT and Digital	June 2023

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Children and young people</b> - Failure to improve life chances, provide opportunities for education for children and young people particularly those whose circumstances make them vulnerable to poor outcomes
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Failure to promote life chances for a child or young person due to:</p> <ul style="list-style-type: none"> <li>Lack of investment and/or public sector cuts impacting upon capacity of schools, health services and local authorities to deliver services that meet need and improve life chances.</li> <li>Lack of educational opportunities</li> <li>Lack of access to community health services</li> <li>Lack of opportunities to develop life skills</li> </ul>	<p>Ineffective support and opportunities for children can result in significant implications for the future life chances, increasing the risk of them being dependent on the state throughout their adult life, for example:</p> <ul style="list-style-type: none"> <li>Worklessness</li> <li>Mental health needs</li> <li>Drug and alcohol dependency</li> <li>Entering the criminal justice system.</li> </ul>	<ul style="list-style-type: none"> <li>Education Improvement Strategy and DfE Priority Investment Area</li> <li>Child and Family Poverty Strategy and Plan</li> <li>0-19 service and pathways</li> <li>Early help offer</li> <li>Using all opportunities to influence policy makers on impact of austerity for children and young people in Hartlepool.</li> </ul>

<b>CURRENT RISK ASSESSMENT:</b>					
<b>RISK MATRIX</b>		<b>IMPACT</b>			
		<b>NEGLIGIBLE</b>	<b>MINOR</b>	<b>MAJOR</b>	<b>CRITICAL</b>
<b>LIKELIHOOD</b>	<b>ALMOST CERTAIN</b>				
	<b>PROBABLE</b>			<b>RED 9</b>	
	<b>POSSIBLE</b>				
	<b>HARDLY EVER</b>				

<b>RESPONSIBLE OFFICER</b>	Sally Robinson
<b>DIVISION</b>	Children's and Joint Commissioning Services
<b>DEPARTMENT</b>	Children's and Joint Commissioning Services
<b>DATE OF ASSESSMENT</b>	June 2023

## 7.1 Appendix 2

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Education Improvement Strategy	Implement EIS Year 3 through Education Partnership Board  Align and target resources to vulnerable children	Assistant Director Education	March 2024
SEND Improvement Plan	Remodel how funding is maximised to support inclusion and meet children with SEND needs in mainstream settings wherever possible Implementation of year three of SEND action plan  Deliver SEND Regional Expert Partnership	Assistant Director Joint Commissioning	March 2024
Health and Wellbeing Strategy	Implement Starting Well (Health and Wellbeing Strategy)  0-19 pathways regularly reviewed	Director of Public Health	March 2024
Early Help	Remodel Early Help around Supporting Families and Family Hubs model  Implement Workforce programme for Early Help workforce	Children's and Joint Commissioning Services Departmental Management Team	March 2024

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Drugs and Alcohol</b> - Failure of the Drugs and Alcohol addiction services to prevent , treat and provide recovery for those with substance misuse problems in Hartlepool
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>Failure to break intergenerational cycles of drug and alcohol misuse in Hartlepool</li> <li>Failure of the service to fully engage with the at a risk population</li> <li>Failure of the service to deliver an evidenced based model of treatment and addiction recovery</li> <li>Failure to increase capacity, resources and expertise to meet the level of need</li> </ul>	<ul style="list-style-type: none"> <li>Continuing increase in the prevalence of substance misuse in Hartlepool leading to Increased prevalence of ACEs, children suffering significant harm and crime</li> <li>At risk population do not receive appropriate levels of treatment and behavioural support with increasing numbers failing to achieve a sustained recovery</li> <li>Increased incidence of drug related deaths.</li> </ul>	<ul style="list-style-type: none"> <li>Health and Wellbeing Board</li> <li>Safer Hartlepool Partnership</li> <li>Systematic review of Drug Related Deaths (DRD) and ongoing review of the process with key learning reported to the strategic governance group</li> <li>0 to 19 service and pathways</li> </ul>

