

BIRMINGHAM CITY COUNCIL

CABINET

TUESDAY, 16 MAY 2023 AT 10:00 HOURS
IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA
SQUARE, BIRMINGHAM, B1 1BB

A G E N D A

1 NOTICE OF RECORDING/WEBCAST

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Public-I microsite ([please click this link](#)) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2 APOLOGIES

To receive any apologies.

3 DECLARATIONS OF INTERESTS

Members are reminded they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting.

If a disclosable pecuniary interest is declared a Member must not participate in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If other registerable interests are declared a Member may speak on the matter only if members of the public are allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If it is a 'sensitive interest', Members do not have to disclose the nature of the interest, just that they have an interest.

Information on the Local Government Association's Model Councillor Code of Conduct is set out via <http://bit.ly/3WtGQnN>. This includes, at Appendix 1, an interests flowchart which provides a simple guide to declaring interests at meetings.

4 **EXEMPT INFORMATION – POSSIBLE EXCLUSION OF THE PRESS AND PUBLIC**

a) To highlight reports or appendices which officers have identified as containing exempt information within the meaning of Section 100I of the Local Government Act 1972, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.

b) To formally pass the following resolution:-

RESOLVED – That, in accordance with Regulation 4 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the public be excluded from the meeting during consideration of those parts of the agenda designated as exempt on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information.

<u>5 - 78</u>	5	<u>BIRMINGHAM AND SOLIHULL SEXUAL AND REPRODUCTIVE HEALTH STRATEGY 2023 2030</u>
		Report of Director for Public Health
<u>79 - 86</u>	6	<u>ACIVICO FURTHER CONTRACT EXTENSION</u>
		Report of Strategic Director Council Management
<u>87 - 102</u>	7	<u>OFSTED INSPECTION OF BIRMINGHAM CITY COUNCIL LOCAL AUTHORITY CHILDREN'S SERVICES 20 FEBRUARY TO 3 MARCH 2023</u>
		Report of Director for Children & Families
<u>103 - 116</u>	8	<u>STAYING INDEPENDENT AT HOME POLICY – MAJOR ADAPTATIONS AND KEY SAFE SERVICE DELIVERY</u>
		Report of Director for Adult Social Care
<u>117 - 148</u>	9	<u>AFFORDABLE HOUSING - SITES FOR DISPOSAL</u>
		Report of Strategic Director for Place, Prosperity and Sustainability
<u>149 - 232</u>	10	<u>RESPONSE TO INDEPENDENT REVIEW OF BIRMINGHAM SPECIAL EDUCATIONAL NEEDS AND DISABILITY INFORMATION, ADVICE AND SUPPORT SERVICE (SENDIASS)</u>

<u>233 - 266</u>	11	<u>SCHOOLS CAPITAL PROGRAMME - SCHOOL CONDITION ALLOCATION, BASIC NEED ALLOCATION 2023-24 + FUTURE YEARS</u>
		Report of Director for Children & Families
<u>267 - 314</u>	12	<u>DIGITAL STRATEGY YEAR ONE UPDATE AND REVIEW</u>
		Director, Digital and Customer Services
<u>315 - 332</u>	13	<u>SINGLE HOMELESSNESS ACCOMMODATION PROGRAMME BIDS</u>
		Report of Interim Strategic Director - City Housing
<u>333 - 356</u>	14	<u>CITY REGION SUSTAINABLE TRANSPORT SETTLEMENT PROGRAMME GOVERNANCE</u>
		Report of Strategic Director Place, Prosperity and Sustainability
<u>357 - 386</u>	15	<u>DIATOMIC (DIGITAL INNOVATION TRANSFORMATIVE CHANGE) INNOVATE UK FUNDED WEST MIDLANDS INNOVATION ACCELERATOR PROJECT - FULL BUSINESS CASE</u>
		Report of Strategic Director Place, Prosperity and Sustainability and Strategic Director Council Management
<u>387 - 400</u>	16	<u>ICB FURTHER SUPPORT FUNDING 2022-23</u>
		Report of the Director of Adult Social Care
<u>401 - 408</u>	17	<u>KEY DECISION PLANNED PROCUREMENT ACTIVITIES (JUNE 2023 – AUGUST 2023) AND QUARTERLY CONTRACT AWARD SCHEDULE (JANUARY 2023 – MARCH 2023)</u>
		Report of Assistant Director - Procurement
<u>409 - 416</u>	18	<u>NON KEY DECISION PLANNED PROCUREMENT ACTIVITIES (JUNE- AUGUST 2023) AND QUARTERLY AWARDS SCHEDULE (JANUARY - MARCH 2023)</u>
		Report of Assistant Director - Procurement
	19	<u>OTHER URGENT BUSINESS</u>
		To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chair are matters of urgency.

Birmingham City Council

Report to Cabinet

16th May 2023



Subject: BIRMINGHAM AND SOLIHULL SEXUAL AND REPRODUCTIVE HEALTH STRATEGY 2023-2030

Report of: Dr Justin Varney, Director of Public Health

Relevant Cabinet Member: Cllr Mariam Khan - Health and Social Care
Cllr Yvonne Mosquito - Finance and Resource

Relevant O &S Chair(s): Cllr Mick Brown - Health and Social Care
Cllr Akhlaq Ahmed - Resources

Report author: Becky Pollard - Interim Public Health Assistant Director

Email: Becky.Pollard@birmingham.gov.uk

Juliet Grainger – Service Lead Adults

Email: Juliet.Grainger@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011357/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 The Birmingham and Solihull Sexual and Reproductive Health Strategy 2023-2030 is a joint strategy between Birmingham City Council (BCC) and Solihull Metropolitan Borough Council (SMBC), which sets out themes, priorities, and approaches to meeting the sexual health needs of the populations of Birmingham and Solihull. The strategy's content provides a response to tackling increasing rates of sexually transmitted (STIs) and HIV, and inequalities in sexual and reproductive health, which impacts negatively on health and wellbeing.
- 1.2 The strategy reflects the findings of the [Sexual and Reproductive Health Needs Assessment](#) carried out in 2021 and the [public and stakeholder consultation](#) on the draft strategy conducted between May 2022 and July 2022.
- 1.3 At Cabinet on the 11 October 2022 the inter dependencies between the Sexual and Reproductive Health Strategy and the procurement of the new sexual health service was set out. The [key decisions from Cabinet](#) are on CMIS. We will develop a clear Procurement strategy that corresponds to the Birmingham and Solihull Sexual and Reproductive Health Strategy 2023-2030.

2 Recommendations

- 2.1 It is recommended that Cabinet ratify the Strategy so it can be published and used to inform the Service Specification for the procurement of the Sexual and Reproductive Health service beginning April 2024. If the Strategy is not ratified, we risk not having a strategic approach to the procurement of the service which needs to be complete by March 2024 for the new contract to commence in April 2024.

3 Background

- 3.1 The Birmingham and Solihull Sexual and Reproductive Health Strategy 2023-2030 has been distributed as a separate attachment.
- 3.2 The objectives of the strategy are to:
 - Ensure that every resident has access to sexual health services that meet their individual needs.
 - Enable services that are local, relevant, approachable, confidential, non-judgmental, to provide services to anyone in need, while respecting all human protected characteristics.
 - Enable citizens to have control of their own sexual health with services providing support where needed.
- 3.3 The themes of the strategy are:
 - Theme 1: Priority groups
 - Theme 2: Reducing rates of sexually transmitted infections (STIs)
 - Theme 3: Reducing the number of unplanned pregnancies
 - Theme 4: Healthy sexual behaviours
 - Theme 5: Children and young people

3.4 The BCC Design Team have ensured the Strategy meets accessibility guidelines.

3.5 Timeline for the strategy:

Dates	Activities
2021	Research and write-up of the Sexual and Reproductive Health Needs Assessment
December 2021 – February 2022	Drafting of the Birmingham & Solihull Sexual and Reproductive Health Strategy & consultation questions.
March 2022 – April 2022	Production of the Strategy and questionnaire by the BCC Design Team.
May 2022 – July 2022	Public and stakeholder consultation on the draft strategy. The purpose of this was to provide assurance that the strategy adequately reflected the findings of the Needs Assessment and to incorporate public and stakeholder feedback into the vision and themes of the strategy.
22 nd September 2022	Cabinet Member Briefing (CMB) on the consultation findings.
27 th September 2022	Birmingham Health and Wellbeing Board – findings from the public consultation on the draft strategy were presented.
November 2022 – January 2023	Incorporation of changes based on consultation findings and feedback from Birmingham Health and Wellbeing Board.
January 2023 – March 2023	Finalisation of the document by the BCC Design Team.

4 Options considered and Recommended Proposal

4.1 The Strategy is ratified by Cabinet and can therefore be published and used to inform the Service Specification for the procurement of the Sexual and Reproductive Health service beginning by April 2024.

4.2 Cabinet recommends amendments to the Strategy prior to publish.

5 Consultation

5.1 The Sexual Health Needs Assessment involved a public and stakeholder engagement piece, which formed the basis of the Sexual and Reproductive Health Strategy.

5.2 In May 2022 – July 2022 there was public and stakeholder consultation on the draft strategy. A summary of the consultation findings can be found in **Appendix 3** and the full consultation responses are attached in **Appendix 4**. The purpose of this was to provide assurance that the strategy adequately reflected the findings of the Needs Assessment and to incorporate public and stakeholder feedback into the vision and themes of the strategy.

- 5.3 Amendments were made to the strategy based on feedback from the public and stakeholder consultation. A full report of 'You said, we did' can be found in **Appendix 5**. In summary we:
- 5.3.1 Changed the term 'unwanted pregnancies' to 'unplanned pregnancies.'
 - 5.3.2 Changed the name of Theme 3 from 'Building Resilience' to 'Healthy Sexual Behaviours'
 - 5.3.3 Made more specific changes and additions to each theme, preponderantly around increasing access to services, provision for more vulnerable groups and consent, safeguarding and confidentiality concerns. These are detailed in **Appendix 5**.
- 5.4 We will further engage and consult with the public and stakeholders on the Sexual and Reproductive Health Service Specification for the service beginning April 2024 to ensure it meets their needs and expectations.

6 Risk Management

- 6.1 If the Strategy is not published, we risk not having a strategic approach to the procurement of the service which needs to be complete by March 2024 for the new contract to commence in April 2024. The likelihood of this is low, however the impact is high.
- 6.2 Actions to manage risk:
- 6.2.1 The Strategy and supporting information have been consulted on, and has been approved by Public Health SMT, Council Leadership Team and the Cabinet Member so it is expected to be suitable for publication.
 - 6.2.2 Work will continue to delivery against all relevant national and local health inequalities and outcomes for citizens targets.
 - 6.2.3 The Health and Wellbeing Board will oversee the delivery of health activity against the ambitions set out in the strategy, supported by a multilevel regional and local governance process and to guide and enable us to deliver an effective Sexual and Reproductive Health Service in Birmingham.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

- 7.1.1 Birmingham is an aspirational city to grow up in
- 7.1.2 Birmingham is a fulfilling city to age well in

7.2 Legal Implications

- 7.2.1 The Health and Social Care Act 2012 and associated regulations transferred the responsibility for public health, including sexual health, from the NHS to local authorities from April 2013. Several key indicators in the Public Health

Outcome Framework relate to these areas and it is likely that they will be assessed in terms of performance.

7.3 Financial Implications

- 7.3.1 The total value of the Sexual and Reproductive Health Service contract post March 2024 for Birmingham is estimated to be £15,000,000 per year. This has been built into the 4-year projection of spend in the public health grant and is affordable as a fixed amount contribution with a projected annual inflation uplift. The annual NHS pay settlement has an impact on the cost of this contract for the NHS employed staff providing services, as this is set nationally this will be managed within the financial envelope through efficiencies over the length of the contract unless there is additional funding from Government to cover this cost as part of the annual public health grant settlement.

7.4 Procurement Implications (if required)

- 7.4.1 None identified.

7.5 Human Resources Implications (if required)

- 7.5.1 None identified.

7.6 Public Sector Equality Duty

- 7.6.1 See **Appendix 1** Equality Impact Assessment

7.7 Environmental and Sustainability Implications

- 7.7.1 Not applicable because it is a progress report on the Sexual and Reproductive Health strategy, giving an update post statutory consultation.

8 Appendices

- 8.1 **Appendix 1** – Equality Impact Assessment
- 8.2 **Appendix 2** – Birmingham and Solihull Sexual and Reproductive Health Strategy 2023-2030
- 8.3 **Appendix 3** – Consultation findings on the draft strategy
- 8.4 **Appendix 4** – Full consultation responses on the draft strategy
- 8.5 **Appendix 5** – Sexual Health Strategy Consultation: ‘You said, we did’

9 Background Documents

- 9.1 [Sexual Health Needs Assessment](#)
- 9.2 [Key decisions from Sexual Health Service Extension Cabinet \(11th October 2022\)](#)

Title of proposed EIA	Sexual and Reproductive Health Strategy 2023-2030
Reference No	EQUA1109
EA is in support of	New Strategy
Review Frequency	Annually
Date of first review	20/03/2024
Directorate	Strategy Equality and Partnerships
Division	Public Health
Service Area	Sexual and Reproductive Health
Responsible Officer(s)	Lottie Drury
Quality Control Officer(s)	Juliet Grainger
Accountable Officer(s)	Becky Pollard
Purpose of proposal	To approve the Sexual & Reproductive Health Strategy 2023-2030 so it can be used to inform the procurement of the service post March 2024.
Data sources	Survey(s); Consultation Results; Other (please specify)
Please include any other sources of data	Sexual and Reproductive Health Needs Assessment and feedback from the public and stakeholder consultation
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Service Users / Stakeholders; Wider Community
Age details:	The Sexual Health Strategy specifies that the service will be universally accessible to all ages within the legal framework for sexual consent and will therefore have a positive impact on this protected characteristic. Some of the specific actions recommended in the strategy are targeted at vulnerable and most at-risk populations, including those under 25 years of age. The system will also maintain a focus on the needs of Young

People and will further develop the service response to groups of Young People with greatest needs e.g. Looked after Children and Care Leavers. Guidance recommends that specific services are made available to Young People as evidence indicates this age group is more at risk of poor sexual health. Improved access to contraceptive services and larger volumes of young women using the most effective contraception will be achieved through redesigning the local approach. The National Chlamydia Screening Programme (NCSP) has changed focus by promoting screening for young women on change of partner or annually. The National Human Papillomavirus (HPV) vaccination programme is also benefiting girls and boys in terms of a reduction in genital warts. The strategy also identifies the needs for an Under 13s pathway to be developed.

Protected characteristic: Disability

Service Users / Stakeholders; Wider Community

Disability details:

This strategy will have a neutral impact on disabilities. The service will be contracted to meet all requirements around the Equality Act 2010 to ensure their services are accessible to disabled people. The service specification will outline in detail the requirements for the service to comply with the Equality Act 2010 and the Public Sector Equality Duty and ensure that all staff are trained and competent in equality and diversity issues.

Protected characteristic: Sex

Service Users / Stakeholders; Wider Community

Gender details:

Publishing the strategy will have a positive impact on this protected characteristic. The service will need to demonstrate that it is contributing to the delivery of local priorities, including those that focus on meeting the particular needs of women, men and those who identify as non-binary. The service will identify those being, or at risk of being, sexually exploited and aim to reduce health inequalities for people who experience poor sexual health, including MSM (men who have sex with men), lesbians, bi-sexual women and transgender people. An objective is to ensure that robust safeguarding arrangements are in place, which includes issues such as sexual exploitation and FGM (female genital mutilation) which disproportionately affects women and girls. Dedicated staffing that is configured in response to domestic violence and sexual violence will be available

and explicit care pathways of support will be made available. Men who have sex with men are targeted through outreach to ensure sexual health needs are addressed.

Protected characteristics: Gender Reassignment

Service Users / Stakeholders; Wider Community

Gender reassignment details:

The strategy is likely to have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including this protected group and those who suffer from gender dysphoria. The service will be expected to meet all service user needs by taking account of equality, discrimination and good relations between protected groups in the way that it delivers services, buys goods and services and employs people.

Protected characteristics: Marriage and Civil Partnership

Service Users/ Stakeholders; Wider Community

Marriage and civil partnership details:

The strategy is likely to have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including this protected group.

Protected characteristics: Pregnancy and Maternity

Service Users / Stakeholders; Wider Community

Pregnancy and maternity details:

The strategy will have a positive impact on this protected characteristic. The sets out actions to reduce unintended conceptions in all ages and repeat terminations through a range of measures including increased availability, uptake and continuing use of long-acting reversible contraception methods (LARC), have a clear referral pathway to abortion providers (not commissioned by the LA) by liaising with those providers to ensure prompt contraception provision following termination.

Protected characteristics: Race

Service Users / Stakeholders; Wider Community

Race details:

The strategy will have a positive impact on this protected characteristic. It will inform a service that is contributing

to the delivery of local sexual health priorities, including those that focus on particular groups within ethnically diverse communities. The service will also work to increase uptake of HIV testing, and to reduce late HIV diagnoses and new infections amongst groups who are most affected, including black African people.

Protected characteristics: Religion or Beliefs

Service Users / Stakeholders; Wider Community

Religion or beliefs details:

The integrated sexual health service will have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including those who follow different religions or beliefs, or those with no religion or belief. The service will be contracted to meet all requirements of the Equality Act 2010 to ensure services are accessible. The specification outlines in detail the requirements to the service which is expected to comply with the Equality Act 2010 and the Public Sector Equality Duty and ensure that their staff is trained and competent in equality and diversity issues.

Protected characteristics: Sexual Orientation

Service Users / Stakeholders; Wider Community

Sexual orientation details:

The sexual health service will have a positive impact on this protected characteristic. The service will be expected to provide an open access service to the population of Birmingham, including people who are gay, lesbian, bisexual or heterosexual and to support their sexual health needs.

Socio-economic impacts

The strategy informs an open access and integrated sexual health service, it must be accessible to all patients eligible for free NHS treatment, irrespective of their place of residence and socio-economic status.

a) A particular focus on prevention and sexual health promotion among young people – for example, improving relationships and sex education (RSE) and ensuring provision of free contraception and condoms.

b) A specific objective in the contract to meet the needs of people from high risk groups, including young people, people from black ethnic groups, people who identify as LGBT and people with disabilities.

c) Strengthening community-based services and consideration of alternative methods of service delivery, such as online services and self-testing – with the aim of reducing stigma and encouraging greater use of services, particularly by men and young people.

Please indicate any actions arising from completing this screening exercise.

1. This assessment will inform the approval of the Strategy which will inform the development of the service specification

2. If procurement through tendering is utilised as part of identifying and agreeing a provider, the evaluation panel of submitted bids will need to be satisfied that proposals address the equality characteristics identified in this EIA.

3. To monitor the performance/ delivery of the contract from an equality perspective to minimise the chance of unintended negative outcomes for individuals/groups with protected characteristics.

Please indicate whether a full impact assessment is recommended

NO

What data has been collected to facilitate the assessment of this policy/proposal?

Sexual Health Needs assessment 2021 and subsequent consultation on the Birmingham and Solihull Sexual and Reproductive Health Strategy 2023 – 2030 during May - July 2022

Consultation analysis

Public Consultation Report Summary:

The consultation was undertaken to provide assurance that the sexual health strategy adequately reflected the findings of the needs assessment and incorporated public and stakeholder feedback

Agreement for the strategy's vision and aims was unanimous, with only a few areas being identified as possible gaps -male sexual health education, mental health aspects of sexual health, older people and primary care as a vehicle to deliver improvements in localities.

In response to the themes in the strategy, the key feedback was on

priority groups including integrating sexually transmitted infection and contraceptive advice as an important aspect of prioritizing women who may be vulnerable due to termination of pregnancy, sexual violence, domestic abuse, or cultural and language issues. In addition, building on practitioners' knowledge of the motivation of different client groups e.g. Gay men, Trans community and those with Gender dysmorphia for attending clinic could be used to increase opportunistic sexual health screening and uptake of PrEP.

