







**Agenda Item No: 6**

**Title: COMMISSION FOR RACIAL EQUALITY – PERFORMANCE INDICATOR**

**Author: Rod Chamberlain (01799) 510508**

### **Summary**

- 1 This report advises the Committee on the current situation regarding the Code of Practice issued by the Commission for Racial Equality.

### **Background**

- 2 At the last meeting of the committee a report was requested regarding the Performance Indicator ACD1 'Does the authority follow the Commission for Racial Equality's code of practice in rented housing'. This was because the Council did not formally adopt the original voluntary code in 1990 as it appeared extremely bureaucratic to administer at the time.

### **The Current Position**

- 3 In recent years, the Council has adopted an equal opportunities policy for the housing service which is reiterated in the Housing Strategy Statement and the Tenant Compact. A statement of this commitment appears on all housing leaflets. This has resulted in the Council operating broadly within the spirit of the Code.
- 4 Following some recent high profile court cases amendments have very recently been made to the Race Relations Act. This has resulted in some changes to the operation of Code of Practice from the Commission for Racial Equality.
- 5 Officers will be considering the details of these changes with a view of submitting a report to the next meeting of the Health and Housing Committee for a policy decision as to whether or not to formally adopt the amended code.

### **FOR INFORMATION**

Background Papers: Draft Code of Practice on the Duty to Promote Race Equality – December 2001.

**Agenda Item No: 7**

**Title: CONSULTATION PAPER – LOCAL AUTHORITY HEALTH OVERVIEW AND SCRUTINY**

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### **Summary**

- 1 This report advises Members of a recent Government Consultation Document setting out its intentions for overview and scrutiny of NHS bodies. The closing date for responses is the 16<sup>th</sup> April 2002. A similar report will be submitted to Community and Housing Scrutiny Committee on the 13<sup>th</sup> March 2002. The Committee is recommended to authorise the officers in consultation with the Chairman of the Committee, to respond to the Consultation Paper after seeking the views of the Scrutiny Committee, or to refer the whole issue to the Scrutiny Committee.

### **Background**

- 2 The Government intends that Local Authority Overview and Scrutiny Committees will represent democratically elected local views on the quality, performance and development of health services, to local NHS bodies.
- 3 The aim of local health scrutiny on behalf of local communities is threefold
  - (a) First, to ensure that people's needs and wishes for health and health related services that meet the needs of all the population (including minorities, socially excluded groups and other targeted equalities groups) have been identified towards achieving local health improvements.
  - (b) Second, to scrutinise whether services provided that impact on the health of local inhabitants are accessible to, and can be assessed by, all parts of the local community.
  - (c) And last, to scrutinise whether the outcomes of intervention (whether through services or other intervention designed to positively impact on the health of local inhabitants) are equally good for all groups and sections of the local population.
- 4 The Local Authority exercising the Social Services function, in our case Essex County Council, will be responsible for the Overview and Scrutiny Committee but three options are suggested which include a role for Districts in the arrangements.
  - Two or more authorities working together, where one is a district council, to form a single overview and scrutiny committee (the County Council would remain in the lead).
  - A delegation of functions (but not responsibility) for overview and scrutiny by the county to the district.

- Counties could co-opt district members on to the county committee as voting members.

5 A meeting has already taken place at officer level between representatives of the County, Unitary Authorities and the Districts and there is a commitment to work together in partnership to ensure scrutiny is undertaken at the most effective level. There is a recognition that there is likely to be a variety of approaches to deciding the composition of overview and scrutiny committees and that every effort should be made to avoid duplication.

### **Draft Principles**

- 6 The aim of the health scrutiny work is to improve the health of the people of the area, and to identify and tackle health inequalities.
- 7 Essex County Council, Southend-on-Sea Borough Council, and Thurrock Borough Council are committed to working in partnership with each other, with the Districts and Boroughs Councils within Essex, and all NHS bodies, including organisations which represent patients.
- 8 The partners will seek to set up a framework for organising NHS overview and scrutiny in the area so that scrutiny is undertaken at the most effective level, with a view to co-ordinating the work, establishing priorities, and agreeing common standards for the quality of scrutiny work.
- 9 All partners recognise that there will be times when it will not be possible to reach consensus on the issues to be scrutinised and on the conclusions drawn from scrutiny. All sides therefore recognise that other councils have the right to conduct their own scrutinies, and to draw their own conclusions, when they judge that to be in the best interests of their residents. That applies both to the three social services authorities operating within specific NHS scrutiny powers, and to district and borough councils using normal scrutiny powers.
- 10 There is likely to be a 'horses for courses' approach to deciding the participation in scrutiny panels. Scrutiny of, for example, the Ambulance Trust, would require a very different approach from scrutiny of care for the elderly in a couple of districts. Similarly, some scrutinies may be lengthy and complex, whereas others will be short. The above framework, however, would help to plan the programme and ensure common standards for the work.
- 11 Every effort should be made to avoid 'competitive scrutiny', i.e. two different authorities conducting separate scrutinies of the same NHS service at the same time.
- 12 There will need to be a clear distinction between the management of service delivery partnerships (commissioning, provider, or both) already in place with the NHS, and the scrutiny of those bodies. As the Government guidance makes clear, Members involved in executive management cannot be involved in this scrutiny work.