<b>CURRENT RISK ASSESSMENT:</b>					
<b>RISK MATRIX</b>		<b>IMPACT</b>			
		<b>NEGLIGIBLE</b>	<b>MINOR</b>	<b>MAJOR</b>	<b>CRITICAL</b>
<b>LIKELIHOOD</b>	<b>ALMOST CERTAIN</b>				
	<b>PROBABLE</b>			<b>RED 9</b>	
	<b>POSSIBLE</b>				
	<b>HARDLY EVER</b>				

<b>RESPONSIBLE OFFICER</b>	Craig Blundred – Director of Public Health
<b>DIVISION</b>	Public Health
<b>DEPARTMENT</b>	Children’s and Joint Commissioning Services
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE: TBC			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
The development of a strategy for substance misuse with clear vision, objectives and outcomes identified	Implement the strategy to be performance monitored and managed by strategic governance group	Director of Public Health	July 2023
Outcome review for strategy	Monitor and review outcomes in the action plan associated with the strategy	Director of Public Health	March 2024

<b>RISK TITLE:</b>	<b>Safeguarding children</b> - Failure to protect children and young people from harm and promote their welfare
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<p>Failure to protect a child or young person and promote their welfare due to:</p> <ul style="list-style-type: none"> <li>Increased demand and consequent capacity within the services to respond.</li> <li>Failing in policies/ procedures</li> <li>Failure in partnership working</li> <li>Lack of the required skills, knowledge, expertise and resources within the service to meet need.</li> </ul>	<ul style="list-style-type: none"> <li>Ineffective safeguarding leaves children at risk of harm.</li> <li>Children and young people do not experience safe, consistent, stable care, leading to increased risks of poor adult outcomes.</li> <li>Significant implications for reputation of the organisation.</li> </ul>	<ul style="list-style-type: none"> <li>Policies and procedures in place</li> <li>Practice manual regularly reviewed and updated</li> <li>Performance Management and Quality assurance cycle</li> <li>Management oversight and supervision</li> <li>Workforce Development programme</li> <li>Staff Briefings</li> <li>HSSCP</li> <li>Tees Procedure meetings</li> <li>Effective commissioning arrangements with clear service specifications and robust and regular monitoring and review</li> <li>Ofsted Inspection of Local Authority Children's Services</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLECTIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				RED 12
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Jane Young - Assistant Director Children and Families
<b>DIVISION</b>	Children and Families
<b>DEPARTMENT</b>	Children's and Joint Commissioning Services
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Continuous improvement in assessment planning, implementation and review of the needs of children and young people	<p>Performance management in place with audits cycle to review practice</p> <p>Managers oversee performance within their teams through PowerBI dashboard</p> <p>Workforce development to maintain practice standards and continuous learning and development</p>	Assistant Director Children and Families	March 2024

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Market failure and sufficiency of provision (Adults)</b> - Provider failure within residential or non-residential care leading to insufficient capacity to support vulnerable adults appropriately.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Action taken by the regulator to stop a service from operating.</li> <li>• Provider decides to close or change focus of provision.</li> <li>• Provider cannot operate due to financial viability.</li> <li>• Provider cannot operate due to lack of appropriate workforce/ staffing.</li> <li>• Commissioned services not able to provide high quality services.</li> </ul>	<ul style="list-style-type: none"> <li>• Service for vulnerable adults ceasing at short notice.</li> <li>• Services unavailable to meet assessed need placing people at risk of harm.</li> <li>• Vulnerable adults need to be moved to different provision which is detrimental to their health and wellbeing and creates significant pressure for operational services.</li> <li>• Insufficient provision for older people can result in increased Delayed Transfers of Care, creating pressures across the wider health and care system.</li> <li>• Increase in out of area placements if there is insufficient provision locally.</li> <li>• Non-residential provision is not able to meet need therefore vulnerable adults have to access residential care which would place significant pressure on existing provision.</li> <li>• Reputational damage to the Council if services cannot be provided within Hartlepool to meet local needs.</li> </ul>	<ul style="list-style-type: none"> <li>• Regional agreement/ process to share information re: commissioned provision intelligence which highlights any emerging risks.</li> <li>• Regular contract meetings with providers to understand their current performance and business position.</li> <li>• Robust commissioning arrangements – financial checks undertaken.</li> <li>• Regional protocol for responding to market failure.</li> <li>• Good relationships with partners e.g. CCG for information to be shared to highlight any early issues that can be planned for.</li> <li>• Commissioning link officers for all providers – regular visits from link officers.</li> <li>• Good relationship with CQC – regular updates.</li> <li>• Bi monthly regional commissioning meetings – share best practice and intelligence on providers across the region</li> <li>• Regular committee reports to inform members of market position</li> <li>• High quality data and information available which if a provider closes can be used to ensure that the best provision is identified</li> </ul>



## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Danielle Swainston - Assistant Director - Joint Commissioning
<b>DIVISION</b>	Joint Commissioning
<b>DEPARTMENT</b>	Children's and Joint Commissioning Services
<b>DATE OF ASSESSMENT</b>	June 2023

<b>RISK TITLE:</b>	<b>Adult safeguarding</b> - Failure to protect an adult's right to live in safety, free from abuse and neglect.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
Failure to protect an adult from death or serious harm as a result of increased referral activity and workload pressures, leading to either a failing in policies / procedures, personnel or partnerships.	Ineffective safeguarding has potentially critical implications for individuals (vulnerable adults, responsible officers/Members), and the reputation of the organisation.	<p>Adult safeguarding alerts / referrals are managed in a timely manner.</p> <p>Head of Service role has been created and there is a fully staffed, dedicated Adult Safeguarding Team. Relevant training is provided to all staff involved in adult safeguarding, including Advanced Safeguarding Training and legal literacy training.</p> <p>The Teeswide Safeguarding Adults Board (TSAB) is the statutory body that sets the strategic direction for safeguarding and approves and updates all policies and procedures. HBC is represented on the Board and all sub groups.</p> <p>The Quality Assurance Framework (QAF) is completed by a number of peers from other local authorities and other statutory bodies, e.g. the Police. This is linked to the guiding principles of the Care Act.</p> <p>New legislation (Domestic Abuse Act) is now in place to help deal with the increase in domestic abuse.</p> <p>There are a range of multi-agency arrangements in place at Teeswide and local level to share information and support the safeguarding of vulnerable adults including:</p> <ul style="list-style-type: none"> <li>• Multi Agency Risk Assessment Conference</li> <li>• Multi Agency Tasking &amp; Coordination</li> <li>• Integrated Community Safety Team</li> <li>• Ensure all providers have up to date training for their staff in identifying, dealing with and reporting Safeguarding issues</li> </ul> <p>We have recently taken a Teeswide Safeguarding Adults Board (TSAB) report to Adult Services Committee to provide assurance about our adult safeguarding arrangements.</p>

## 7.1 Appendix 2

		<p>We are working across the Tees Valley to review our Team Around The Individual (TATI) arrangements with our strategic partners.</p> <p>We have completed a review in March 2023 with the Local Government Association (LGA) for our safeguarding arrangements to provide further assurance that our practice is safe.</p> <p>HBC currently chairs two sub groups of the TSAB arrangements - Communication &amp; Engagement and Safeguarding Adults Review(s).</p>
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CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	John Lovatt – Assistant Director - Adult Social Care
<b>DIVISION</b>	Adult Social Care
<b>DEPARTMENT</b>	Adults and Community Based Services
<b>DATE OF ASSESSMENT</b>	June 2023