In terms of younger people, a need for services and pathways tailored to the needs of vulnerable groups (i.e. under 13s, young Sexual Assault victims, Children in Care or foster homes) was highlighted. This will need to incorporate a wider system response to ensure legal, safeguarding and appropriate medical interventions are provided to children under the age of legal consent. Gillick competency and Fraser guidelines are the national standards that sexual health and children and young peoples services work to in order to balance the needs and wishes of the child and the responsibility to keep them safe.

The model that will be developed and used to deliver health services for Birmingham and Solihull in the future will be informed by the feedback received from the consultation

Adverse impact on any people with protected characteristics.

No

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

How will the effect(s) of this policy/proposal on equality be monitored?

Via the public contracting process. Any procurement exercise approved will include evidence of equalities compliance. Contract monitoring will also include equalities monitoring and service user feedback

What data is required in the future?	Service activity and demographic data as well as patient feedback
Are there any adverse impacts on any particular group(s)	No
If yes, please explain your reasons for going ahead.	
Initial equality impact assessment of your proposal	The sexual health needs assessment, strategy and consultation findings have highlighted areas that we will seek to improve via our commissioning processes. These will include gender specific priorities around increased access to contraception for women, awareness raising around sexual health, relationships and behaviours in the male population and improved pathways for LGBTQ communities and older and young people
Consulted People or Groups	<p>As part of the needs assessment during 2021, consultation and engagement was undertaken across Birmingham and Solihull with the community, as well as 130 professionals, and practitioners. The aim of this was to find out what was working well as part of the delivery of sexual and reproductive health services and Genito-urinary Medicine (GUM) clinics and where there were areas for development. The public were also asked about their sexual health behaviours and experiences of services and we received 106 responses.</p> <p>We also consulted on the draft sexual health strategy between May – July 2022. There were 77 responses to the online survey. In addition, one focus group was held with 35 community representatives, and a second with a total of 8 community members and professionals from across Birmingham and Solihull. A workshop was then held with 45 members of staff from the sexual health service.</p>
Informed People or Groups	A presentation on the strategy was provided to primary care via the general practice peer support team chaired by the Local Medical Committee. This was attended by 75 primary care leads.

Summary and evidence of findings from your EIA [Sexual and Reproductive Health Needs Assessment](#) and [public and stakeholder consultation](#)

QUALITY CONTROL SECTION

Submit to the Quality Control Officer for reviewing? No

Quality Control Officer comments Content reviewed as comprehensive. An assurance process has been followed, HWBB Sept 22 received and approved the consultation findings. Revisions were subsequently made to the strategy which will now be recommended for Cabinet approval

Decision by Quality Control Officer Proceed for final approval

Submit draft to Accountable Officer? Yes

Decision by Accountable Officer Approve

Date approved / rejected by the Accountable Officer 21/03/2023

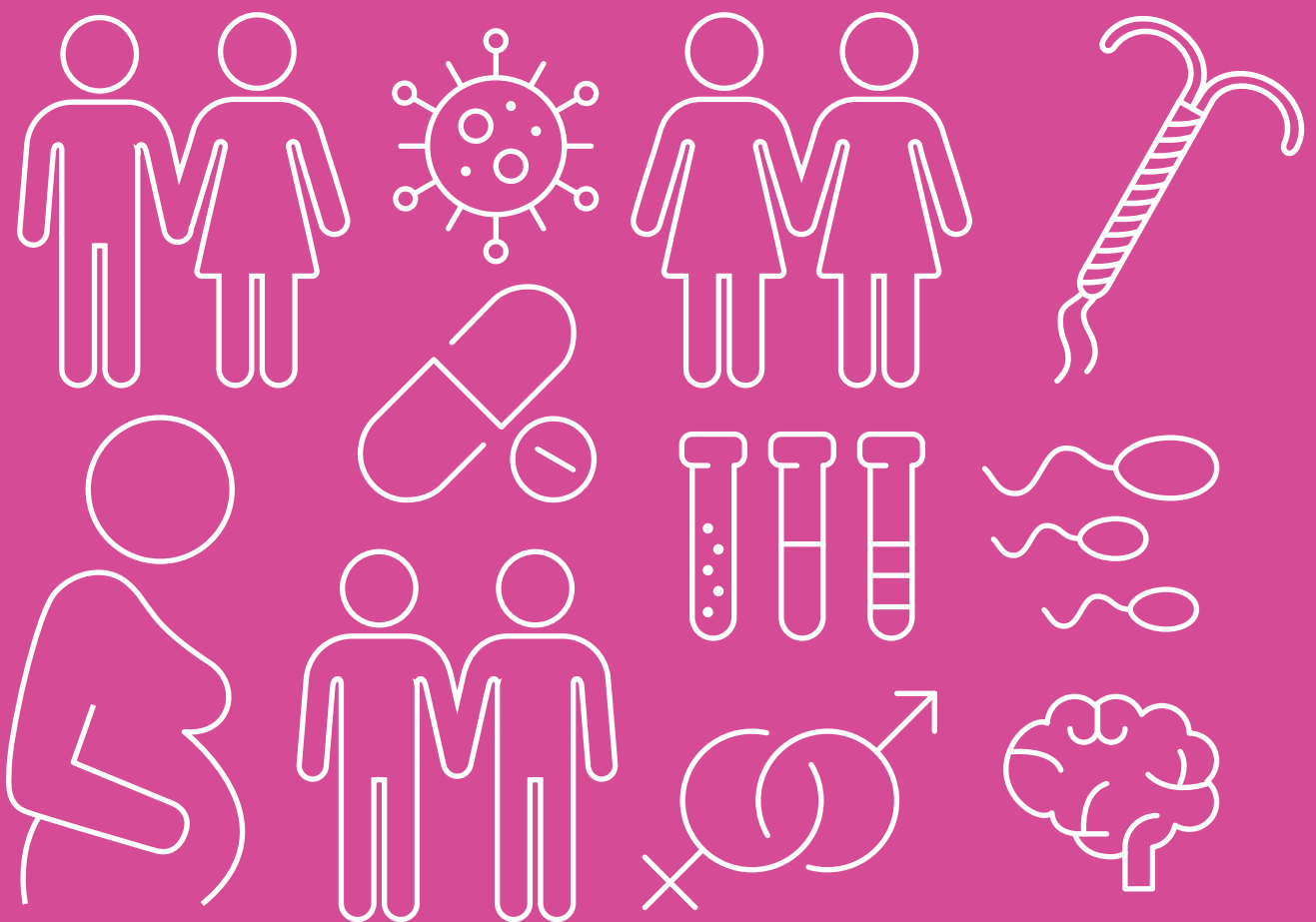
Reasons for approval or rejection

Please print and save a PDF copy for your records Yes

SEXUAL AND REPRODUCTIVE HEALTH STRATEGY

2023-2030

Reducing sexual and reproductive health inequalities is our priority



CONTENTS

Executive Summary.....	04
Foreword.....	05
Context & Purpose of the Strategy	06
The Current Landscape.....	08
Our Vision	10
Theme One: Priority groups.....	12
Theme Two: Reducing the rates of sexually transmitted infections.....	14
Theme Three: Reducing the number of unplanned pregnancies.....	16
Theme Four: Healthy Sexual Behaviour	18
Theme Five: Children and young people.....	20
Governance.....	22
Glossary.....	23
References.....	24
Notes.....	26

EXECUTIVE SUMMARY

Reducing sexual and reproductive health inequalities is our priority

This 2023-2030 Sexual and Reproductive Health Strategy sets out Birmingham City Council's (BCC) and Solihull Metropolitan Borough Council's (SMBC) themes, priorities and approach to meeting the sexual health needs of Birmingham and Solihull. It sets out plans to respond to increasing rates of sexually transmitted infections (STIs) and HIV and improve the reproductive health of our citizens. Sexual Health can impact an individual's emotional, physical and mental health, their economic means and social relationships. The effects of poor sexual and reproductive health are far reaching and for those affected, the impacts are compounded by social stigma and fear.

This strategy and associated action plan recognise that sexual health and wellbeing impact on and are affected by wider determinants of health (such as social, economic and environmental issues, which shape daily life and affect people's health), and so partnership working with all relevant organisations nationally, regionally and locally is crucial. This will also ensure that the right actions are carried out for the right people, in the right place and at the right time.

With challenges around reductions in public funding, it is vital that clear priorities focus on reducing sexual health inequalities and provide accessible services to all, across the life-course.

A strong evidence-base has informed this Strategy to tailor its approach to address the needs of Birmingham and Solihull's population through the following five themes:

Theme One: Priority groups

Theme Two: Reducing the rates of sexually transmitted infections

Theme Three: Reduce the number of unplanned pregnancies

Theme Four: Healthy sexual behaviour

Theme Five: Children and young people

A key enabler that runs through all five themes is the use of innovation and technology.

Through the themes and priorities, this strategy stands to have the greatest impact on those health inequalities and vulnerabilities at all ages and aims to improve the sexual health of the entire population.

Prevention is a priority and although this strategy focuses on a universal and all ages approach, there must be targeted interventions for certain groups such as under 25s, men who have sex with men (MSM) and minority ethnic groups who are disproportionately affected.

This strategy is supported by and reflects our current local Sexual Health Needs Assessment (SHNA), responds to the variable landscape and needs of our population and sits alongside the development of the Birmingham and Solihull Integrated Care System (ICS).

The Sexual and Reproductive Health Strategy works towards integrating all the priorities in order to address the wider determinants of good sexual and reproductive health.

This strategy was developed by Birmingham City Council's (BCC's) and Solihull Metropolitan Borough Council's (SMBC's) Public Health and Commissioning Teams. Interested members of the public and stakeholders have been invited to give their views on the strategy, and those views have been incorporated.

**Clear aims and objectives
are vital in reducing sexual
health inequalities**

FOREWORD



**Councillor
Mariam Khan**

Cabinet Member for
Adult Social Care and
Health, Birmingham
City Council



**Councillor
Tony Diccio**

Cabinet Portfolio
Holder for Adult
Social Care and
Health, Solihull
Metropolitan
Borough Council

As Cabinet Members for Health & Social Care in Birmingham and Solihull, we are fully supportive of this Joint Birmingham and Solihull Sexual and Reproductive Health Strategy. Sexual and reproductive health is a fundamental part of our lives and supporting a healthy approach is important at every age. Our approach should be holistic and value the diversity of relationships, and not just focus on procreation and sexually transmitted diseases.

This new strategy embodies the World Health Organisation's recommendation to take a holistic approach to sexual and reproductive health across the life course for citizens of Birmingham and Solihull. The strategy recognises that there are areas of excellence being delivered in partnership with communities and clinicians across Birmingham and Solihull, but also that there is still potential to be even better. It sets out achievable aspirations to respond to the rates of sexually transmitted infections and Blood Borne Viruses, improving reproductive health outcomes including prevention of unplanned pregnancies and ensuring that all citizens of Birmingham are provided with timely information and advice.

We also recognise that the recovery from the pandemic will bring additional challenges, however we will continue to work closely with partners and people living, working and studying in Birmingham and Solihull to ensure that the aims of this strategy are successfully met and we can support all our citizens to achieve their potential for healthy sexual and reproductive health.

CONTEXT & PURPOSE OF THE STRATEGY

1.1 Why a Sexual and Reproductive Health Strategy is important for Birmingham and Solihull

This strategy sets out Birmingham and Solihull's vision, ambitions and priorities for sexual and reproductive health services over the next seven years, and provides a framework to guide the planning, commissioning and delivery of sexual and reproductive health services to improve sexual and reproductive health outcomes for Birmingham and Solihull citizens across the life course.

The provision of sexual health services is statutory and local authorities are mandated to commission open access sexual health services, including free sexually transmitted infections (STIs) testing and treatment, partner notification of infected persons, advice on and reasonable access to a broad range of contraceptives and preventing unplanned pregnancy.

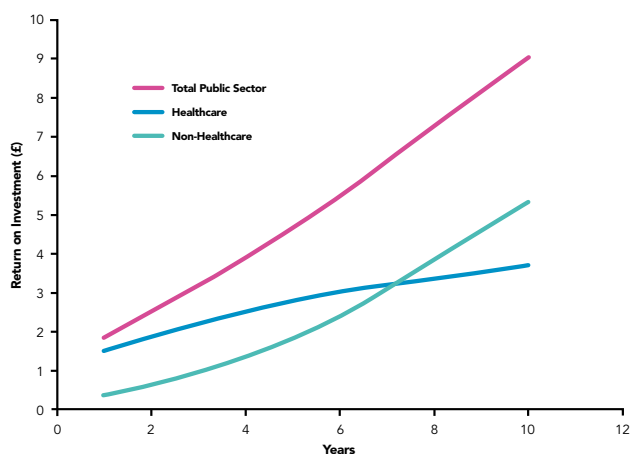
Our strategy is built on the most up to date intelligence and information we have on sexual and reproductive health (SRH), sets out several themed areas for priority from 2023 to 2030 and the actions we will take to address these priorities.

We recognise that the National Sexual Health Strategy is planned to be released by the Department of Health and Social Care post March 2023, however, our strategy is designed to complement the expected release and will be flexible to meet any additional requirements.

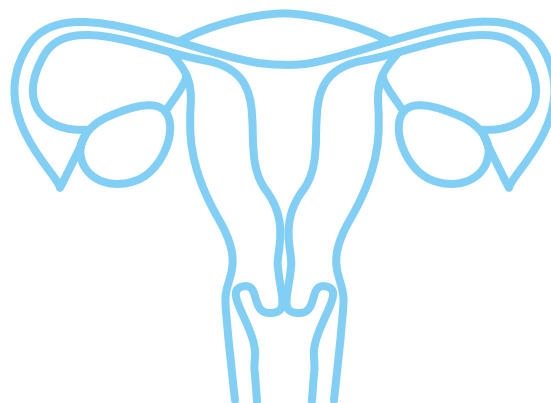
This strategy is complementary and embracing of other local policies and strategies, such as Domestic Abuse, Substance Use, Education, Relationships and Sexual Education (RSE), the HIV Action Plan and Women's Health.

1.2 Investing in Sexual Health Services

Investing in sexual health services has demonstrated value for money and a substantial return on investment. A national study has shown that every pound spent on contraceptive services saves £9 across the public sector¹. The data also shows that 52% and 12% of unplanned pregnancies end in abortion and miscarriage respectively². Collectively, this can provide a cost saving per averted pregnancy of £23.91 over 10 years, which translates to £3.68 healthcare saving per £1 invested and £5.32 non-healthcare saving per £1 invested over a 10-year period³.



The SHNA⁴ has identified key areas to continue and enhance investment, namely training of staff and the future workforce. Education and early intervention investment are also important, which will help further achieve the return on investment for Birmingham and Solihull on sexual and reproductive health services.



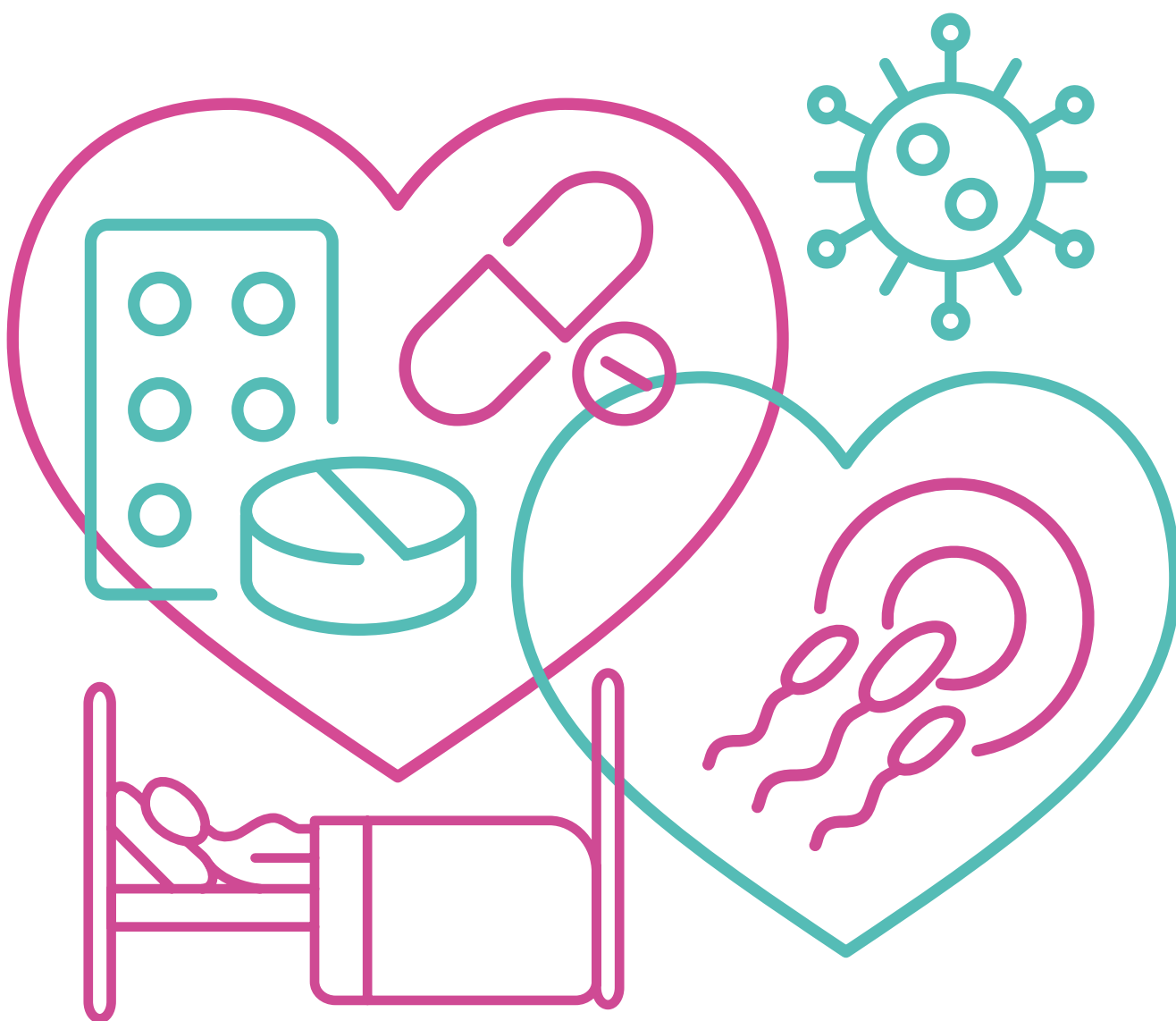
1.3 Why We Need a Joint Strategy

Birmingham and Solihull face some of the greatest national sexual health challenges, including high rates of HIV, STIs, emergency contraception use and abortions⁴.

Although Birmingham has a younger population than Solihull, the challenges are similar, and due to the Birmingham and Solihull Integrated Care System (ICS) footprint crossing borders, the approach to have a joint strategy is to match the local NHS footprint.

As the challenges we face are similar, Birmingham and Solihull are in a stronger

position to meet the needs of our populations through collaborating on Sexual Health Commissioning and this strategy. This approach allows us to pool both human and financial resources to avoid duplication in service delivery and financial overlap, saving each area both time and money. However, certain elements of service delivery are tailored to be able to meet the differing requirements of each geographical area. To underpin our collaboration, we need a clear strategic vision with a clear action plan, which this strategy will provide.



THE CURRENT LANDSCAPE

2.1 The Local and National Evidence Base

Birmingham's population is one of the youngest and most deprived in England³.

Proportionally, Solihull has an above average population of people aged 65 and over. The borough is considered a relatively affluent area, but it does have pockets of deprivation where 16% of the population live⁴.