- 13 Joined up working using this framework will facilitate better communication, allowing one authority to 'tap in' to any important issue which might occur outside their area but affecting their residents.

RECOMMENDED that

- 1 the commitment to work together with other Essex Authorities be endorsed, and
- 2 that there should be District Council Members on overview and scrutiny committees dependant on local circumstances, and
- 3 the officers, in consultation with the Chairman of the Committee, be authorised to submit that these views together with any others that the Committee deem appropriate be made in response to the Consultation Document, after seeking the views of the Scrutiny Committee or
- 4 the issue be referred to the Scrutiny Committee together with this Committee's views.

Background Papers: Local Authority Health Overview and Scrutiny - A Consultation Document. <http://www.doh.gov.uk/healthscrutinyconsultation>

**Agenda Item No: 8**

**Title: HOUSING BEST VALUE REVIEW 2002/03**

**Author: Rod Chamberlain (01799) 510508**

### **Summary**

- 1 Appended to this report is the proposed Terms of Reference for the Housing Best Value Review for 2002/03.
- 2 This report was due to be considered by the Health and Housing Committee on 7 March 2002 with a recommendation that the Terms of Reference be approved by the Committee.
- 3 Any points raised by Members of the Health and Housing Committee will be reported verbally at the meeting.

RECOMMENDED that the Terms of Reference for the 2002/03 Housing Best Value Review be approved.

Background Papers: BVPP 2002/03

## **BEST VALUE REVIEW 2002/3**

### **TERMS OF REFERENCE**

#### **HOUSING SERVICES**

##### **Scope**

The review will consider whether the Housing Services identified to be reviewed, namely housing need, homelessness, tenant participation and private sector housing:

- continue to remain as community priorities
- meet customers/service users expectations
- can be provided more effectively and efficiently

The aim is to show what we are currently achieving and how we are going to improve in future.

##### **The Services**

- The services and their costs will be briefly described
- The reason(s) why the current services are being provided will be explained (including outlining the Council's statutory duties), eg how they relate to the strategic objectives, Council policies and priorities.

##### **Some fundamental general questions**

- What is the Council wanting to achieve in the future in relation to these services?
- Does the Council have a statutory duty to provide all these services?
- If not, should the Council cease to provide the service and if so what is the likely impact?
- If the services are to be continued, are there better alternative ways to deliver the service either in-house or by another agency?

##### **Some specific questions**

- Is the Council identifying the real extent of housing need within the District and, if so, is it providing those applicants in the most need with suitable social housing?
- Do we make the best use of the voluntary sector in dealing with homelessness?

- Can homelessness be avoided in more cases and does the Council deal with applications appropriately?
- In view of imminent new legislation, does the Council need to reconsider its criteria for applicants being accepted onto the Housing Register and are applicants given enough choice when being considered for rehousing, whilst accepting there is only a limited supply of available accommodation?
- Can tenants be better informed and more involved in decisions affecting their homes, tenancies and their local environment?
- Is the Tenant Compact still relevant, in particular can formal arrangements for tenants involvement in decisions be improved?
- Is the condition of the Private Housing stock at an acceptable level?

### **How we will carry out the review**

The answers to the **challenging** questions above will be assisted by

- **Comparing** where practical with service providers in similar Councils and, where appropriate, Registered Social Landlords (RSL's) by probing questions rather than attempted statistical comparisons.
- **Consulting** with service users, tenants, where appropriate, others to supplement where necessary existing evidence.
- **Competing**, where appropriate with other providers.

### **The Process**

- The Member Reference Group will meet regularly with officers.
- There will be challenge events in May.
- There will be notes available on the review progress to Members and staff.
- There will be reports to Scrutiny Committee.
- An improvement plan will go to Scrutiny Committee in November and Health and Housing in January 2003.

### **Membership of Review Team**

- Members To be confirmed
- Tenant Rep Mr William Gladman
- Officers Core Team of Rod Chamberlain, Helen Frost, Liz Petrie and Will Cockerell  
Others contributing - Jenny Warren, Roz Millership, Ade Dellow
- Critical Friend To be advised (part of Core Team).