<b>RISK TITLE:</b>	<b>Access to Leisure, Community and Preventative Services</b> – Failure to engage the at risk population in preventative, cultural, leisure and community based activities could impact on demand led services.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Unable to operate buildings due to lack of financial resource including capital investment.</li> <li>• Unable to operate buildings due to lack of staff resource.</li> <li>• Insufficient investment in the redevelopment of leisure and community assets.</li> <li>• Lack of investment in preventative services and financial resource being allocated to treatment/crisis/social care services.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of investment could result in moth balling facilities or selling/leasing to other organisations.</li> <li>• Unable to retain high quality staff to support long term delivery of services.</li> <li>• Existing assets are ageing and in need of investment or replacing. Without investment it will be increasingly challenging to maintain an offer for the whole population.</li> <li>• Demand will increase and further resources will be committed to treatment / crisis responses rather than investing in prevention.</li> </ul>	<ul style="list-style-type: none"> <li>• Planned maintenance programme.</li> <li>• External funding opportunities are being explored.</li> <li>• Social Capital opportunities are being explored</li> <li>• Empowering communities to create their own opportunities.</li> <li>• Working with VCS organisations to support the delivery of community priorities.</li> <li>• Demonstrating to internal and external partners the difference preventative work can make to the economy.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLECTIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE			RED 9	
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Gemma Ptak – Assistant Director - Preventative and Community Based Services
<b>DIVISION</b>	Preventative and Community Based Services
<b>DEPARTMENT</b>	Adult and Community Based Services
<b>DATE OF ASSESSMENT</b>	June 2023

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Highways and Flood Defences</b> – Failure to maintain the Borough Highway infrastructure and protect areas from flooding risks could impact on the economy and quality of life.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Lack of investment in infrastructure.</li> <li>• Deterioration of the highway due to extreme weather.</li> <li>• Escalating costs for schemes.</li> <li>• Loss of key personnel.</li> <li>• Quality of work issues.</li> <li>• Storm intensity exceeding the design capacity of the drainage network.</li> <li>• Climate Change leading to more unexpected and severe weather events such as storm surges, heavy rainfall, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Financial.</li> <li>• Reputation.</li> <li>• Legal.</li> <li>• Health and safety issues where infrastructure cannot be fixed or upgraded.</li> </ul>	<ul style="list-style-type: none"> <li>• Established inspection regimes and policies for both highways and flood/coastal protection assets.</li> <li>• Regular monitoring meetings with insurance officers to assess position.</li> <li>• Regular review on inspection frequencies in conjunction with insurance section to determine policy outcomes.</li> <li>• Use HBC procurement process to ensure robust costs estimates.</li> <li>• Work closely with contractors to ensure deliverable schemes are developed.</li> <li>• Existing Transport Policy in Local Transport Plan.</li> <li>• Programme of installation of dropped kerbs. Programme of installation of low floor bus infrastructure.</li> <li>• Weather warnings provided by Met Office enabling advanced planning to be undertaken.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE		AMBER 6		
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Kieran Bostock – Assistant Director - Neighbourhoods
<b>DIVISION</b>	Neighbourhoods
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services
<b>DATE OF ASSESSMENT</b>	June 2023

<b>RISK TITLE:</b>	<b>Community Safety</b> - Failure to provide a safer Hartlepool where residents and visitors can live free from crime, fear of crime and anti-social behaviour could impact on quality of life and tourism.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• CCTV service unable to operate without access to Civic Centre.</li> <li>• Lack of partnership approach by agencies.</li> <li>• Reduced resources within the police and fire authority.</li> <li>• Lack of scrutiny from Safer Hartlepool Partnership.</li> </ul>	<ul style="list-style-type: none"> <li>• Financial.</li> <li>• Reputation.</li> <li>• Legal.</li> </ul>	<ul style="list-style-type: none"> <li>• Other services could function with remote access to systems.</li> <li>• Footage could be viewed from other locations however cameras would be static.</li> <li>• Regular liaison with Police and Fire Brigade.</li> <li>• Joint working regularly carried out through the Hartlepool Community Safety Team.</li> <li>• All partner agencies work to same strategies in Safer Hartlepool Partnership.</li> <li>• Audit and Governance community safety statutory role.</li> </ul>



## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Sylvia Pinkney - Assistant Director - Regulatory Services
<b>DIVISION</b>	Regulatory Services
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services
<b>DATE OF ASSESSMENT</b>	June 2023