The proportion of total prescribed Long Acting Reversible Contraception (LARC) (excluding injections) per 1,000 is lower in Birmingham (26.5) and Solihull (28.9), compared to the national level (34.6)⁴.



The proportion of repeat abortions in under 25s is higher in Birmingham and Solihull, compared to England's average (29.2%)⁴.



There were 485 new STI diagnoses (excluding chlamydia) per 100,000 of those aged under 25 in Birmingham, and 269 per 100,000 in Solihull, both lower than the national rate of 619⁴.



The impact of COVID-19 meant that more sexual health interventions were conducted online and over the phone. Only one walk-in clinic was available during the peak of the pandemic across both local authorities⁴.

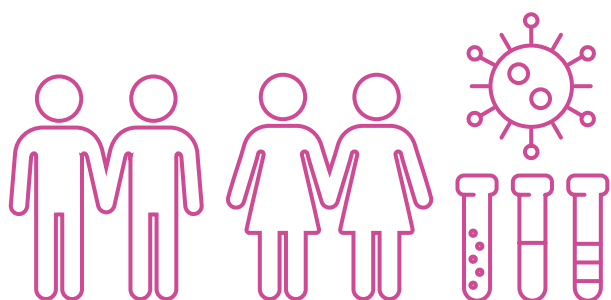
2.2 Current Service Provision and Planning for the Future

What works well?

Access to free condoms, contraceptive advice, general sexual health information, HIV advice, identifying and supporting survivors of abuse, rape and sexual violence, support for people who identify as LGBTQ, access to chlamydia screening/treatment.

What could be better?

Delays in LARC appointments, complex contraception services, emergency coil fittings, information for gender dysphoria, information for post-exposure prophylaxis after sexual exposure (PEPSE) to HIV and pre-exposure prophylaxis (PrEP), services for homeless, refugees, asylum seekers and newly arrived migrants, rapid testing for STIs, community-based testing, vasectomies and sterilisation.



The 2021 SHNA consulted members of the public and key stakeholders about current service provision and future needs.

2.3 Key Achievements of the Service (2015-2021)



2.4 Birmingham Specific Areas of Focus

Public Health Outcomes Framework (PHOF)⁵ and locally agreed outcomes:

- Increasing the use of good quality contraception to reduce under-18 conceptions and abortions for all ages (PHOF Indicator)
- Reducing late diagnosis and transmission of BBVs and STIs to prevent reinfection by ensuring prompt access for earlier diagnosis and treatment (PHOF Indicator)
- Providing better access to services for high-risk priority groups
- Improved support for people vulnerable to, and victims of, sexual coercion, sexual violence and exploitation
- Increasing the chlamydia diagnostic rate in the 15–24 age group (PHOF Indicator).

2.5 Solihull Specific Areas of Focus

As per Birmingham, with the following additions:

- Increasing the chlamydia diagnostic rate in the 15–24 age group (PHOF Indicator)
- with a focus on embedding opportunistic testing for 15–24-year-old females
- Improve access and take up of long-acting reversible (LARC) contraception
- Develop access to Emergency Hormonal Contraception (EHC) across the borough to provide equitable access.
- Improve sexual health education as part of prevention.

OUR VISION

3.1 A Joint Vision for Birmingham and Solihull

A key vision of this strategy is to address the joint common themes identified by the SHNA for Birmingham and Solihull. This strategy will provide a tool to enable appropriate action and enhance existing pathways to meet the needs of citizens, through ongoing consultation.

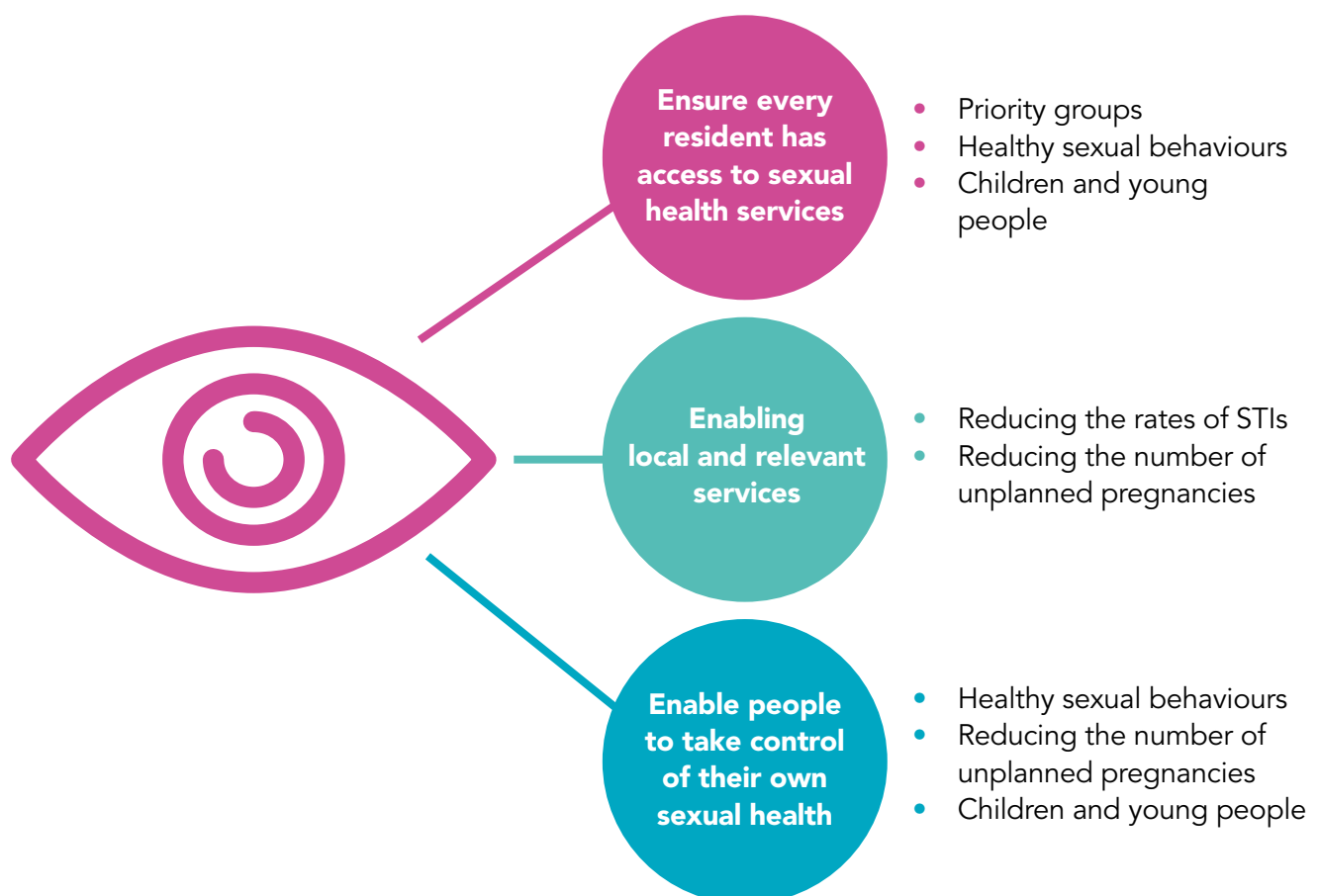
The key objectives of this strategy are to:

- Ensure that every resident has access to sexual health services that meet their individual needs.
- Enable services that are local, relevant, approachable, confidential, non-judgemental, to provide services to anyone in need, while respecting all human protected characteristics.
- Enable citizens to have control of their own sexual health with services providing support where needed.

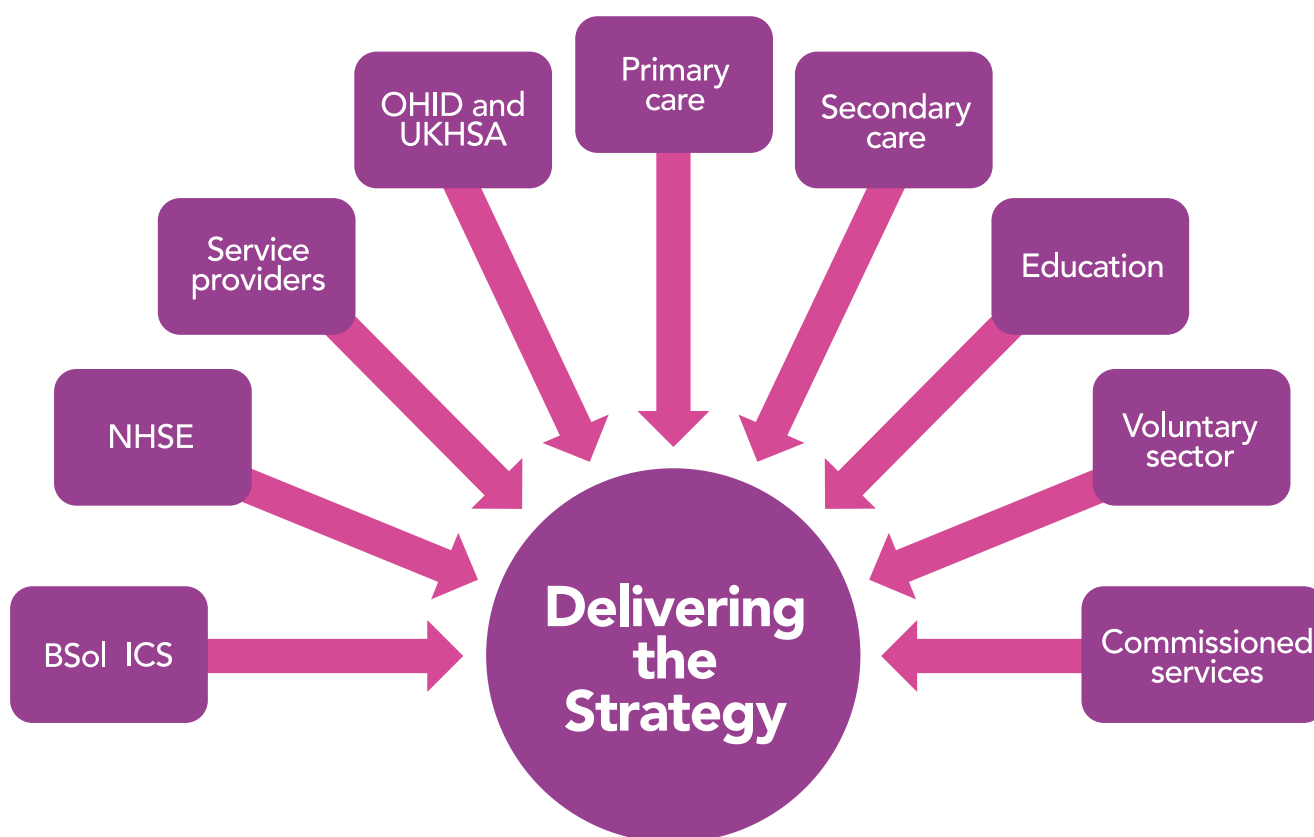
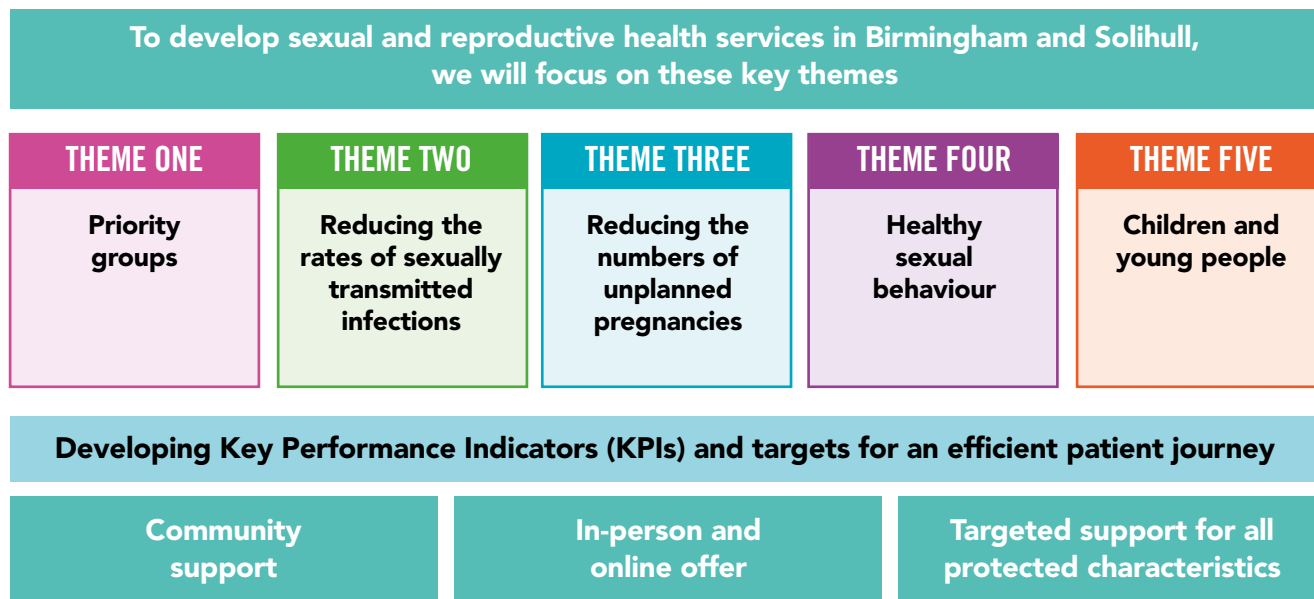
This strategy will play a key role in realising the joint vision for sexual health services for the future, and will facilitate:

- A fully integrated, free and confidential sexual health service for all citizens across the life course
- A reduction in the high rates of teenage and unplanned pregnancy, abortion and STIs, which can have far reaching consequences for individuals and society
- Open and equitable access to sexual health services, in line with the Equality Act⁶.

A fundamental outcome of this strategy will be to equip the citizens of Birmingham and Solihull to have good reproductive health and healthy sexual relationships, positively impacting the wider emotional, mental and physical health and wellbeing of citizens. Furthermore due to the negative impact of the COVID-19 pandemic, a step change in services is required in order to re-establish and improve them.



3.2 Realising Our Joint Vision



THEME ONE

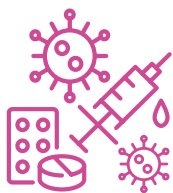
Priority Groups

Why is this a theme?

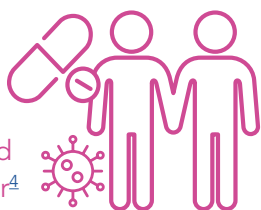
Low rates of attendance to sexual health screens in Birmingham and Solihull for those from Bangladesh, India and Pakistan.



Substance users' lifestyles make them more vulnerable to **poor sexual health** (including increased risk of HIV) and unplanned pregnancies



29.2% of **gay men living with HIV** reported having had **Chemsex** in the last year⁴



Digital Divide

Citizens living with disabilities and those without access to technology are more likely to be digitally excluded, making accessing services harder.



A high proportion of **MSM** not accessing testing despite disclosing condomless sex with multiple partners⁷



Homeless people are less able to access services due to rigid timings and conditions



National and Local Evidence

Our needs assessment identified the following priority groups:

People from **minority ethnic communities**



Individuals vulnerable to or experiencing **sexual and/or domestic abuse**, including care leavers



Offenders in custody or under community supervision



Homeless people & rough sleepers



Gypsies and Travellers



People who are **lesbian, gay, bisexual or transgender**



New arrivals from abroad (including **trafficked people**)



Men who have **sex with men**



People affected by **female genital mutilation (FGM)**

Older adults aged 40+ years

Sex Workers



People with **mental health problems**



People with **learning difficulties**



People living with **neuro-diverse conditions** eg Autism

Substance users



Action Plan

Establishing **outreach provision**, focus groups and user involvement for those hardest to reach



Continued **training packages** for GPs, sexual health practitioners and partners to include information on **gender dysphoria** and **LGBTQ**



Co-delivery between **drug and alcohol services** and sexual health services as recommended by the HIV commission⁸



Link nurses between homeless and substance use services to help break barriers



Increase provision of **male sexual health education**



To recognise the **intersectional nature** of priority groups & provide **support** according to **individual needs**



Explore the provision of sexual health services in existing **homeless hubs** and address challenges in providing the **service to the homeless** by reviewing outreach and multi-disciplinary working



Work with disability services to ensure:

1. Information on sexual health is accessible and understandable
2. Those working with and for people with disabilities, have the confidence and tools to raise sexual health issues
3. Locations of sexual health services are accessible

Aims and Outcomes

Providing **targeted health promotion** for priority groups



Streamlined process for identifying **CSE & safeguarding** issues



Reduction in **stigma and discrimination**



Providing **better access to services** for priority groups



Better **integration of STI and contraceptive advice** to prioritise women who may be at risk due to termination of pregnancy, sexual violence, domestic abuse, or cultural and language barriers

Improved support

for people vulnerable to, and victims of:

- sexual coercion
- sexual violence
- sexual exploitation



THEME TWO

Reducing the Rates of Sexually Transmitted Infections

Why is this a theme?

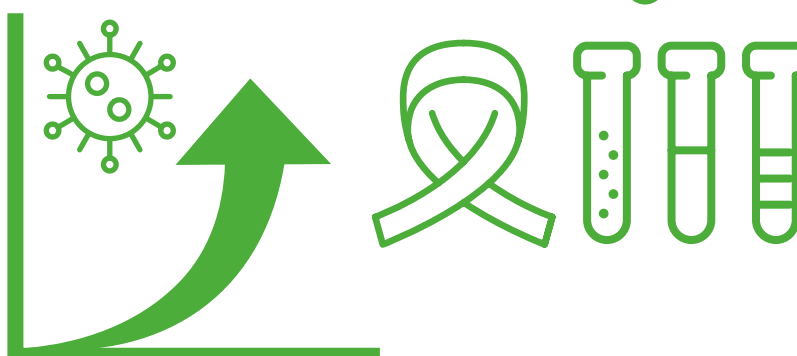
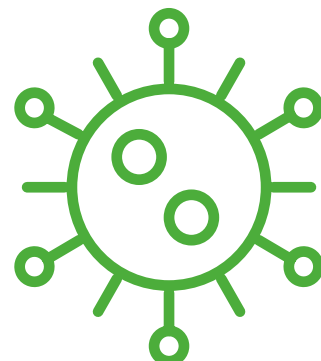
Chlamydia can lead to long-term complications including infertility⁹

STIs, like chlamydia, are sometimes **asymptomatic** so may be **unnoticed** by individuals and passed on

A significant number of people are **diagnosed at a late stage** of infection which means that they may have had HIV for some time and may be very unwell as a result of **damage to their immune system**⁹

STIs are associated with inequalities and deprivation

In Birmingham there has been a significant increase in the number of **gonorrhoea diagnoses** & there are strains that are **resistant** to treatment⁴



National and Local Evidence

Chlamydia accounts for the majority of new **STI diagnoses**¹¹



57% & 56% of diagnoses from **GUM** and **non-GUM** services in Birmingham and Solihull, respectively, were of chlamydia⁴

During 2020, there were **6.6** new HIV diagnoses per 100,000 people aged 15+ in Birmingham and **1.7** per 100,000 in Solihull¹¹



Most **outreach services** were stopped during COVID-19

Engagement feedback revealed that the current sexual health provider website is not user friendly and that patients had to call to find about pharmacy availability



In **Solihull** there are 2 sexual health clinic locations – provision in the north had to be relocated and only recently been made available



Women with genital mutilation may find **genital examinations difficult** and birth almost impossible

During the **COVID-19** pandemic, calls were triaged so that those who needed to be seen could pre-book for appointments, including at a walk-in clinic in Birmingham

A **73 year-old woman**, recently asked for condoms at a London Family Planning Clinic. The nurse replied, "You don't need condoms, you won't get pregnant, you're too old."