<b>RISK TITLE:</b>	<b>Waste Management</b> - Council are unable to collect and dispose of all household waste within existing financial resources.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>Increased costs relating to waste disposal.</li> <li>Provision of new contract or re-negotiation of existing contract.</li> <li>Lack of contractors willing to remove certain waste products.</li> <li>Current Government consultation relating to waste and future implications of findings.</li> <li>Existing plant/equipment insufficient to meet current needs.</li> </ul>	<ul style="list-style-type: none"> <li>Financial.</li> <li>Reputational.</li> <li>Legal.</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing discussions with existing contractor.</li> <li>Procurement options being considered.</li> <li>Consultation response sent to Government on their proposed new strategy and the possible implications for Councils that may need further consideration.</li> <li>Contractors appointed to produce long term strategy and business case for Tees Valley future waste provision.</li> <li>Waste Management and Officer Groups established across Tees Valley.</li> <li>Availability of ear-marked reserves to cover budget overspend.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE			RED 9	
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Kieran Bostock – Assistant Director - Neighbourhoods
<b>DIVISION</b>	Neighbourhoods
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Additional income sources introduced	Identify possible income sources that could offset the cost increases and share with elected members for consideration and approval.	Assistant Director – Neighbourhoods	December 2023

<b>RISK TITLE:</b>	<b>Business Continuity</b> - Failure to provide Council services as a result of disruption to the normal day to day activities
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Disruption to normal day-to-day activities as a result of a major incident affecting employees, accommodation, IT services or vehicles.</li> <li>• Service delivery partners withdrawing contracted services.</li> <li>• Pandemic Flu.</li> <li>• Major Incident declared affecting the wider community of the town.</li> </ul>	<ul style="list-style-type: none"> <li>• Reputation.</li> <li>• Legal.</li> <li>• Financial.</li> <li>• Health and Safety</li> </ul>	<ul style="list-style-type: none"> <li>• Business Continuity group coordinating arrangements for reviewing, planning and testing.</li> <li>• Business Continuity plans in places for services and functions.</li> <li>• Exercising of Business Continuity plans to ensure fit for purpose.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE				RED 8
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Executive Leadership Team - ELT (Sylvia Pinkney - Assistant Director - Regulatory Services)
<b>DIVISION</b>	All
<b>DEPARTMENT</b>	All
<b>DATE OF ASSESSMENT</b>	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Effective Business Continuity Group in place with regular reporting to ELT and escalation of concerns as required.	Review the effectiveness of the feedback mechanism between the Business Continuity Group and ELT.	Assistant Director – Regulatory Services	September 2023

<b>RISK TITLE:</b>	<b>Economic Regeneration:</b> Failure to encourage regeneration, support enterprise and improve development opportunities for new and existing businesses across the borough.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Failure to secure capital/revenue funding to deliver future regeneration projects</li> <li>• Failure to deliver existing and future regeneration projects on time/budget</li> <li>• Impact of inflation on capital programme costs.</li> <li>• Failure for the BIS/HEC to meet their business/income targets and remain economically viable.</li> <li>• Failure of the Council to effectively engage with local businesses and offer appropriate advice and financial assistance.</li> <li>• Failure of the Tees Valley Combined Authority to effectively engage with local businesses and offer appropriate advice and financial assistance.</li> <li>• Failure of other publicly funded business support organisations to effectively engage and deliver appropriate advice and financial assistance.</li> <li>• Failure of the Council to develop and deliver activities, events and projects that directly contribute to the growth in the economy.</li> </ul>	<ul style="list-style-type: none"> <li>• Legal and financial impacts relating to Council capital/revenue and external funding of regeneration projects and assets.</li> <li>• Reputational damage to the Council.</li> <li>• Adverse effect on local economy.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensuring the Council teams have adequate staff and resources to undertake duties effectively.</li> <li>• Close monitoring of the current Regeneration Programme to identify issues/constraints/obstacles and look to positively remedy.</li> <li>• Capital programme monitoring arrangements in place and capital contingency built in to 2022/23 MTFS.</li> <li>• Continued close working relationship with the Tees Valley Combined Authority and other business support organisations.</li> <li>• Yearly plan of economy related interventions/activities to be undertaken.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Bev Bearne - Assistant Director - Development and Growth
<b>DIVISION</b>	Development and Growth
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services
<b>DATE OF ASSESSMENT</b>	June 2023