STI rates are **increasing** in the 50-70 year old age group⁴

Action Plan

Service Locations:

- **Maintain** the availability of **walk-in services** in Birmingham and Solihull
- Temporary or '**pop-up**' clinics to widen access in the community for more localised sexual health screening
- Establish a clear sexual health **outreach strategy**

STI Testing:

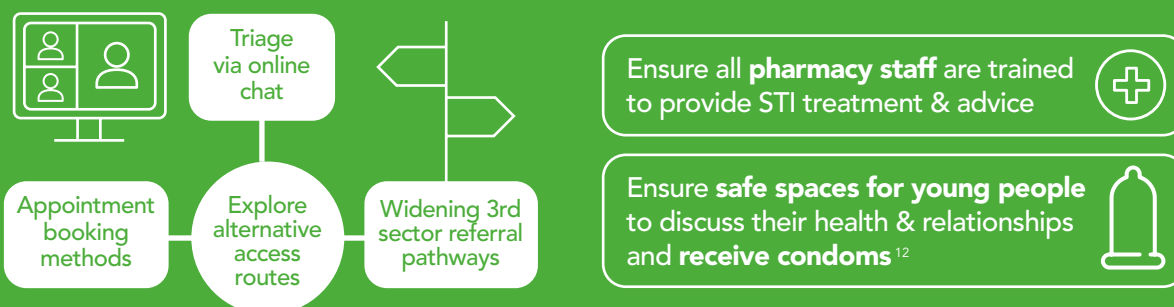
- Sexual health providers to have access to **multiple STI self-testing kits** to enable constant/consistent supply via multiple channels
- **Simple and quick** online ordering process for ordering STI self-testing kits
- Strengthen opportunistic chlamydia **testing for young people**
- Strengthen **partner notification**

HIV action plan:

- Localising the national **HIV Action Plan**
- Increase marketing of **PrEP** to increase take up
- Sexual Health Provider/s to commit to tackling HIV, Hep B, Hep C and TB transmissions and stigma through the **Fast-Track Cities+** initiative
- Offer HIV testing in GPs and A&E
- Introduce post-abortion HIV testing in abortion services¹³
- Improve access to PrEP and PEPSE over weekends

Open access sexual health services should be available to the whole population to provide testing¹¹

Build on practitioners' knowledge of the motivation of different client groups (e.g. gay men, trans people and those with gender dysphoria) for attending clinic to increase opportunistic sexual health screening and uptake of PrEP under action plan.



Aims and Outcomes

To increase the **chlamydia diagnostic rate** for 15–24-year-olds



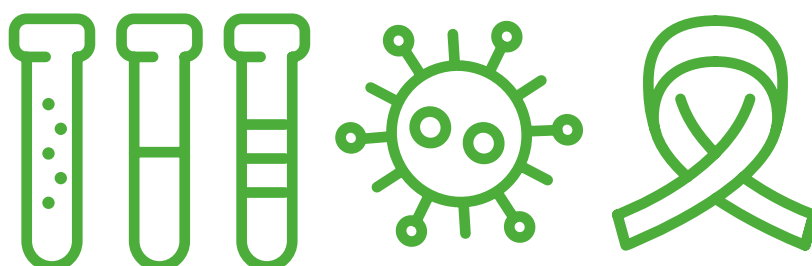
To reduce the **transmission of STIs** by ensuring rapid access to testing

To reduce the **burden of HIV infection** and rates of late and **undiagnosed HIV**

More people on PrEP to reduce HIV transmission rates



Introduce **accessible, walk-in clinics** as a requisite, including out of hours service



THEME THREE

Reduce the Number of Unplanned Pregnancies

Why is this a theme?

Unplanned pregnancy can cause **financial, housing, social and relationship pressures** as well as **impact other children in the family**

Closely spaced pregnancies increase the baby's risk of morbidity and mortality yet **post-partum family planning** is often ignored¹⁵

Savings from preventing unplanned pregnancies are estimated at **£1 billion** nationally per year¹⁴



Current sexual health services do not offer free **routine pregnancy testing**

Health impacts of an unplanned pregnancy on the mother include¹⁶:

- obstetric complications
- antenatal/postnatal depression

And on the child^{15 16}:

- low birthweight
- developmental abnormalities



National and Local Evidence

In Birmingham:

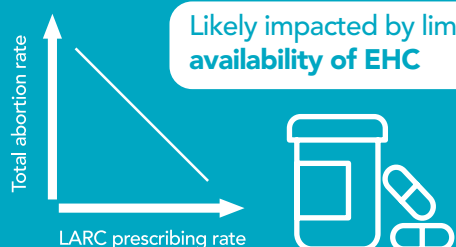
0.4 pharmacies per square km provide free EHC⁴

LARC prescribing rate of **42.1** per 1,000 (national avg. = 50.8)⁴

In Solihull:

0.1 pharmacies per square km provide free EHC⁴

In Solihull, the **abortion rate is 22.1** per 1,000 (national avg.=18.7)⁴



LARC is recommended by **NICE** as it does not require having to take daily forms of contraception e.g. pills

Lack of knowledge amongst practitioners on vasectomies and sterilisations



25% of respondents would use a local pharmacy for contraception advice



28% of respondents would go to a local pharmacy for non-emergency contraception

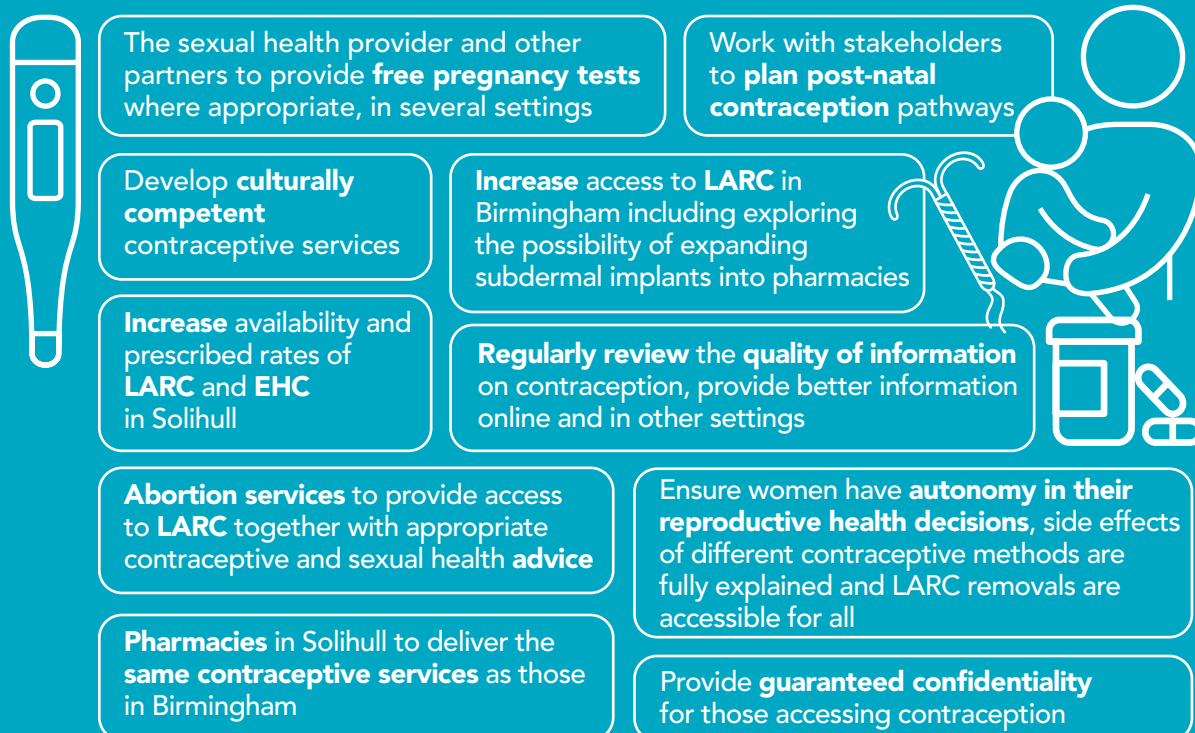


49% of respondents would go to a local pharmacy for emergency contraception

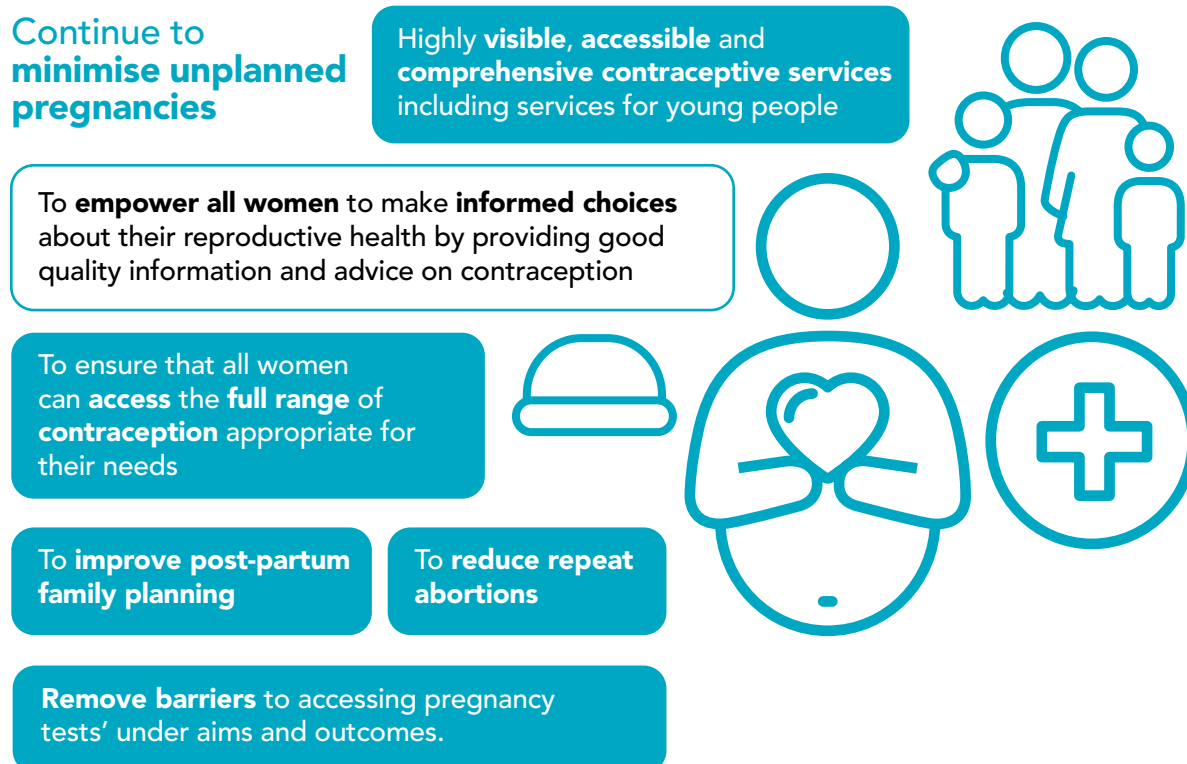


28.5% of conceptions lead to abortions

Action Plan



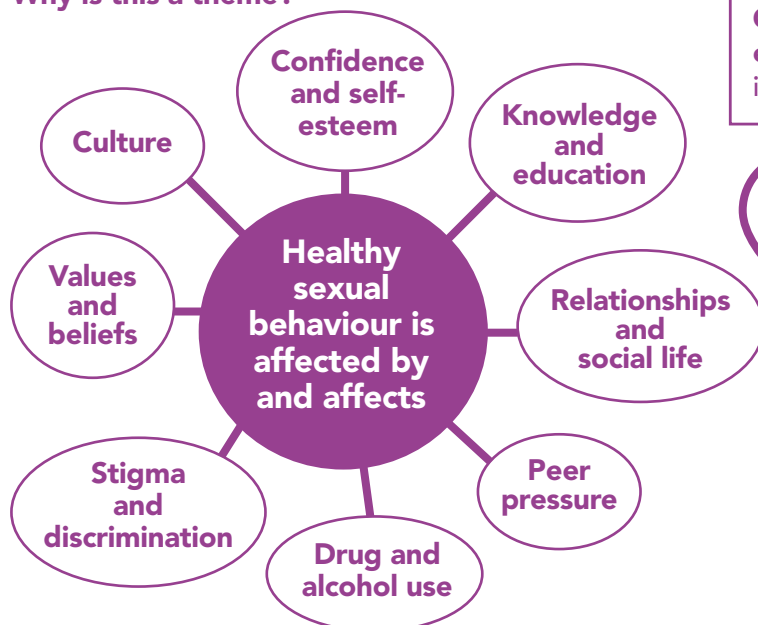
Aims and Outcomes



THEME FOUR

Healthy Sexual Behaviour

Why is this a theme?



Good relationships and **sex education** in schools are linked with improved sexual health outcomes¹⁷



Stigma and **myths** associated with STIs can create a **barrier** to **good sexual health** and access to services¹¹

Living with shame can detrimentally affect **mental health**



National and Local Evidence

There is **stigma and insensitivity** relating to HIV, STIs, sex and relationships, particularly in Black African, Latin American and South Asian communities¹⁸ and adults aged 50+ years

Adults over 50 face a misconception that they do not need condoms, information on sexual health, or even consent. This can be **perpetuated by peers & professionals** alike

"A client used to be able to collect condoms from clinics, now asked to go queue at pharmacies, which young patients find embarrassing."
- Young Person's Counsellor

The main barriers Birmingham's population face in accessing sexual health services are⁴:

- **Embarrassment & shame**
- **Lack of knowledge** of sexual health
- People do not believe they can **catch an STI**

There are misconceptions and stigma surrounding **disabled people and sex**



Drugs may be used to cope with the **emotional distress** following a sexual health problem and related stigma¹⁹



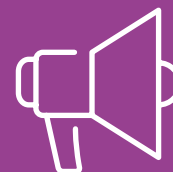
Action Plan

As part of Fast-Track Cities+, a **stigma reducing campaign** will be developed

To provide **targeted engagement** and **support programmes** for **those affected by sexual** and/or **domestic abuse** which do not have waiting lists



To ensure all have **accurate information** to develop healthy, safe and consensual sexual relationships



Break down barriers for older adults by training healthcare professionals on having conversations about sexual health with people aged 50+

Challenging stigma and discrimination by addressing misconceptions, busting myths, normalising good sexual health, providing advocacy and empowering communities



Addressing peer pressure and social norms through consistent messages, information and education



Develop voluntary **community sexual health champions** in communities where there is traditionally poor engagement

To promote and support **evidence-based resilience programmes** in schools

Educate on the risks of (unprotected) sex under the influence of drugs and alcohol

Enhance primary care as a vehicle to deliver improvements in localities

Aims and Outcomes

To have a **positive sexual health culture** that is accepted as part of human behaviour

Provide **information** that is **accessible** and **acceptable for all**, regardless of whether it is spoken or written information



To **work across sectors** to ensure consistent messaging and stigma-reduction



For **information** and **services** relating to sexual and reproductive health to always be informed by the latest evidence



To **enable citizens to access services** confidently and confidentially, and without fear of stigma or judgement



With specialist support, schools should recognise Relationships and Sex Education (RSE) as an essential tool to combat the **unwanted norms of abuse** in relationship

Enhance the use of appropriate and novel media, such as social media sites and billboard on buses/bus shelters

THEME FIVE

Children and Young People

Why is this a theme?

Young people under 25 are the age group most affected by STIs¹¹



Women in their early twenties are most likely to have an **unplanned pregnancy** and most likely to access abortion services¹⁶



In Birmingham:

17.9 Under 18s conception rate per 1,000

In Solihull:

13.6 Under 18s conception rate per 1,000
(England avg. = 15.7 per 1,000)⁴

Sexual health and sexual experiences as a child and young person can impact their sexual health and mental health in the future



Young people want more **information** on sexual health²⁰ and clarity around consent and the right to choose not to have sex



National and Local Evidence

60%



In Birmingham and Solihull, teenage pregnancies have decreased by approximately 60% from 2009 to 2019⁴

In Solihull **69% of conceptions** in those aged under 18 led to an abortion – this reflects an increase in abortions⁴

In Birmingham **48% of conceptions** in those aged under 18 led to an abortion⁴



The under 18 birth rate in Birmingham is **5.6** per 1,000 (England avg. = 4.1)⁴

Whilst there is a **Young Person's abuse survivors' clinic**, there is no specific child sexual abuse survivors' clinic in Birmingham or Solihull



Action Plan

Develop an age-appropriate pathway for under-13's and those with a mental capacity of under 13 with all relevant stakeholders e.g., police, safeguarding teams, mental health support

Provide access to **appropriate and effective contraceptives, including LARC**

Increase provision of **good quality advice and information** for children, young people, parents & carers

Incorporate Sexual Health Wellness assessments as part of **social care health check** for CYP entering care

Provide safe spaces for young people to discuss what they have seen in porn and modelled by those around them, and encourage young people to call-out sexual harassment and derogatory banter

Support schools, colleges, youth clubs and sports clubs to provide updated, high quality RSE, including training staff on responding to difficult situations

Tailor services and pathways to the needs of vulnerable groups (i.e. under 13s, young sexual assault victims, children in care, or foster homes)

High risk groups:

- Ensure support is available for **young NEETs** and young people in **high need groups**
- To set up a **well-promoted child-specific** sexual abuse survivors' clinic and ensure any child safeguarding issues are reported correctly
- Prioritise **children in need** and **care leavers** up to age 25 year
- Support children and young people living with HIV, particularly during the transfer from children's HIV services into adults HIV services

Develop safe spaces in appropriate locations, for example schools, with trained social workers for young people to discuss sexual health and identify safeguarding issues, considering their physical and emotional safety

Rollout of the **Bystander Intervention** programme to all secondary schools and higher education settings to support

Increase education on consent, misogyny and the importance of using condoms

Aims and Outcomes

Equip young people with the **knowledge** they need to make **healthy sexual choices** and manage their own sexual health, for example adhere to HIV medication'

For **schools** and **other settings** children are in, to promote healthy and positive sexual relationships. Through age-appropriate learning methods that explain risks and rights



To **reduce under-18** conceptions and abortions

Ensure all **young people** and children know **where** they can go and **who** they can **talk to confidentially** about sexual health and related issues



Targeted, acceptable services for CYP **most in need**

To ensure all safeguarding procedures are followed and guard against all forms of abuse

GOVERNANCE

Joint Local Authority Meetings

Birmingham and Solihull service leads and commissioners will work closely to ensure the joint successful delivery of this strategy. This group will be responsible for the performance management of services and actively work with the appointed service provider/s to ensure efficient and effective service delivery and to ensure Sexual Health Services are equitable and providing equality of service to citizens.

Commissioning & Contracts Board

The Commissioning & Contracts Board will consist of Commissioners from both Birmingham and Solihull, including key delivery partners.

This Board will review on a regular basis the commissioning intentions, contract performance, changes in services required and implementation of any variations to the contract.

The Commissioning & Contracts Board will have overall autonomy on successful delivery of this strategy and outcomes along with the financial responsibility to ensure the service is equitable, accessible and delivering value for money.

Health and Wellbeing Boards

The Sexual Health Service will be accountable to each local authority's Health and Wellbeing Board. The Health and Wellbeing Boards will receive an annual (or upon request) update on performance against the strategic actions outlined in this strategy.

The Health and Wellbeing Boards will have responsibility of reviewing the services delivered against the evidence base, and including this within, the wider health and wellbeing considerations for the local populations.