<b>RISK TITLE:</b>	<b>Housing</b> - Failure to address the housing requirements of the borough and provide affordable, high-quality housing.		
<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>			
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?	
<ul style="list-style-type: none"><li>• Imbalance in the current housing stock with existing provision skewed towards terraced/low quality dwellings.</li><li>• Lack of Council owned land that can be developed for additional affordable housing provision.</li><li>• Non or stalled delivery of the allocated housing sites and associated infrastructure provision identified in the Local Plan.</li><li>• Downturn in the local, regional, national housing market due to economic/political changes.</li><li>• Developments in the Teesmouth and Cleveland Coast Special Protection Area (SPA) not being approved for planning because they cannot demonstrate that they are nutrient neutral.</li><li>• Housing Needs of the population cannot be met through current provision</li></ul>	<ul style="list-style-type: none"><li>• Inability of the Council to benefit from additional New Homes Bonus (subject to Government changes of this regime).</li><li>• Inability of the Council to capture additional and higher value Council Tax.</li><li>• Negative economic impact in terms pf physical job creation in the construction phase but also in providing attractive living environment for economically active people.</li><li>• Reduced inward migration of economically active people and the risk of outward migration to more attractive settlements.</li></ul>	<ul style="list-style-type: none"><li>• Adopted Local Plan which seeks to specifically address the current and future housing requirements of the Borough via allocating appropriate land and policies that control development.</li><li>• Adopting a Housing Strategy which seeks to address the housing requirements of the borough and provide affordable, high-quality housing.</li><li>• Memorandum of understanding agreed with Natural England on a range of mitigation for waste water discharges which will allow developments to proceed.</li><li>• Undertaking a review of all local intelligence re: housing stock/ housing quality and housing needs</li></ul>	



## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE			AMBER 6	
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Bev Bearne - Assistant Director - Development and Growth Kieran Bostock - Assistant Director – Neighbourhoods Danielle Swainston Assistant Director – Joint Commissioning
<b>DIVISION</b>	Various
<b>DEPARTMENT</b>	Development, Neighbourhoods and Regulatory Services t, Children’s and Joint Commissioning
<b>DATE OF ASSESSMENT</b>	June 2023



## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				RED 12
	POSSIBLE				
	HARDLY EVER				

RESPONSIBLE OFFICER	Executive Leadership Team - ELT (Denise McGuckin – Managing Director)
DIVISION	All
DEPARTMENT	All
DATE OF ASSESSMENT	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Being prepared to respond quickly to future changes	Ongoing close monitoring of the impact of inflation pressures on the Capital programme and service delivery across the Council.	Director of Resources and Development	March 2024

## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Adult Social Care</b> - Workforce, system and financial pressures within the NHS may negatively impact on Adult Social Care and the broader Council by placing unrealistic expectations on Adult Social Care to assess and provide services to vulnerable and ill people earlier.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>Continued operational pressures linked to Covid, especially long term Covid , affecting the public and the workforce.</li> <li>Significant number of flu cases affecting the public and the workforce.</li> <li>Further changes to the regulatory framework we operate in linked to hospital discharges, Mental Capacity Act.</li> <li>Further pressures impacting on services to people with a mental health need.</li> <li>Further pressures on the ambulance service and bed availability for people experiencing a mental health crisis.</li> <li>Any further pressures on funding of Adult Social Care.</li> <li>Recent developments such as the introduction of the ‘Virtual Ward’ may increase demand beyond our ability to respond in a timely way.</li> </ul>	<ul style="list-style-type: none"> <li>Adult Social Care being expected to act beyond the scope of our legal powers (ultra vires).</li> <li>Adult Social care being required to manage clinical interventions rather than social care issues.</li> <li>If the performance of Adult Social Care was negatively affected by the causes as outlined, the impact would be significant on acute hospital availability and the availability of beds to meet crisis interventions for people with a mental health need.</li> <li>Increased pressure on family carers, leading to carer breakdown with the potential to lead to more placements required in care homes. Leading to greater expenditure for Adult Social Care.</li> <li>Increased waiting times for an assessment of need, leading to greater risk to ‘life and limb’ regarding the people we serve and their family carers.</li> <li>Negative implications on the finances of Adult Social Care with increased expenditure for the provision of domiciliary care expenditure as we may have to meet people’s needs earlier when they are frailer and requiring more care.</li> <li>Increased stress on the workforce because of the a requirement to work quicker, especially in relation to hospital discharges and deal with patients and their family members with more complex needs.</li> </ul>	<ul style="list-style-type: none"> <li>We have regular, scheduled meetings with our Health colleagues to reflect on the health and social care systems response to the recovery phase following the Covid pandemic and pressures caused by the expansion of elective surgical operations to reduce NHS waiting lists, which inevitably increases activity across the whole system. We have agreed contingences in situ if there is a prolonged period of inclement weather, whether this be a heat wave or a ‘cold snap’.</li> <li>We are close to finalising a workforce strategy for Adult Social Care to enable the staff to access training and develop skills that will enable them to transfer to different parts of the Department in the event of a crisis situation.</li> <li>We have highlighted the potential financial pressures linked to the provision of health and social care services to the Executive Leadership Team and agreed a short term financial strategy with the Pooled Budget Partnership Board. With regard to the Better Care Fund (BCF) the joint priorities for the provision of health and adult social care across Hartlepool has been agreed, as has the associated funding linked to the BCF for the period 2023 – 2024. In</li> </ul>