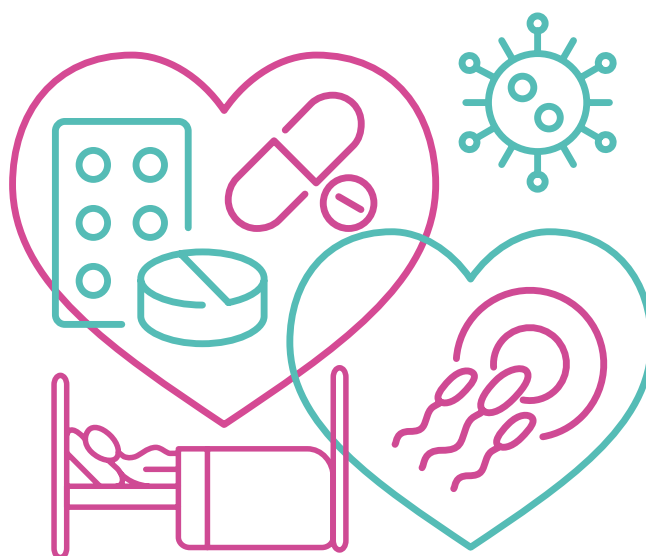
Overview & Scrutiny Committee

The progress on service delivery is presented annually to the Birmingham Overview and Scrutiny Committee, where the following will be presented:

- Review of services and their delivery, including the service model and accessibility
- Evidence review and policy change
- Partnership arrangements
- Performance and outcomes

Overview and Scrutiny Committee meetings can be attended by the public where there is an opportunity to discuss certain elements of service delivery i.e. what is working well, what is not, challenges and triumphs.

Good governance is the key to successful outcomes



GLOSSARY

BBV	Blood Borne Virus
BCC	Birmingham City Council
BHIVA	British HIV Association
BSol	Birmingham and Solihull
CSE	Child Sexual Exploitation
CYP	Children and Young People
DH	Department of Health
EHC	Emergency Hormonal Contraception
GP	General Practice/Practitioner
GUM	Genito-Urinary Medicine
HIV	Human Immunodeficiency Virus
ICS	Integrated Care System
LA	Local Authority
LARC	Long Acting Reversible Contraception
LD	Learning Disabilities
LGBTQ	Lesbian, Gay, Bisexual, Trans & Queer
MSM	Men who have Sex with Men
NEET	Not in Education, Employment and Training
NHS	National Health Service

NHSE/I	NHS England and Improvement
NICE	National Institute of Clinical Excellence
OHID	Office for Health Improvement and Disparities
PEPSE	Post-Exposure Prophylaxis following Sexual Exposure
PHOF	Public Health Outcomes Framework
PrEP	Pre-Exposure Prophylaxis
RSE	Relationships and Sexual Education
SARC	Sexual Assault Referral Centres
SHNA	Sexual Health Needs Assessment
SMBC	Solihull Metropolitan Borough Council
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infection
UKHSA	UK Health Security Agency

REFERENCES

- 1 Faculty of Sexual and Reproductive Healthcare. (2018) *PHE tool estimates that ever £1 spent of contraceptive services saves £9 across the public sector*. Available from: <https://www.fsrh.org/news/phe-tool-return-investment-contraceptive-services-public-health/> [Accessed 20th Dec 2021].
- 2 Sedgh, G., Singh, S. & Hussain, R. (2014) *Intended and Unintended Pregnancies Worldwide in 2012 and Recent Trends*. *Studies in Family Planning*, 45(3), 301-314.
- 3 Public Health England. (2018) *Contraception: Economic analysis estimation of the return on investment (ROI) for publicly funded contraception in England*. Public Health England. Report number: 2018172
- 4 S Squared. (2022) *Birmingham and Solihull Sexual Health Needs Assessment*. S Squared.
- 5 Office for Health Improvement and Disparities. (2013) *Public Health Outcomes Framework (PHOF)*. Available from: <https://www.gov.uk/government/collections/public-health-outcomes-framework> [Accessed 20th Dec 2021].
- 6 Government Equalities Office & Equality and Human Rights Commission. (2013) *Equality Act 2010: guidance*. Available from: <https://www.gov.uk/guidance/equality-act-2010-guidance> [Accessed 20th Dec 2021].
- 7 Public Health England. (2020) *The impact of the COVID-19 pandemic on prevention, testing, diagnosis and care for sexually transmitted infections, HIV and viral hepatitis in England*. Public Health England. Report number: GW-1789.
- 8 HIV Commission. (2020) *Partnerships*. Available from: <https://www.hivcommission.org.uk/final-report-and-recommendations/partnerships/> [Accessed 21st Dec 2021].
- 9 NHS. (n.d.) *Chlamydia: Complications*. Available from: <https://www.nhs.uk/conditions/chlamydia/complications/> [Accessed 21st Dec 2021].
- 10 UKHSA. (2021) *HIV testing, new HIV diagnoses, outcomes and quality of care for people accessing HIV services: 2021 report*. UKHSA. Report number: GOV-10491
- 11 Public Health England. (2019) *Health matters: preventing STIs*. Available from: <https://www.gov.uk/government/publications/health-matters-preventing-stis/health-matters-preventing-stis> [Accessed 21st Dec 2021]
- 12 Brook & Public Health England. (2014) *C-Card condom distribution schemes: Why, what and how*. Brook & Public Health England. Report number: 2014159
- 13 Rasch, V., Yambesi, F. & Massawe, S. (2006) *Post-abortion care and voluntary HIV counselling and testing—an example of integrating HIV prevention into reproductive health services*. *Tropical Medicine & International Health*, 11(5), 697-704.
- 14 Thomas, C.M. & Cameron, S. (2013) *Can we reduce costs and prevent more unintended pregnancies? A cost of illness and cost-effectiveness study comparing two methods of EHC*. *BMJ open*, 3(12), e003815.
- 15 Royal College of Obstetricians and Gynaecologists. (2015) *Best practice in post-partum family planning*. Royal College of Obstetricians and Gynaecologists. Report number: 1
- 16 Public Health England. (2018) *Health matters: reproductive health and pregnancy planning*. Available from: <https://www.gov.uk/government/publications/health-matters-reproductive-health-and-pregnancy-planning/health-matters-reproductive-health-and-pregnancy-planning> [Accessed 21st Dec 2021].

- 17 Macdowall, W., Jones, K.G., Tanton, C., Clifton, S., Copas, A.J., Mercer, C.H., Palmer, M.J., Lewis, R., Datta, J., Mitchell, K.R. & Field, N. (2015) *Associations between source of information about sex and sexual health outcomes in Britain: findings from the third National Survey of Sexual Attitudes and Lifestyles (Natsal-3)*. *BMJ open*, 5(3), e007837.
- 18 Love Sex Life. (2020) *Transforming sexual and reproductive health for BAME communities in Lambeth, Southwark and Lewisham*. Available from: <https://secureservercdn.net/160.153.138.163/zps.998.myftpupload.com/wp-content/uploads/2020/11/LSL-Report-Final-3.pdf> [Accessed 21st Dec 2021]
- 19 Bowden, J. (2017) *Joining up sexual health and drug services to better meet client needs*. EMCDDA.
- 20 Tanton, C. et al. (2015) *Patterns and trends in sources of information about sex among young people in Britain: evidence from three National Surveys of Sexual Attitudes and Lifestyles*. *BMJ Open*, 5, e007834.

NOTES

Birmingham and Solihull (Draft) Sexual Health Strategy 2023 – 2030 Public Consultation Report

Contents

- 1. Summary of Findings**
- 2. Background**
- 3. Rationale for Consultation**
- 4. Pre-Engagement: Sexual Health Needs Assessment**
- 5. Consultation Process: Birmingham & Solihull Sexual Health Draft Strategy 2023 – 2030**
- 6. Consultation Engagement**
- 7. Responses to Vision and Themes**
- 8. Conclusions**
- 9. Next Steps**

1. Summary of Findings

The consultation on the draft Sexual and Reproductive Health Strategy 2023-2030 was undertaken across Birmingham and Solihull during May – July 2022 to provide assurance that the strategy adequately reflected the findings of the needs assessment and to incorporate public and stakeholder feedback.

Agreement on the strategy's vision and aims was unanimous, with only a few areas being identified as possible gaps - male sexual health education, mental health aspects of sexual health, older people, and the enhancement of primary care as vehicle to deliver improvements in localities.

In response to the themes in the strategy, the key feedback was on:

- **Priority groups** – challenges in providing the service to the homeless should be addressed by reviewing outreach and multi-disciplinary working. In addition, better integration of sexually transmitted infection (STI) and contraceptive advice as an important aspect of prioritising women who may be at risk due to termination of pregnancy, sexual violence, domestic abuse, or cultural and language barriers.
- **Reducing rates of STI** - accessible, walk-in 7-day clinics are a requisite, and building on practitioners' knowledge of the motivation of different client groups (e.g. gay men, trans people and those with gender dysphoria) for attending clinic could be used to increase opportunistic sexual health screening and uptake of HIV medication, Pre-Exposure Prophylaxis (PrEP).
- **Reducing unplanned pregnancies** – requires removing barriers to accessing pregnancy tests, increasing access to long-acting reversible contraception (LARC) and emergency contraception with guaranteed confidentiality.
- **Building resilience** - Relationships and Sex Education (RSE) is essential and could also combat the unwanted? norms of abuse in relationships. Also important is specialist support for schools and colleges and the use of appropriate and novel media, such as social media sites and billboard on buses/bus shelters.
- **Children and young people** - services and pathways tailored to the needs of vulnerable groups (i.e., under 13s, young sexual assault victims, children in care, or foster homes). Clinics in Schools, such as lunchtime drop-in clinics achieved through collaboration with schools, school nurses and pastoral teams is a potential solution for young people unable to attend standard clinics and could provide safe spaces for identifying safeguarding issues.

The model that will be developed and used to deliver health services for Birmingham and Solihull in the future, will be informed by the feedback received from the consultation.

2. Background

The draft Sexual and Reproductive Health Strategy 2023-2030 sets out Birmingham City Council's (BCC) and Solihull Metropolitan Borough Council's (SMBC) themes, priorities, and approaches to meeting the sexual health needs of the populations of Birmingham and Solihull.

The content covers a joint response to increasing sexually transmitted infections (STIs), HIV rates and reproductive sexual health which can have long lasting impacts on sexual health and wellbeing. Sexual health can impact an individual's emotional, physical, and mental

health, economic means, and social relationships. The consequences of poor sexual and reproductive health are far reaching and for those affected, the impacts are compounded by social stigma and fear.

Key drivers for the strategy are the findings from the Sexual Health Needs Assessment (SHNA) for Birmingham and Solihull, which have been translated into the draft strategy to inform appropriate action and enhance existing pathways to meet the needs of citizens.

The objectives of the strategy are to:

1. Ensure that every resident has access to sexual health services that meet their individual needs.
2. Enable services that are local, relevant, approachable, confidential, non-judgemental, to provide services to anyone in need, while respecting all human protected characteristics.
3. Enable citizens to have control of their own sexual health with services providing support where needed.

The strategy will play a key role in realising the joint vision for sexual health services for the future and will facilitate:

- A fully integrated, free, and confidential sexual health service for all citizens across the life course.
- A reduction in the high rates of teenage and unwanted pregnancies, abortion and STIs, which can have far reaching consequences for individuals and society.
- Open and equitable access to sexual health services.

3. Rationale for Consultation

The consultation on the draft strategy was undertaken between 23 May – 29 July 2022 to hear and take account of the voices and experiences of citizens and stakeholders. The consultation was set out to seek information to help understand whether the right priorities have been identified in the draft Sexual and Reproductive Health Strategy 2023-2030. The draft strategy was developed using findings from the SHNA and engagement undertaken in 2021 and highlights the following themes:

Theme One: Priority groups

Theme Two: Reducing the rates of sexually transmitted infections

Theme Three: Reducing the number of unwanted pregnancies

Theme Four: Building resilience

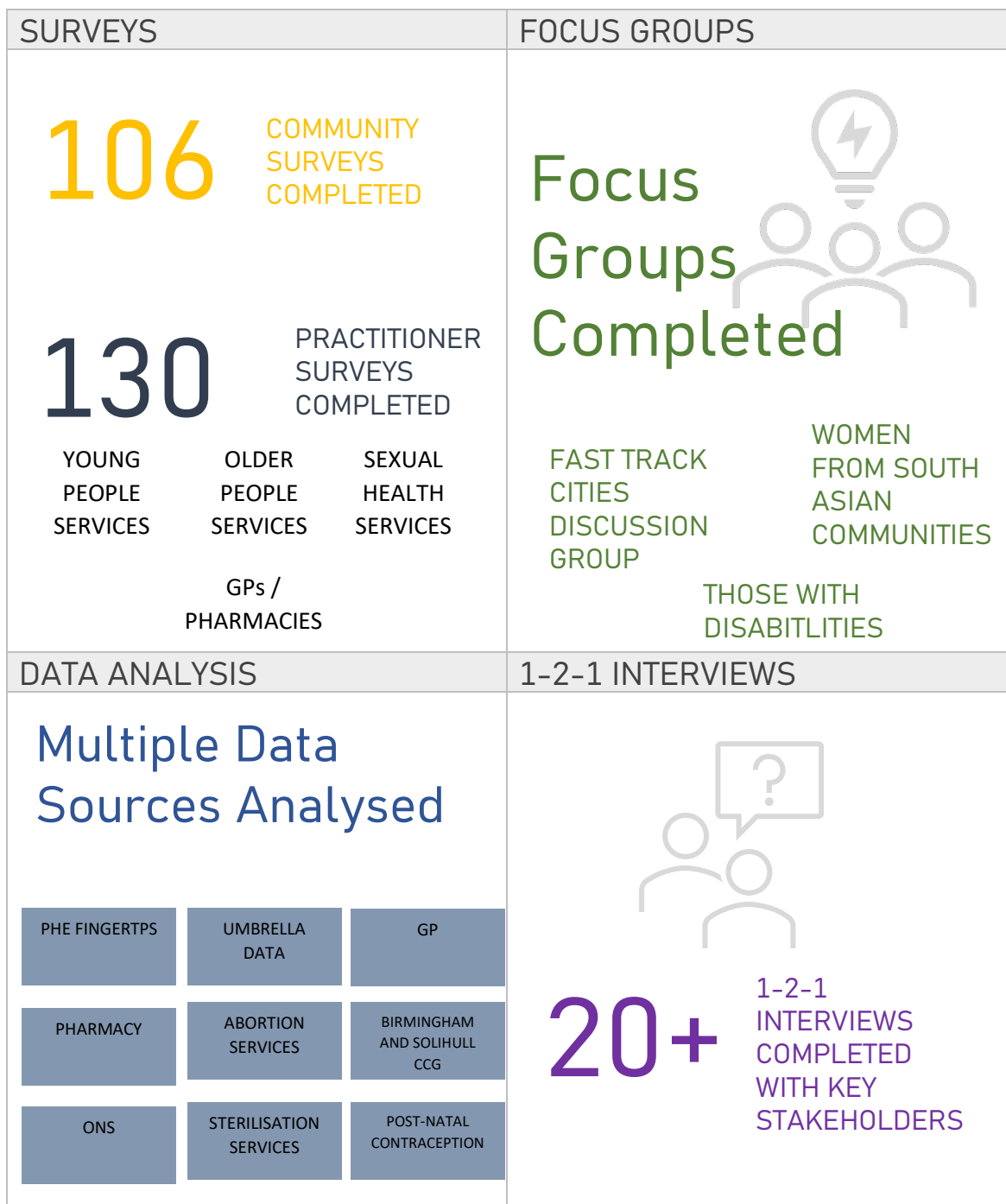
Theme Five: Children and young people

4. Pre-Engagement: Sexual Health Needs Assessment

As part of the SHNA during 2021, engagement was undertaken across Birmingham and Solihull with the community, as well as with 130 professionals and practitioners (Figure 1: Engagement activity). The aim of this was to find out what was working well as part of the delivery of integrated sexual and reproductive health services, and where there were areas for development. The public were also asked about their sexual health behaviours and experiences of services which received 106 responses:

- Of the 106 responses from the public, 86 were from Birmingham, 12 were from Solihull and 7 were from outside both areas.
- 64 respondents were female and 36 were male. There were 2 non-binary respondents.
- In terms of ethnicity, most respondents were white English/ Welsh/ Scottish/ Northern Irish or British.
- 51% had unprotected sex in the last 12 months (this could include sex within a committed relationship).
- 23% had never had a sexual health check up

Figure 1: Engagement activity



4.1. Engagement Findings - Service Experience and Delivery

Contraception Services

Working Well

- Access to free condoms

Areas for development

- Vasectomies and sterilisation. A high proportion of survey respondents are unsure if services are meeting need
- Practitioners were generally happy with LARC services, although some highlighted delays in appointments as an issue
- Complex contraception services
- Emergency coil fittings
- Pathways for complex contraceptives

Advice and Information

Working Well

- Contraceptive advice
- General sexual health information
- HIV advice
- Identifying those who have suffered abuse

Areas for development

- Information for gender dysphoria
- Information for Pre-Exposure Prophylaxis (PrEP)
- Information for Post Exposure Prophylaxis (PEP)

Response to Underserved Groups

Working Well

- Support for victims/ survivors of rape and sexual violence
- Support for patients who identify as LGBTQ

Areas for development

- Support for sexual health needs of homeless
- Support for sexual health needs of refugees, asylum seekers and newly arrived migrants
- Feedback from some third sector practitioners working with older people and those with disabilities was that sexual health needs are not raised routinely

Barriers to Services

Important practical considerations

- Easy to reach by public transport
- Open outside of 'normal' working hours
- Languages other than English

Important service/staffing considerations

- Availability of a range of treatments at a location
- Sexually Transmitted Infections AND Blood Borne Virus interventions

Working Well

- Access to chlamydia screening/treatment

Areas for development

- Rapid testing for STIs
- Community-based testing

5. Consultation Process: Birmingham & Solihull Sexual Health Strategy 2023-2030

The findings from the SHNA were used to inform the Draft Birmingham and Solihull Sexual Health Strategy 2023 – 2030. To re-engage with the public and practitioners, consultation on the strategy was undertaken as part of a collaborative and inclusive approach. This was to help us understand whether we had taken the right approach, incorporated the feedback people gave us in the needs assessment process and to help us to shape the future of sexual health services.

The consultation obtained views across Birmingham and Solihull using an online survey through Be Heard, focus group discussions, and was publicised via a media and communications cascade, including with the following organisations and channels to access key groups:

- Age Concern (older people age 50+)
- Age UK Birmingham and the Black Country (older people age 50+)
- Birmingham City Council networks
- Birmingham LGBT
- Birmingham BVSC (voluntary/third sector)
- Birmingham Education Partnership
- Healthy Brum social media channels, including Facebook, Twitter and Instagram
- ICS (Integrated Care Systems) Communications Leads
- Solihull Metropolitan Borough Council networks
- Umbrella Sexual Health
- YMCA Heart of England (young people aged 0-18 and 18-35 years)

6. Consultation Engagement

Direct engagement with community groups and representatives on the consultation was provided:

- One focus group was held with 35 community representatives and one with eight community members and professionals from across Birmingham and Solihull.
- A presentation to primary care via the General Practice Peer Support Team chaired by the Local Medical Committee and attended by 75 primary care leads.
- Presentation to the current commissioned sexual health service, Umbrella, attended by 35 practitioners.

The consultation had some competition with other engagement programmes that were running at the same time:

- Big Creative Birmingham Conversation
- Food Strategy Consultation
- Joint Birmingham and Solihull Draft Dementia Strategy
- Public Needs Assessment – Birmingham and Solihull Councils

In accordance with consultation requirements, the main Council routes of communication were used for all consultations during this timeframe. It is likely that visibility of the sexual health consultation was negatively impacted. The survey was extended for 2 weeks to take account of this.

7. Responses to Vision and Themes

The Vision and Aims in the draft strategy cover:

- Ensuring that every resident has access to sexual health services that meet their individual needs.
- Enabling services that are local, relevant, approachable, confidential and non-judgemental, to provide services to anyone in need while respecting all human protected characteristics.
- Enabling citizens to have control of their own sexual health with services providing support where needed.

The strategy will play a key role in realising the joint vision for sexual health services for the future and will facilitate:

- A fully integrated, free, and confidential sexual health service for all citizens across the life course
- A reduction in the high rates of teenage and unwanted pregnancies, abortion and STIs, which can have far reaching consequences for individuals and society
- Open and equitable access to sexual health services

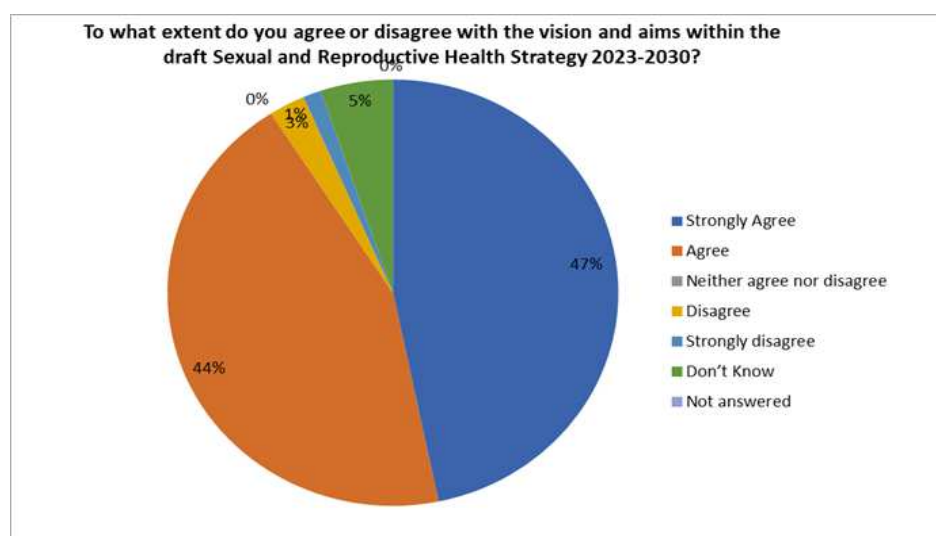
7.1. Demographics of Online Respondents

Most survey respondents were between 30 – 60 years of age (67%). Over half (57%) were female, 6% of respondents declined to answer. In terms of ethnicity, 74% were White British/White European, 10% of respondents declined to answer. On sexual orientation, 62% of respondents identified as heterosexual, 12% bisexual and 8% homosexual, gay or lesbian, 13% declined to answer. Percentages may not have added up to 100% as respondents could choose more than one option.

7.2. Response to Vision – Results from the online survey

Ninety one percent (91%) of online respondents strongly agreed or agreed with the vision and aims of the draft strategy. Those who disagreed formed only 3% of the respondents, as shown in Figure 2.

Figure 2: Vision and Aims



Feedback from the online survey free text and the targeted events highlighted that there were some potential gaps in terms of:

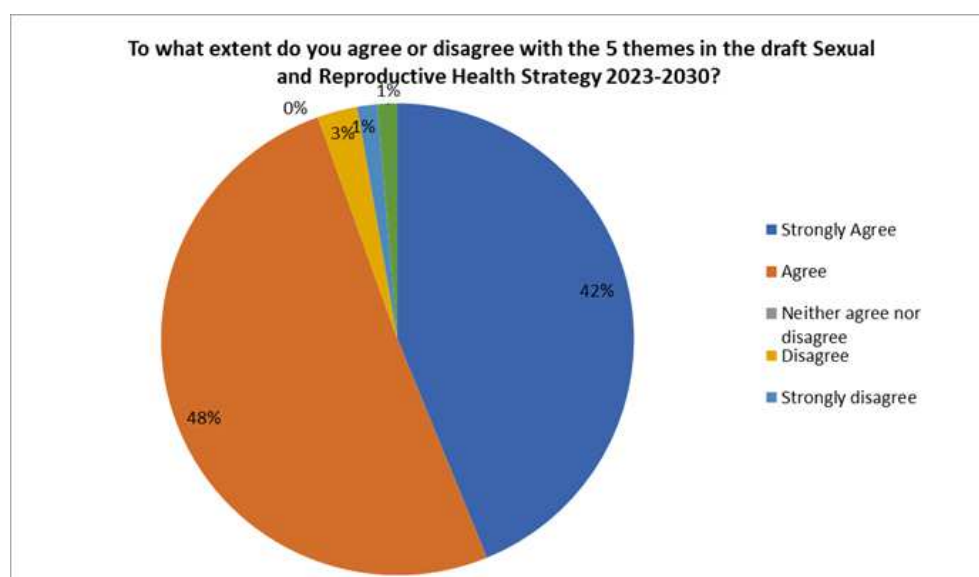
- Clear recognition of mental health in relation to sexual health in the strategy
- Equity of service provision across Birmingham and Solihull
- Cultural awareness and access to services for new communities, including women with female genital mutilation (FGM) who have no recourse to public funds
- Cross border issues in relation to commissioning and patient access routes to sexual health services out of area
- Being aware of older citizens and those in deprived areas being excluded through use of technology
- Recognition of sex workers and their support and treatment needs
- Male sexual health issues, education, awareness raising and engagement
- Inclusion of cervical and blood borne virus screening and human papillomavirus (HPV) vaccination
- Locality delivery improvements, utilising and supporting primary care
- How the strategy is going to be funded, implemented and monitored

7.3. Response to Themes – Results from Online Survey

Ninety percent (90%) of online respondents strongly agreed or agreed with the five themes in the draft strategy (Figure 3: Themes). Feedback on Theme 5, Children and Young People, highlighted concerns around the development of an under 13s service. This related to the view that sexual health services are for the population that are legally able to consent to sexual activity. It was felt that support to underage children should clinically fall to Paediatric services. It was also fed back that this would trigger safeguarding alerts that need to be reported to the correct safeguarding agencies.

The rollout of the Bystander programme in higher education settings was also queried. As the programme was not explained in the consultation document, people felt they did not have enough information.

Figure 3: Themes



7.4. Results from Consultation Events

Theme One: Priority groups

Feedback was received from professionals around challenges in delivering outreach/inreach in a multi-disciplinary way and examples were given of historically provided clinics with the homeless population where limited take up was experienced. The importance of formal evaluation and review of interventions was raised as part of this. The need for better engagement with primary care was stressed, which included training and skills improvement.

In terms of community concerns, there was feedback that women relate and respond better to information provided to them by female professionals. The need for gender specific training to support this was advised. It was also raised that service delivery should include integrated STI and contraceptive advice. This was particularly highlighted for women who may be vulnerable due to termination of pregnancy, sexual violence, domestic abuse, or cultural and language issues for example. An absence of the recognition of issues arising from the menopause was also raised.

Theme Two: Reducing the rates of sexually transmitted infections

The keys to success in this area were described as the need to provide accessible, walk-in clinics, 7-day services and opportunistic screening in other services, particularly termination of pregnancy pathways, as well as understanding what motivates people to attend for a sexual health screen. From patient surveys and presentations at clinics, the following observations on motivation were communicated:

- *Women* – access the service more often because they see the need for contraception. The opportunity can be used to provide e.g. chlamydia testing at the same time, amongst other things.
- *Gay men* – as opposed to men who have sex with men (MSM), may not necessarily see themselves at risk. If a gay man attends because of concerns about the current monkey pox outbreak, however, they can be prescribed PrEP at the same time.

- *Trans community* – a recent Umbrella trans needs assessment (relatively small cohort) highlighted reasons why many of them would attend clinic, not for PrEP or vaccinations, but because they want other things e.g. to have their hormones measured.
- *Gender dysphoria* – someone who is trans or non-binary can be dispensed PrEP but not until it is established why they are attending. They may not attend clinic if what they want is not being offered. They may also require counselling.
- *Autism* – higher rates of autism can be seen in the trans population (A stigmatised condition that may require advocacy or support to engage. Some will have difficulties negotiating what they need because of the autism).

Community feedback focused on the need to have services available at a place level.

Theme Three: Reducing the number of unwanted pregnancies

Community feedback highlighted the need for free, accessible pregnancy tests, locally accessible LARC and emergency contraception with guaranteed confidentiality, delivered by professionals with domestic violence and abuse awareness. Specialised training and advisors for pharmacy and clinic teams was recommended. A small number of comments were received on the need to prioritise the unborn child rather than offer abortion services.

Professionals shared concerns about low LARC uptake. It was felt that this may be influenced by the fact that most GPs only work with their own patients and only a small number with unregistered patients. These practices become extremely busy and there is a need to expand the number of practices that see unregistered patients. Other suggestions were around incentivising LARC activity and utilising pharmacies. Training needs would have to be met.

Theme Four: Building resilience

This theme received the least feedback. Issues raised were in relation to how awareness raising, education and communication is undertaken and areas of good practice. A summary is provided below:

- *Abuse* - tackling abuse within young people's relationships is key. There are significant gaps in clarity relating to consent.
- *Education* – around sexual health and healthy relationships needs to address the patriarchal norms of society. Men and boys need to be given more comprehensive education around contraception and the risks of not using it.
- *Age* - there is currently stronger focus on the younger population than other groups with social media promotion and messaging. Need to utilise other forms of media for all age campaigns.
- *Brand awareness* – viewed as a good way of accessing services and finding information.
- *Pop up shops* – in local communities e.g. the Bull Ring, Perry Barr One-Stop shopping centre, and in underserved communities with local shopping areas.
- *Radio interviews* – more opportunities to engage with e.g. faith groups. Radio stations need to be convinced too that they need to broadcast sexual health messages to their listeners to normalise conversations about sexual health and dispel taboos.

- *Advertising* – positive patient feedback received on advertisements they have seen on buses etc. and how they have made talking about sexual health acceptable by using humour.
- *Promotion* – working with partners, attendance to freshers' fairs, promotion on buses/bus shelters, use of geolocate, social media sites and offering free branded merchandise.

Theme Five: Children and young people

Community feedback focused on the importance of education; it was felt that this is already included in the government mandated education curriculum, but to ensure non-mainstream schools are involved, as well as the importance of specialists supporting schools and colleges around educating children and young people on positive sexual health. Healthy relationships programmes should provide an understanding of the role that gender plays and include a violence against women and girls context. The need to support foster carers with conversations about sexual health with young people who may have missed sexual health education, was also raised.

In terms of sexual health service delivery, some feedback highlighted current good practice. for example, it was observed that Umbrella's Education Team has created a comprehensive RSE programme for partner schools across the city, providing teaching support packages for those delivering RSE. The feedback relating to improving delivery is summarised below.

- *Under 13s* – Under 13s, by definition, cannot legally consent to sex and including pathways in an adult service is inappropriate. More thought is needed about where pathways and interventions should sit and who has the skills set and training to provide the service.
- *Sexual assault victims* – The current service is an all-age service, and there is a need to ensure the right support services, including Sexual Assault Referral Centres, are part of tight pathways.
- *Children in care* – Working with local authority care services to provide a high level of training to the nursing team to incorporate sexual health assessments within their assessments of the young people.
- *Foster carers* – Discussions with foster carers and Children's' teams regarding training people looking after young people in care to have conversations and facilitate the care they need is relevant and a good way of accessing and engaging with young people.
- *Clinics in schools* – Some young people are unable to attend actual clinics. Safe environments could be provided within schools e.g. lunchtime drop-in clinics, offering contraception and STI testing. Working in collaboration with schools, school nurses and pastoral teams. Would be beneficial for young people who are expected to go home straight after school and not allowed to travel outside their own environment.
- *Safeguarding* – Identify safe spaces for children and young people to talk to trusted adults about any issues.

8. Conclusions

8.1 The consultation findings indicate that there is strong support from the community and professionals for the content of the draft strategy and that the strategy adequately reflects the results of the needs assessment that was completed in 2021. Additionally, the consultation provides valuable feedback on how the strategy may be implemented.

8.2 Some stakeholder groups provided feedback that were focused on specific areas of the vision and aims and advocated for increased focus during implementation to interventions in these areas.

9 Next Steps

9.1 In view of these conclusions, it is proposed that the content of the draft strategy is maintained without changes and therefore ratification of the strategy is requested from the Health and Wellbeing Board.

Appendix 4 - Free Text Survey Responses

Free text comments were received under the vision and each of the themes during the consultation. These have been grouped into subject areas and illustrate where further work may be needed to inform and develop our future approaches to service delivery.

Vision

I have no issues against the strategy

Very concise

Prevention is key.

I'm glad to see it's being addressed.

Whilst overall the vision and aims are well-meaning, there are some contradictions that are illuminating.

I have only focused on the areas relevant to myself and I was positively impressed with the depth of understanding especially around the need for integrated teams, widening outreach, promoting PREP and working in partnership

Agree with need for voices of lived experience and proper consultation and involvement Is there space for co-production too, rather than just consultation?

Support the strategy but want to know how this will be implemented and no money given to UHB for providing all services.

I'd like to see a resourcing plan to support delivery of the strategy

Values and beliefs:

Stopping the pervading belief that sexual availability and activity is cool/fashionable/desirable but in a way that is not old fashioned or religious. Privacy and choice not to be sexually active is a right and not prudish or frigid.

I believe in the sanctity of life and therefore the rights of the unborn child. I therefore cannot in good conscience support abortion services.

.....although the vision suggesting that it is important to reduce stigma and shame, by positioning abortion as a 'bad outcome' or 'failing at contraception', the strategy actually reinforces abortion stigma. This is extremely unhelpful, and does nothing to encourage open and meaningful conversations with healthcare providers

A key part of the vision stated is 'to enable citizens to have control' - which is exactly what it should be. However, within the strategy, there is a strong emphasis on increasing LARC take up and reducing abortions. For many this will be what they want and be welcomed, but this should not be universally assumed.

I particularly agree that the aim to see "A reduction in the high rates of teenage and unwanted pregnancy, abortion and STIs, which can have far reaching consequences for individuals and society" is very important and in part stems from the hyper-sexualised culture that teenagers now grow up in.

The Strategy should include more focus on education that includes learning and understanding about genetic literacy and the associated risks and mitigations from a non-judgemental perspective. This needs to start from primary school and in faith settings.

Gaps:

It is very focussed on female issues with little regard to issues affecting men unless they are marginalised or have a sexually transmissible disease

There is nothing for people experiencing sexual dysfunction such as impotence or vaginismus. This is a big issue for older men and men with diabetes. Education on the subject and availability of Viagra, psychosexual counselling etc should be included. You mention gender dysphoria but there is nothing specific planned. Counselling outside of specialised clinic appointments that are typically 3 months apart for the index person and also for their close contacts should be available locally. They have big issues to consider regarding their reproductive health and the sexuality of their partners

You mention sexuality and disability but there is nothing specific planned

There has been very little progress in terms of developing learning for foster carers in SMBC these past years so I very much welcome this

Enable services that are local, relevant, approachable, etc while responding to human protected characteristics. I hope this also includes the consideration that some women only services as protected by sex are needed too

Current Offer:

They hold too much power already and are the Goliath in health care. They care more about their research papers than their clients.

Sexual health provision in the city is appalling and has deteriorated in recent years. Trying to get an appointment with umbrella is almost impossible. Since removal of the walk in GP centres in Birmingham if you need PEP, you have to wait 8 hours in A&E who are overstretched.

COVID has negatively impacted sexual health services everywhere. There needs to be a step change to ensure services that were reduced or removed during this period are re-established and additionally improved upon to manage vision and aims of the strategy.

Additionally, there is not enough focus on diagnosis of STIs. Approximately 80% of patient management decisions are as a result of a pathology diagnosis, this is no different in sexual health, and yet given the potential stigma and barriers, we still find it acceptable to allow patients to wait excess time for results and treatment, we still find it acceptable to assume patients will manage their own health via on-line / postal services for testing and education; some vulnerable groups need more attention.

Healthcare Sector Comments:

On behalf of NHS England I think it would be good to see reference to the commissioning of Opportunistic Cervical Screening at Sexual Health clinics. We would be keen to discuss how we move forward with this

We need to better manage testing and the time to diagnosis and treatment. Please refer to Whitlock et al., Rapid Testing and treatment for sexually transmitted infections improve patient care and yield public health benefits. International Journal of STD and AIDS., 0(0) 1-9 <https://doi.org/10.1177/0956462417736431>

Gilead Sciences has worked with sexual health services across the world to ensure that people who are diagnosed with HIV and HCV have access to the most appropriate treatment as quickly and securely as possible. We therefore welcome the opportunity to provide a written submission to this inquiry and support the ambitions of Birmingham's Sexual and Reproductive Health Strategy in providing the best prevention, treatment, and care for all those living with and at risk from HIV and HCV. In alignment with Birmingham's Vision, we see four main actions that need to be undertaken across all sections of society to make progress:

- 1. People living with HIV are not a homogenous group, it is important that the individual concerns and needs are considered when implementing measures and actions and the voice of people living with HIV must be at the heart of any policies and actions and their voices must be heard*
- 2. Data collection should be improved to include a greater cross-section of society, including lesbian and bisexual women, migrant communities, people who inject drugs, and people who are homeless*
- 3. Specific measures should be introduced to tackle areas of concern for people living with HIV such as mental health, social care, stigma and discrimination, supported by education for healthcare professionals*
- 4. Easy-to-access testing initiatives must be a key focus for sexual health services. Early access to testing plays a vital role in reducing late diagnosis for BBVs and rates of transmission.*

Terminology:

Vision seems robust and appropriate. However, next to aim 1 and 3 you mention "resilience." I do not think this word is user friendly (many MH service users do not like this overused phrase), it also suggests that people "just need" to be stronger/more resilient in the face of difficulties (some of which will include very traumatic and adverse situations.) Some users of services feel that this is a way which unhelpfully only focuses on their supposed lack of resilience, rather than failures in systems, multiple disadvantage and appropriate distress responses to very traumatic and adverse situations.

Agree that Access for every resident to meet their individual needs is key. Would like to see removal of barriers and providing equity of service here instead of resilience.

Enable citizens to have control of their own sexual health with services providing support where needed, agree it is key but would like to see the word resilience replaced with something else. Alongside the client feedback, it also isn't clear of what is meant by this anyway.

Theme One: Priority groups

Older people:

I'm concerned there is a theme focused on young people but not older people (although full lifecourse is mentioned).

The relationship and sexual health needs of older people should be treated as a separate theme due to the different presenting needs and the lack of focus on this population group in previous service delivery.

Agree but need to address a broad range of ages eg: over 40's and older people within this strategy

Victims of Domestic Abuse:

Is there scope to provide training for pharmacists around domestic abuse? Birmingham currently has IRIS and an IDVA based within sexual health services to facilitate this training but pharmacists, who may provide an excellent safe space for women to disclose experiences, do not receive training as far as I'm aware

Women experiencing domestic violence and abuse also need to be a priority group, ensuring safe confidential access to services at the GP practice. STIs and repeat emergency contraception / abortions can be an indicator for DVA. DVA needs to be brought up through sexual health training for practices.