## 7.1 Appendix 2

	<ul style="list-style-type: none"> <li>This increased stress may lead to staff absence regarding short term and long term unplanned leave.</li> </ul>	relation to the period 2024 – 2025 we are awaiting further detail from the Government before confirming.
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CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				
	POSSIBLE				RED 8
	HARDLY EVER				

RESPONSIBLE OFFICER	John Lovatt
DIVISION	Adult Social Care
DEPARTMENT	Adult and Community Based Services
DATE OF ASSESSMENT	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Monitoring of BCF expenditure 2023-2024	Activity and related expenditure needs monitoring to identify pressures within the health and adult social care system to mitigate risks to the Department's and broader Council's financial position.	Assistant Director – Adult Social Care  Head of Strategic Commissioning – Adult Social Care  Head of Finance	September 2023

**7.1 Appendix 2**

'Virtual ward'	A proposal has been agreed with the NHS in relation to this development which will need monitoring operationally via the Head of Service and via the Commissioned Services Team.	Assistant Director – Adult Social Care  Head of Service – Early Intervention  Head of Strategic Commissioning	September 2023
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<b>RISK TITLE:</b>	<b>Tall Ships</b> – Failure to deliver a successful Tall Ships Race 2023 leading to financial loss, adverse publicity and reputational damage.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Supply chain issues preventing ability to secure essential contracts</li> <li>• Lack of visitors and low spend</li> <li>• Licence to occupy land is not in place</li> <li>• Insufficient marketing investment</li> <li>• Lack of HBC resources to adequately staff event planning and delivery</li> <li>• Inability to respond effectively in the event of a major emergency and inability to keep event running</li> <li>• Lack of sponsorship and corporate hospitality take up</li> <li>• Workforce turnover leading to loss of knowledge, experience and competence</li> <li>• Increased fuel costs</li> <li>• Lack of funding</li> <li>• Lack of volunteer support</li> <li>• Breach / non-compliance with health and safety legislation and practices.</li> <li>• Pandemic / lockdown</li> <li>• Traffic congestion and other issues</li> </ul>	<ul style="list-style-type: none"> <li>• Non-delivery or cancellation of the expected event</li> <li>• Financial Loss</li> <li>• Reputational damage</li> <li>• Legal Challenge</li> <li>• Public dissatisfaction</li> <li>• Limited community engagement</li> <li>• Poor attendance</li> </ul>	<ul style="list-style-type: none"> <li>• Tall Ships Risk Register in place that is actively monitored.</li> <li>• Individual risks each have a risk owner and an identified set of additional control actions to be progressed.</li> <li>• Close monitoring of top rated risks by the Tall Ships Strategic Group.</li> <li>• Individual workstream leads identified with responsibility for monitoring risks within their workstreams.</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLECTIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE				RED 12
	POSSIBLE				
	HARDLY EVER				