Work with Women's Refuges, Chem-Sex and Sex Worker support groups (if there are any) and HIV Support Groups

Above there is NO mention of those subjected to sexual and domestic abuse, which is referenced in the draft strategy. This is a vital priority group and the work of the last SH strategy where it was an outcome should be maintained, built on and grown. By not mentioning it here, there will be a loss of focus on this priority group which affects a large proportion of people, and as evidence shows esp those who are women, young people and those with disabilities (all 3: sex, age and disability are protected characteristics too)

HIV & Blood Borne Viruses:

To protect and support people living with HIV, it is key to understand who they are, their needs, and how they can be appropriately supported. In addition to gay and bisexual men as well as Black African communities, there are other priorities groups requiring support in order to remain on effective treatment to control their viral load. These groups include women, people who are ageing with HIV, people who are homeless, migrant communities, and people who inject drugs. To support all these groups to live well with HIV, the following steps should be taken:

Greater support should be provided for increasingly marginalised communities to ensure adherence to treatment plans is easier and these individuals can access the support they need. Advances in treatment and care have meant that the epidemic has been reduced to primarily impacting marginalised communities. The National AIDS Trust has warned that, unless action is taken to provide support to these marginalised communities, 'a larger outbreak in England is possible'. This group are likely to make up the majority of the 20% of people without viral suppression

Prioritise women living with HIV in both research and policy agendas, while ensuring greater collaboration between HIV services and sexual health and reproductive services to provide a stronger healthcare network for women with HIV. The experiences of women living with HIV are under-assessed and under-recognised. To address these inequalities, it's important that women are prioritised in policy and research agendas and community groups are included to ensure this work is community-led

To reduce the rates of HIV, the HIV Action Plan for England sets out two recommendations which should be included in Birmingham's plans:

- Action 4: Reduce missed opportunities for HIV testing and late diagnosis of HIV*
- Action 8: Ensure all late diagnoses are investigated as a serious incident by the National Institute for Health Protection, working with BHIVA, NHS Trusts, local authorities, and CCGs*

Early access to testing plays a vital role in reducing late diagnosis for all BBVs and reduces the number of people who are not aware of their status unknowingly passing the virus on. BBV testing in sexual health services is lowest among women (56%) and late diagnosis is highest among BAME groups, closely followed by older people and white women. With this

in mind, testing initiatives must be targeted and easy-to-access for service users, with opt-out BBV testing being the end goal.

In addition to the national actions that have been set, there are a number of other actions that should be implemented to address late diagnosis and tackle HIV, HBV and HCV in Birmingham. These can be implemented alongside the Fast Track Cities plus Project (a project aiming to reduce new cases of BBVs):

- Expand opt-out BBV testing into non-traditional settings, such as community centres, A&E, and primary care, to address late diagnosis and reduce onward transmission of HIV. Whilst Gilead notes the commitment to rolling out BBV testing in A&E and GP practices, further steps could be taken through opt-out testing. London recently launched an opt-out BBV testing approach which stipulated that all patients over 16 who require a blood test as part of their treatment at A&E departments receive a HIV test. Testing of this kind is thought to be the single most effective intervention to find most people living with HIV who are not yet diagnosed*
- Expand HIV testing campaigns to raise awareness and address stigma across local areas, focusing on non-traditional settings. National HIV Testing Week (NHTW) runs once a year targeting the wider public. In 2021, NHTW had its most successful day on record with 8,200 HIV test kits requested. Due to high demand, Public Health England (PHE) funded an additional 10,000 kits to enable more people to know their HIV status. Campaigns such as NHTW could hold value if recreated in Birmingham through raising awareness of HIV among the general public, and ensuring that people are aware of their HIV status*
- Ensure all HIV services are sufficiently supported to undertake a formal published review of all patients who are diagnosed late to gain better understanding of the population. A 2016 paper showed that almost a quarter (22%) of deaths in people with HIV in London were attributable to AIDS-defining illnesses, which is largely attributed to late diagnoses and/or a lack of engagement with care and treatment services.*

Within the homeless [population], there's quite high rates of bloodborne viruses, but there aren't necessarily high rates of STIs

Improving testing for bloodborne viruses by blood spot testing - I think that would be well worthwhile doing.

Engagement:

I think working in partnership with other organisations is key to delivering this service to priority groups who may require these services.

Need to see more outreach provision for those hard to reach communities as there is currently lack of assertive engagement across the city due to cuts to funding over the years leaving people vulnerable and at increased risk.

More needs to be done to reach the hard to reach groups. More health promotion / education roles need to be put into place that focus on breaking barriers and negative attitudes towards sexual health .

General comments:

Sex and alcohol/drugs aren't always hand in hand and people shouldn't feel that they will be tared with the same brush..... those engaged in substance misuse support would likely need to concentrate their efforts on one issue at a time...

Curious to know why sex workers and chem-sex users are not included as priority themes in the strategy. In fact they are hardly mentions anywhere in the strategy

Recognise the need to better genetic literacy in some communities to reduce risks around consanguinity including

- 1. miscarriages*
- 2. infant mortality*
- 3. child mortality*
- 4. child disability*

Theme Two: Reducing the rates of sexually transmitted infections

Access:

Give a true 7 day service.

Pop-up clinics would be ideal

Walk in clinics are vital

Walk-in centres need to be better placed and not in Boots!!!

We are in 2022 and don't want the world to know we are going to a Sexual Health Clinic.

Needs to be better managed!!!

Need to move sexual health out of the hospitals and medical settings plus reduce shame around the topic of sexual health.

There need to be more localised places for sexual health screenings. Some of the local ones don't have blood testing functions and for some people/communities, being seen in the City Centre GUM clinic or around it would be shameful, equally, some might not have the money to travel.

If by pop-up services you mean for example clinics as gay saunas and sex clubs then yes. As a user of STI clinics and a gay man on PREP I have serious concerns about self-test Kits. I know they save time and resources but how effective are they? What research has been done on their effectiveness? I have found them to be difficult to use and have given up using them. Getting blood into the tiny vile is very tricky and messy. And I've had several comments of Umbrella staff saying that users don't like them and find them difficult and impractical to use

The Walk in (with available booked appointments) in Solihull is vital. Maintaining both walk in and self-test as part of a spectrum of options to reach the most people is key. Some people are unable to use the self test kits.

Make it 7 day testing walk in centres. The home test kit results take far too long to come through. Access to PEPSE on a Saturday or Sunday is awful.

Completely agree. There needs to be more localised offer, one that also is quicker than the current one where you sometimes have to wait quite a long time for an appointment for example when you work and can't do day time hours.

Have walk In Sexual Health Centres had their day? Is it now better to integrate them into other services?

Don't want to go to the hospital for testing or GP or even Boots in town centre. Want to have testing that is easy to get to and close to where I live.

The Hubs seems like a good idea

I would also like to see the utilisation of frontline support/outreach staff in delivering community-based sexual health link work

Inclusion:

It is important to link cross services to provide holistic services, but it is also important to not exclude those that may need sexual health but not drugs and alcohol or even if people need both to not put them off accessing one because they are not ready to talk about the other.

Not just young people need safe spaces to discuss their health and relationships

You have included little for women with genital mutilation who have NRPF and may find genital examinations difficult and birth almost impossible.

There is a distinct absence of issues arising from the menopause such as vaginal dryness, loss of sexual desire

There is a much closer link to the above than ever before realised. Inequalities/substance misuse/intersectionality really affect people's choices and accessibility but also understanding of risks and accessing services.

You have to [check] what people's prime motivators are [for attending sexual health services], and they aren't necessarily the same as ours... We might see what they need but they don't."

I am shocked how quickly CHEMSEX is on the increase. It's like a little pandemic of its own. If you go on some of the dating applications, you start seeing the number of people looking for it/selling it etc. It's really worrying for health reasons, MH reasons but also of course around safe-sex practice which tends to go out the window in those situations. I presume abuse might also take place in those situations.

STIs can be a signifier of DVA. Please ensure clinic, pharmacy and outreach teams are aware to look out for DVA.

I am a survivor of historical sexual abuse. Whilst I've been asked in a clinic about any previous such incidents and I disclosed them, once I said I didn't need help, it was left. I actually would sign up to some sort of focus group or some help around dealing with past abuse, not just sexual but I've also been subjected to emotional and physical, which has affected my whole life and still does. It'd be great to see some help offered in that space

Primary Care

Primary care (GPs) should be having more involvement in managing sexual health , currently with contracts sitting with external providers it is duplicating work, we need to share our notes and communication has to be robust, we seem to be lacking an effective communication and wonder if the new process will look into this - Best wishes, A caring GP

Pharmacies are probably better served for public use than GP's as you would have discuss private information with the receptionist first. Pharmacy staff are more helpful.

Women from many BAME communities are not allowed to attend sexual health services on their own and cannot discuss embarrassing issues in front of family members. In my experience, many will talk about such matters openly to a health professional on their own. Some worry that their husbands are gay or carrying STIs from sex outside marriage and even have symptoms of STIs that they cannot disclose in front of a relative. Some say that

their GP needs to pretend to send for them to discuss their child's health for them to be allowed to attend without a relative or insist that the consultation is just for them with no one else present.

I agree with the statements in general but would prefer more information about how it will be done e.g. item 6 ensure all pharmacies Which ones will be trained first ? any priority of area or target group... how many and by when

Funding for GP practices to deliver sexual health services as part of contraception services (currently not part of the service which Umbrella GP partners can provide when fitting LARCs for non registered patients which makes no sense)

Education:

Much more needs to be done in reducing stigma and providing education - all around accessibility.

How can education AND high value reliable laboratory quality testing be achieved in outreach areas?

Testing:

Point of Care testing has developed over time and can no longer be considered lower quality than the laboratory - addressing this would improve access and discussion as well as potentially reduce time to treatment, reduce transmission of STIs and reduce stigma.

Gilead Sciences welcomes any action taken to reduce the rates of HIV transmissions, while improving the health-related quality of life for people living with HIV. The commitment of the aims set out in Birmingham's draft strategy represents a positive step in helping and supporting people living with HIV. However, in order to enact meaningful change, sexual health services must shift their focus to a wider BBV approach and consider what local steps can be taken to reach the Government's target to eliminate Hepatitis C by 2025 and end new transmissions of HIV by 2030.

More could be done in collaboration with services that already provide a rapid diagnostic and faster treatment approach, especially in PWIDS and homeless populations (refer to Midlands ODN and The Hepatitis C Trust) who already have focus and these groups and could work with other services to support (AT THE SAME TIME) STIs, as well as other infectious disease possibilities. This could save time and revenue in faster diagnosis and treatment as well as staff time with multiple services chasing the same patient.

Would self testing with a RAPID lab quality result be more appropriate for people who have been sexually abused or assaulted - to reduce the anxiety of waiting for results, why not provide laboratory quality POC testing? to provide results within hours that can then be reliably acted upon.

More needs to be included about smear tests and HPV vaccinations.

[STI] testing in other services e.g. TOP services needs to be addressed as this has really suffered with the changes in legislation and procedures which means that women are often not being seen.

Are you including tests for hepatitis and tuberculosis with the HIV test? From what is written it looks that way and if you are some people are going to object and possibly refuse any test.

Easy access to self-testing kits should be for everyone, not just under 25s.

Local clinics don't do blood tests in some cases, that should change.

The self-testing kits have not long ago changed the tube for a blood sample. It is now much bigger and it's IMPOSSIBLE to get enough blood out of the finger to provide a sample. I've given up now and so many of the people I know have - we just send the other tests off without bloods.

Having a number of different STI testing kit suppliers would not support the majority of laboratory testing broad assay menus on a single platform that allows consolidation and the ability to run more tests. Maintaining multiple contracts with suppliers would be unwieldy and in many cases impractical given the primary supplier, Hologic is used by the majority of laboratories and changing would involve major costs and disruption to the current platforms used by laboratories.

Number 8 is a non sequitar and the other infections require attention outside of HIV testing. Include reference to monkey pox?

Values and Beliefs:

It would be great if we could try and promote chastity, as opposed to offering free condoms which unfortunately will be more geared to promoting promiscuity.

In addition, the drivers and motivations for sexual promiscuity also need to be looked at rather than just addressing the result (i.e STIs etc)

Your objectives and questions above seem obvious. It isn't the what, it's the how, how do you do it? how do you assess effectiveness? how do you follow up. More subtly, how do you work around political and religious nonsensical certainties?

But should be a way to reduce shame

The provision for young people to talk about healthy relationships is key as otherwise the main learning ground is likely to be the internet and/or pornography which leads to damaging and unhealthy relationships.

Effectiveness:

Once again to provide the sexual and reproductive health services in an efficient way and to reduce the rates these equipment and other services are vital to the programme.

Don't know is more "why focus this on young people only?" other than that the statements are fine.

PREP is brilliant and the service and nurses are great. More people should have it.

The PREP clinics have been really good, very friendly, informative, non-judgmental, quick, reminding of the need to test and pick up PREP - fantastic. Promotion needs to increase to prevent further HIV infection rates.

Whilst the need for ongoing partnership is recognised there needs to be an increase in funding in order to ensure that there are enough resources are in place to meet the needs of the city.

Your questions and required responses are leading. Yes to all of the above but HOW CAN THIS BE ACHIEVED DIFFERENTLY AND MORE EFFECTIVELY? You are assuming here

that when the response is YES then your approach or offer is adequate or on track - what about being better, being innovative?

Theme Three: Reduce the number of unwanted pregnancies

The name of this theme is hugely problematic – it adopts a stigmatising approach from its inception, and should be renamed. A preferable approach would be to 'Increasing contraceptive access', but even switching to 'unintended pregnancy' would help.

The phrase 'reduce unwanted pregnancies' could be interpreted as 'increase the number of abortions', which I would not agree with.

Contraception:

Want easy access like it used to be

Better information online

Needs to be like a one-stop shop

I've never heard of LARC before but the concept is sound and should be encouraged.

Free, accessible pregnancy tests are important. Accessible LARC and emergency contraception with guaranteed confidentiality and DVA awareness are also essential. Specialised DVA training and advisors for pharmacy and clinic teams is one step that could make this service more accessible. Ensuring it is culturally sensitive and aware of inequalities with a high level of anti-racism training could also make this service more accessible.

Why there is not a pharmacy contraception offer in the centre of Solihull is beyond me. Having to go to the GP or the walk-in when other services are not required does not seem to be best use of resources and possibly more stigmatising than walking into the pharmacy after the initial GP or walk-in issue.

You do not mention the removal of some of the invasive contraception. Some of it requires a doctor. You do not mention ensuring the competency of IUD fitting doctors is regularly tracked / ensured

What is the evidence that providing the same pharmacy contraception offers in Birmingham and Solihull is the most effective way of reducing inequalities, given the very different demographics?

Better access to contraception is really important, but the overemphasis on LARC is problematic. There is strong evidence that when certain populations deemed by providers and policymakers as potentially 'bad mothers' are targeted for LARCs, there is a lack of attention to the reproductive autonomy of individuals, and issues such as side effects are not properly explained. In addition, the difficulties faced by people asking for LARC removal are becoming well known, and this is also likely to contribute to a lack of uptake.

I'm a cis gender straight female no longer in need of contraception but I think services are much worse now than they were. I liked being able to get contraceptive advice and free contraception from a stand alone FP clinic. Given the impossibility now of getting appointments in GP surgeries I think I would definitely prefer that still. But as a working person the huge benefit was evening clinics so I didn't have to take time off work. I see that it is impossible to see an Umbrella practitioner after 1830 or even 1630 in some clinics. I get that there may be risks to staff that did not exist so much 30 years ago but I think more

should be done to ensure that every woman knows free contraception and advice is available outside of GPs, all men know free condoms are available (I hope they still are) and that every step is taken to extend possibility for appointments / walk in across the city at extended times.

[We need to] understand about why is it that we are so far behind [the GP LARC prescribing rate] and understanding what it is that we need to do to address that.

As women who are sexually active do we routinely test women attending for contraception for HIV? If not why not?

Do not weaken family planning services and access to appropriate contraception in favour of sexual health as happening during the pandemic when PreP was still available and supported but women had to give up we'll working forms of contraception as they could not be seen in clinics!

I don't think people like pharmacists who have not had a fuller grounding in all contraceptive options and potential complications should be fitting implants. More should be done to train people thoroughly rather than just how to put an implant in

Strengthen access to post natal contraception including LARC methods and missed opportunities post ectopic/miscarriage across the city - no provision currently

Think there should be express provision for LARCs for YPs and generally opening of services for YP

Abortion:

Work to stop accidental pregnancies so that abortion becomes a thing of the past.

I do not agree with killing the unborn.

The emphasis on abortion providers providing LARCs is based on negative stereotypes of why people access abortion, which again illustrates that this strategy has been produced to further stigmatise abortion rather than increase autonomy and decision making in this area.

I think this is too weak. Does it say over 1/4 conceptions lead to abortion? Surely more should be done to tackle that. The strategy's focus is on marginalised groups. Do they make up the majority of that statistic? Agree for health inequalities that is right. But it can only happen after a really strong baseline services are in place.

Abortion services improve contraception and testing for early medical abortions needs significant overhaul, these are high risk groups

Engagement:

To Reduce the Number of Unwanted Pregnancies, working with other key stakeholders and organisations is vital.

tests should be available free where needed but the settings should be able to offer some ongoing /appropriate support

Again I would like to see the utilisation of charities such as Trident Reach, with an already established in-reach into some of Birmingham's & Solihull's most vulnerable and underrepresented communities in delivering sexual health link work, education and support.

Whereas the desire to avoid unwanted pregnancies is good and people should be encouraged to seek to have family situations (e.g marriage) that will be stable and conducive to having children.

Theme Four: Building resilience

I don't think the word resilience fits here to be the best umbrella term for these action plans and aims. It is also not liked by many users (see previous comments on earlier questions.) This section to me seems to be about breaking down stigma and barriers to services.

Education and Advice:

Education in schools important

If it's not on Insta, it doesn't exist in the world

Building Resilience, means more help and information should be put out there to raise awareness on such issues and provide advice

Abuse within young people's relationships could be key here. There are huge gaps in clarity around consent

Education around sexual health and healthy relationships needs to address the patriarchal norms of society. Men and boys need to be given more comprehensive education around contraception and the risks of not using it. Better healthy relationships education from a young age to combat the norms of abuse in relationships is also needed.

Focus on people's right to choose not engaging in sex if they want to live that way, minimise the effects coercion and peer pressure to engage in sex.

I agree that Building Resilience, means more help and information should be put out there to raise awareness on such issues and provide advice.

Provide community promotion highlighting the risks of unprotected sex under the influence of drugs and alcohol and details of where to access condoms in all venues that sell alcohol. Resilience for people living with HIV can be defined as having the ability to engage effectively with health and care services, such as taking regular treatment and seeking mental health support where necessary. While each individual living with and affected by HIV will have their own understanding of Health-Related Quality of Life. The concept is subjective and, as has been recognised by HIV Outcomes, must be assessed from an individual perspective.

I'd want to know what will be promoted and what is evidenced re resilience programmes in schools. Unsure what progs this refers to, who has evidenced it and whether young people have been consulted. So would want to know more before I can say whether I support this. Many progs in schools are not young person friendly or centred and miss the needs of young people. We need to be sure their views are heard.

Peer pressure may need to be addressed via more than consistent message info and education. It is also about providing safe spaces where over time young people can explore, undo and challenge peer pressure and also examine why they may be the ones doing the pressure of peers. We need to help young people talk and explore (safely, over weeks and in single sex and then later perhaps in mixed sex spaces) about all aspects to sexual health. E.g. consent; sexual and domestic abuse; what they have seen in pornography and undo some of what they have seen, as much porn does not support consent, safe relationships,

interactions which are free of pressure etc.

Values and Beliefs:

"Normal" sexual health has become increasingly mis-represented since the sexual revolution. Proper / appropriate sexual union only belongs within traditional marriage.

The word I pick out here is 'normal'. Good practice should be normal, unspectacular, taken for granted.

Depends what the 'social norms' are that are being challenged as some traditional values around sex and relationships are what actually lead to human flourishing as opposed to the direction that much of the current social norms are moving, which has no real vision for human flourishing but is more motivated by a 'freedom from restrictions' approach.

Domestic Abuse:

It would be good to have a programme for those affected by sexual /domestic abuse.

Availability of support for both men and women experiencing rape or other sexual violence. Joint work with the police to make reporting easier and information for victims on what to expect when they do report such as genital evidence

There needs to be an increase in accessibility for those who have been victims of domestic and sexual abuse into appropriate therapies if requested without the need to sit on waiting lists. There needs to be an increase in resources to meet the growing numbers in sexual and domestic abuse and also there needs to be clear and timely consequences for perpetrators in terms of policing and the courts.