<b>RESPONSIBLE OFFICER</b>	Gemma Ptak – Assistant Director - Preventative and Community Based Services
<b>DIVISION</b>	Preventative and Community Based Services
<b>DEPARTMENT</b>	Adult and Community Based Services
<b>DATE OF ASSESSMENT</b>	June 2023



## 7.1 Appendix 2

<b>RISK TITLE:</b>	<b>Market failure and sufficiency of provision</b> – Failure within the children’s care or education sector to provide sufficient foster care, special school and residential care that can meet the needs of children leading to insufficient capacity to support vulnerable children appropriately.
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<b>DETAILED DESCRIPTION OF CURRENT RISK:</b>		
<b>CAUSES</b> - what could make it happen?	<b>IMPLICATIONS</b> - what impact would it have if it did?	<b>EXISTING INTERNAL CONTROLS</b> – what are we already doing to reduce the likelihood and/or impact of it happening?
<ul style="list-style-type: none"> <li>• Insufficient local provision available to commission places</li> <li>• Insufficient places regionally and nationally to meet need and demand</li> <li>• Action taken by the regulator to stop a service from operating.</li> <li>• Provider decides to close or change focus of provision.</li> <li>• Provider cannot operate due to lack of appropriate workforce/ staffing.</li> <li>• Commissioned places not able to provide high quality services.</li> <li>• Complexity of need for some children is so great all providers unable to offer place as unable to meet need</li> <li>• Regulatory framework makes providers reluctant to offer placements to the most challenging children as worried providing placement may affect their Ofsted judgement.</li> </ul>	<ul style="list-style-type: none"> <li>• Placements for vulnerable children ceasing at very short notice with no available alternative placements sourced.</li> <li>• Services unavailable to meet assessed need placing children at risk of harm.</li> <li>• Vulnerable children need to be moved to different provision which is detrimental to their development, education, health and wellbeing and experience repeated placement disruption.</li> <li>• Increase in out of area placements if there is insufficient provision locally.</li> <li>• Increase in need to commission places from the independent sector which creates additional budget pressures for both care and education</li> <li>• Reputational damage to the Council if services cannot be provided within Hartlepool to meet local needs.</li> <li>• Increasing number of unregulated or alternative provision packages for children.</li> </ul>	<ul style="list-style-type: none"> <li>• Opening additional children’s homes and special school to ensure more children’s needs can be met in Hartlepool</li> <li>• Continued fostering campaign to increase number of foster carers able to offer homes for children in our care</li> <li>• Increasing school place capacity in special schools in Hartlepool</li> <li>• Robust exploration of extended family members who can care for children within their family network</li> <li>• Strong relationships with providers in local area who know organisation and will seek to meet our placement needs</li> <li>• High level of support to children placed in independent provision including additional support to fragile placements to prevent breakdown</li> <li>• Quality assurance of independent provision</li> <li>• Annual sufficiency assessments are completed to identify where there are emerging gaps in provision and work with providers to develop provision</li> </ul>

## 7.1 Appendix 2

CURRENT RISK ASSESSMENT:					
RISK MATRIX		IMPACT			
		NEGLIGIBLE	MINOR	MAJOR	CRITICAL
LIKELIHOOD	ALMOST CERTAIN				
	PROBABLE			RED 9	
	POSSIBLE				
	HARDLY EVER				

RESPONSIBLE OFFICER	Danielle Swainston - Assistant Director - Joint Commissioning
DIVISION	Joint Commissioning
DEPARTMENT	Children's and Joint Commissioning Services
DATE OF ASSESSMENT	June 2023

ADDITIONAL CONTROLS TO BE PUT IN PLACE:			
ADDITIONAL CONTROL	WHAT NEEDS TO BE DONE? (ACTION)	LEAD OFFICER	DUE DATE
Undertake High Needs Block Review to ensure that local provision is in place to meet children's education needs (SEND)	High Needs Block (HNB) Review presented to Schools Forum	Assistant Director - Joint Commissioning	September 2023
	Implement recommendations as per HNB report	Assistant Director - Joint Commissioning	September 2023