Sexual health has done a lot to build on support for anyone affected by domestic and sexual abuse. E.g. IDVA and ISVA services are excellent. ASC is a brilliant service. As reports of sexual violence are increasing this needs to be maintained as a minimum and built on, developed and expanded as best practice.

Stigma:

Agree that shame and embarrassment about services including abortions is a barrier.

As my previous comments, the vision to reduce stigma is good, but the strategy actually reinforces abortion stigma and makes judgements about conceptions that it doesn't feel are appropriate rather than focusing on improving access and autonomy for individuals.

Stigma and discrimination have a myriad of impacts on individuals living with HIV, including (but not limited to): poor mental health, reluctance to access medical care, and poorer health choices, these in turn can lower resilience. It is important to realise that, while stigma and discrimination affects all people living with HIV, it can be worse for certain groups, including those from lower socioeconomic backgrounds, communities where English may not be their first language, ageing populations, and groups with high HIV prevalence. viii To improve health-related quality of life and build resilience, Gilead welcomes Birmingham's commitment to developing a stigma-reducing campaign as part of the Fast Track Cities plus Project, and believe it is key that people living with HIV are at the heart of any campaign and their voices are heard and valued. The following recommendations could create these improvements:

- Ensure all people living with HIV are supported to manage any co-morbidities, including from primary care and sexual health services. People living with HIV are disproportionately vulnerable to a wide range of other conditions (co-morbidities), including cardiovascular disease and chronic kidney disease and are more likely to develop certain types of cancer at*

a younger age. All people living with HIV need ongoing support from across the care continuum to manage co-morbidities

- Make available appropriate and accessible mental health support with professionals who have knowledge and understanding of HIV. Around half of people living with HIV express mental health concerns, compared to 24% of the general public. A wide spectrum of mental health and support services such as peer support, counselling, psychology and health and wellbeing-related services should be made available to all who need them*
- Work with local health services across primary care, dental, and secondary health services to eliminate HIV-related stigma, allowing people living with HIV to access healthcare without discrimination. People living with HIV continue to experience stigma and discrimination. These attitudes transgress to healthcare, with one in nine people with HIV having been refused healthcare or had their treatment delayed because of their HIV status.^{viii} Quality of life will not be improved unless these attitudes change. Public awareness campaigns, training for NHS staff, and education in schools would help tackle stigma and discrimination*
- Implement the National Standards for Peer Support in HIV when developing peer support networks for people living with HIV to develop mutual learning and understanding of HIV, while enabling people to develop communities and support networks. Peer support is a relationship through which people are seen as equals and the focus is on 'mutual learning and growth'. Peer support can improve the confidence, well-being and overall quality of life for people living with HIV. As the population living with HIV is so diverse it is important that this diversity is recognised in both the people providing the peer support, and the locations of the sessions*

Take a look at Dean Street and Dean Street Express - this service has transformed the attitude to STIs and testing in Soho by making it acceptable, approachable and accessible. Do the sexual health clinics in Birmingham and Solihull provide the same in the current format / environment? or are they still very sterile and have negative perception, would you want to go to Whitthall Street?

General Comments:

Also where it states develop champions where engagement is difficult. I would rephrase this. Usually engagement is difficult because the right approach, right engagement, right people, right methods or appropriate engagement has not been followed. It is usually about seldom heard groups, multiple disadvantaged or discriminated against groups that are so called "hard to engage with". I would change this to seldom heard or marginalised groups.

Need to add older people into the strategy

Need to integrate with the voluntary sector

Theme Five: Children and young people

Similar to previous comments - I'd like all services for all ages...

Better funding in GP services would support this. Primary care staff outreach to local schools would encourage young people to realise they can approach GPs and practice nurses.

Age Appropriate:

Theme Five - should not refer to Children only Young People since Sexual Health Services do not cover Children. Children should be managed within Paediatric services.

Unsure of response to under 13's. Not sure of what is meant here and what an integrated pathway for under 13's would look like. Whatever it is, needs to be age appropriate, mindful of age of consent and lack of ability for u-13's to consent and also high risk that under 13's will face sexual abuse, coercion and control. U-13's do need safe spaces where they can

continue to come to discuss consent, relationships, healthy relationships, explore their sexuality, ask questions, etc.

Design an appropriate integrated sexual health service pathway for under 13s with child focussed sexual health provision" - this seems odd phrasing as sexual activity under 13 is abuse so agree provision should be made but could rephrase

The increase the provision of good quality contraception, advice and information should not include children, but should include young people, parents and carers

Safeguarding issues relating to Children that are identified within Sexual Health are reported to the correct safeguarding agencies.

Sexual health pathways need to include monitoring of provision to guard against abuse of vulnerable children and young adults

.....safe spaces for young people to discuss health etc... should also give consideration to physical and emotional safety and how they can feel safe discussing consent, when they have been subjected to domestic and sexual abuse, when they are uncertain of what may have happened in a relationship etc. Location is important here, it needs to be a safe environment that is young person centred and friendly (boots was not experienced by young people as safe.) Also training and approach of staff is important for safety too (do they know how to respond when a young person discusses when they are not safe for example). For some safety will be about specialised service provision, sex worker clinics, where only sex workers are seen; women only spaces and services; LGBT specific spaces etc.

Education:

Importance of specialists supporting schools and colleges around educating children and young people on positive sexual health.

Healthy relationships programmes need to have an understanding of the role that gender plays, need to have a VAWG context

Work with schools and colleges - commission out RSE service.

Education is key, help young children to understand what British law says about adults trying to engage in sex with children so they know it's wrong and how they can get help to stop sexual interference by adults or other ages, family or stranger.

For Children and Young People is imperative that children and young people are supported to health clinic like sexual clinics to get this service when it's needed for them at a time when they may require the service and can also be easily accessible in contacting.

Bystander Intervention programme Not enough information to make a judgment

I don't know what Bystander Intervention is but the name sounds right for much of our society. My qualified approval of the concept.

Consideration should be given to The Bystander Intervention Programme being delivered in all educational settings (Secondary, Colleges, 6th Form Centres and University) and not just Universities

More information and training awareness is required on the Bystander Intervention programme¹ before it can be rolled out.

RSE needs to be updated in the schools, youth clubs and sports clubs

Better sex education across all organisations

The age appropriate content is very important as much of what is reportedly taught to children in some schools does not seem age appropriate and contains adult content. support and training for foster carers will support this

This is so key, if we can promote effective sexual health education at schools then it will pave the way for other services for this demographic later on.

Child friendly genetic literacy education around risks and mitigations to be delivered in school as part of the curriculum and access to support services made available

RSE is needed and support to schools and colleges. BUT... We can't leave teachers to do it all, they are often not trained, lack experience to do this and lack confidence too. Also for young people their teachers doing this work are the wrong people. Outside RSE is often better. BUT... RSE external providers should have consistent standards though and your strategy could have a role in ensuring that all RSE is 1. NOT victim blaming and instead puts responsibility on those who harass, abuse, pressure to change; 2. Supports correct messages re consent; 3. Offer challenges to males who don't treat females right and perpetuate sexism/misogyny and safe spaces for them to share their views, explore, change and also share where these views may have developed (e.g. in response to what they have seen in porn, in response to what the adults around them have modelled about relationships and in response to what they may have witnessed/been subjected to at home-e.g. domestic abuse in home. This gives proper chances for behaviour to be changed and better relationships to be developed. Girls also need space to discuss what is consent, health relationships, red flags etc. Both need to be informed and supported to call out sexual harassment, red flags, sexual abuse, domestic abuse, so called "banter" which is sexist and derogatory etc.

It was nice to have a [drop-in] clinic available [in certain schools] because we could talk to the school and talk to social workers who were attached to the school, not just from a contraception and sexual health point of view but also from a safeguarding point of view... Teenage pregnancy rates within those schools did drop significantly once these services were put in place.

Better education around the diagnosis and management of PCOS and sexual health from early teens. Affecting 1 in 10 females. See <https://daisypcos.com/>

HIV:

Young people and children with HIV, must be recognised as a distinct group. Growing up with HIV presents a unique set of challenges and experiences, different from any other cohort living with HIV. In the UK, as of 2019, levels of viral suppression were lowest for individuals aged 15-24 and about a third of all young people will experience virological failure within two years of beginning treatment. Such statistics highlight the need to continue to focus on improving HIV care, treatment, and education for young people both in the UK and abroad. The cohort of young people (under 25s) living with HIV is among the most marginalised of groups of people living with HIV

In order to fully support children and young people living with HIV, it is important that the following are taken into consideration alongside the points previously regarding a reduction in stigma and discrimination and accessible mental health support:

Young people living with HIV must be given autonomy to manage their own care by healthcare professionals. Children and young people should be better supported as they

transition to adult services, this includes the need to ensure continuity in healthcare professionals. Moving from paediatric to adolescent and adult clinics presents a range of complex challenges as young people adapt to new medical teams, changing routines and unfamiliar environments. Challenges relating to daily medicine adherence are common at this time. Patients who switch from paediatrics to adult HIV care have an increased risk of being lost to follow-up which increases the risk of treatment non-adherence.

Appendix 5 – Sexual Health Strategy Consultation: ‘You said, we did’

Area	You said	We did
Language	Issues were raised around the expression unwanted pregnancies.	Changed the term ‘unwanted pregnancies’ to ‘unplanned pregnancies.’
	Feedback was that building resilience may not be the most suitable name for the theme and may be stigmatising.	Changed the name of Theme 3 from ‘Building Resilience’ to ‘Healthy Sexual Behaviours’
Key themes	Older people were identified as a possible gap throughout the strategy.	We added ‘Older Adults’ as a priority group under Theme 1.
Priority Groups	Challenges in providing the service to the homeless should be addressed by reviewing outreach and multi-disciplinary working.	Added this into the Action Plan in theme 1, around homeless people and rough sleepers being a priority group.
	Better integration of sexually transmitted infection (STI) and contraceptive advice as an important aspect of prioritising women who may be at risk.	Added this as a key aim and outcome under theme 1.
Reducing rates of STIs	Accessible, walk-in clinic 7-days a week are essential.	7-days a week may not be feasible, but we have included in the Action Plan ‘To introduce accessible walk-in clinics, including out of hours service.’
	Opportunistic sexual health screening and uptake of PrEP could be increased if practitioners knowledge of the motivation of different client groups is increased.	Adding to the Action Plan under theme 2: ‘Build on practitioners’ knowledge of the motivation of different client groups (e.g. gay men, trans people and those with gender dysphoria) for attending clinic to increase opportunistic sexual health screening and uptake of PrEP’
Reducing unplanned pregnancies	This requires removing barriers to accessing pregnancy tests.	An aim and outcome was added of removing barriers to accessing pregnancy tests.
	Increasing access to long-acting reversible contraception (LARC) and emergency contraception with guaranteed confidentiality.	In the action plan we adding an action surrounding providing guaranteed confidentiality for those accessing contraception.
Building resilience	Relationships and Sex Education (RSE) is essential and could also combat the unwanted? norms of abuse in relationships	We have added to the action plan to utilise RSE as an essential tool to educate on healthy and consensual relationships.
	Important is specialist support for schools and colleges and the use of appropriate and novel media, such as social media sites and billboard on buses/bus shelters.	We have adding the action plan using enhance the use of appropriate and novel media.
Children and young people	Services and pathways tailored to the needs of vulnerable groups (i.e., under 13s, young sexual assault victims, children in care, or foster homes).	This has been identified as a priority in the Action Plan.

	<p>Clinics in Schools, such as lunchtime drop-in clinics achieved through collaboration with schools, school nurses and pastoral teams is a potential solution for young people unable to attend standard clinics and could provide safe spaces for identifying safeguarding issues.</p>	<p>We have included in the action plan, actions surrounding developing safe spaces/locations in schools and other community spaces where young people can discuss any concerns.</p>
	<p>Concerns around the development of an under 13s service. This related to the view that sexual health services are for the population that are legally able to consent to sexual activity. It was felt that support to underage children should clinically fall to Paediatric services. It was also fed back that this would trigger safeguarding alerts that need to be reported to the correct safeguarding agencies.</p>	<p>We have changed this action to develop an age-appropriate pathway for this group with all relevant stakeholders e.g., police, safeguarding teams, mental health support.</p>

Birmingham City Council

Report to Cabinet

16 May 2023



Subject: ACIVICO FURTHER CONTRACT EXTENSION

Report of: Paul Kitson - Strategic Director of Place, Prosperity and Inclusive Growth

Relevant Cabinet Member: Deputy Leader, Cllr Brigid Jones

Relevant O&S Chair(s): Councillor Akhlaq Ahmed, Chair of Resources O & S

Report author: Steve Sandercock – Assistant Director (Procurement)
Philip Nell – Director (Property, Investment and Inclusive Growth)

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011347/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 This report seeks to further extend the contractual relationship between the Council and Acivico (DCFM) Ltd regarding the delivery of design, construction, and facilities management services and Acivico Ltd regarding the delivery of building consultancy services for a further period of two more years to 31 March 2025. Both contracting parties with the Council are referred to as Acivico.
- 1.2 During the extension period the Council will work with Acivico to review future delivery options and, subject to the outcomes, review and amend the contract terms to ensure the contract delivers value for money.

2 Recommendations

That Cabinet:

- 2.1 Approves a further extension, from 1 April 2023 to 31 March 2025, to the contracts between the Council and Acivico (DCFM) Ltd regarding the design, construction and facilities management services and Acivico Ltd regarding the building consultancy services.
- 2.2 Authorises the City Solicitor and Monitoring Officer (or their delegate) to negotiate, execute and complete all necessary legal documents to give effect to the above recommendation.
- 2.3 Notes that a full review / restructure of the relationship with Acivico needs to take place well before the expiry of this proposed contract extension in March 2025 and an update to Cabinet be provided by November 2023 providing a comprehensive plan (including milestones) on when and how this will be progressed.

3 Background

- 3.1 Acivico was set up in 2012 to provide the following services to the Council: Professional Services for design and construction services and facilities management relating to the Council's corporate estate along with the separate arrangement for Building Consultancy Services.
- 3.2 As a Teckel company, i.e. a wholly owned company by the Council to provide services back to the Council via a service contract, the Council is within its rights to award work direct to Acivico without the need to tender those defined activities for which Acivico was established to provide.
- 3.3 It is recognised that at various times and for a variety reasons the relationship between the Council and Acivico has been challenging around how the contract has performed.
- 3.4 In December 2018 Cabinet approved a number of recommendations, including:
 - 3.4.1 the Council remain a shareholder of the Acivico Ltd company for the foreseeable future
 - 3.4.2 support the establishment of a new brand entity and company structure, that will take the place of the current Acivico company, enabling a fresh infrastructure upon which a new Business Plan, within new governance arrangements and contractual frameworks;
 - 3.4.3 the Council provides a new three-year contract, (under the Teckal rules), for the core services outlined in the business plan, with the intention that the Teckal rules will no longer apply at the end of the three-year term, as the company will be sufficiently established to compete for business in the open market;
 - 3.4.4 the service areas not included within the core services outlined in the business plan (cleaning and Birmingham City Laboratories) are returned to the Council

as soon as is practicably possible, where further commissioning work will need to be undertaken to determine the future for these services,

3.4.5 the Council establishes evidence-based commissioning strategies for the services delivered by the company.

3.4.6 the Council enhances effective governance controls for the oversight of the company and the services in the future (Shareholder/Contract/Commissioner) that have clear roles and responsibilities defined and processes in place for day to day operation of the various roles the Council holds. This includes aligning the Company's Board to the Council's Group Company Governance Committee (the Shareholder governing body) and clearly distinguishing the contract management and commissioning functions within the Council;

3.4.7 Cabinet reverses its decision taken in June 2017 to outsource DCFM work for the reasons given above and;

3.4.8 delegated authority is provided to the Deputy Leader and Corporate Director for Finance and Governance, in consultation with the Cabinet Member for Finance and Governance, to agree any relevant procurement strategies and contract variations and new terms, associated with the implementation of the recommended approach in this report.

3.5 With the original contract due to expire in October 2019 a Delegated Award Report was approved to extend the DCFM Agreement existing agreement up 31 March 2020 in order to enable the contractual matters for the new Contract to be resolved and formalise the new contractual arrangements (see Appendix B).

3.6 The new contract therefore was to run from 1 April 2020 to 31 March 2023.

3.7 Work was in place prior to March 2020 to formalise the contract but was impacted by delays between the legal discussions on design a new contract coupled with organisational changes both within Acivico and the Council.

3.8 However, the new 3-year contract under the original terms commenced April 2020, with a draft contract produced but without that contract being executed at the time of the commencement. This has remained the position during this time and in effect the contract has been a contract by conduct between the parties.

3.9 In this situation the contract was an extension of the original contract and as such binding by virtue of a party's acceptance by conduct with the contract formed partly written, partly oral and partly by the implied by behaviour.

3.10 There is no one single reason around why the contract has not been formalised but a combination of factors as described in the paragraphs below.

3.11 It is noted that during the initial period of the contract attention was focused on elements of COVID response which diverted resources, this was then further compounded by gaps and changes in key personnel across both parties, capacity

demands due to organisational changes within key service areas e.g. Corporate Procurement Service restructure, delays in establishing overall directional change around Corporate Landlord Programme, and priority of actions being allocated to re-establishing the strategic relationship.

3.12 The above reasons have also impacted on not yet establishing a clear strategic outcome for future needs been established.

3.13 There have also been other interdependences which have further restricted the ability to advance some of the more strategic elements around what the Council needs in operational practice for future needs, including the Corporate Landlord programme to move towards corporate model for its built assets.

3.14 The Council's Corporate Landlord Programme remains a key interdependence around the ongoing services delivered under the contract.

3.15 Both the Council and its company are committed to working through a programme of improvements aiming to optimise the relationship and maximise the benefits to BCC as a shareholder as well as the positive impact of the arrangement to the communities of Birmingham and note that there is further work to do, which includes:

3.10.1 Reviewing future delivery options for current services provided by Acivico through the contract.

3.10.2 Reviewing and any necessary update of the governing documents (including the Articles of Association).

3.10.3 Reviewing and update of contract and associated performance metrics.

3.10.4 Conducting an up-to-date Value for Money test on current arrangements and any necessary performance action plan. This would likely include looking to benchmark and review Acivico fee structure to ensure it is updated, it includes an agreed methodology for an annualised increase, and works well for both.

3.10.5 Setting out any necessary growth / business plans and ensure that these are in line with the governing documents.

3.10.6 Providing a further update report to Cabinet on above and any longer-term considerations.

3.16 Since the start of 2022 focus has been on re-establishing the strategic relationship between Acivico and the Council, and activity has included:

- a. Benchmarking prices around rates
- b. Engagement review of working practices with Acivico and works contractors appointed on the supporting framework
- c. Performance review meetings being carried out

- d. Monthly Strategic Client meeting with senior stakeholders from both the Council and Acivico and improved relationships in how the arrangement is working
- e. Ongoing work to gain a clearer understanding on specific performance matters with an aim to improve operational efficiency across the arrangement
- f. Acivico have set up a separate trading arm for securing additional external income

3.17 It is however noted that with the existing arrangement now expired on the 31 March 2023 there is a need to seek authority from Cabinet to further extend the formal relationship and to afford sufficient time to achieve the outcomes listed, this report seeks to do that with an additional contract extension to 31 March 2025.

3.18 As with the earlier Delegated Award Report there are no additional cost implications in respect of this report as spend would be in line with budget to undertake the necessary activities direct to Acivico.

4 Options considered and Recommended Proposal

- 4.1 There are no practical alternative short-term options given that the services performed by Acivico are required and that it is a Teckal company.
- 4.2 In line with original report of December 2018 longer term strategic options could include
 - a. Insource and return all service to the Council.
 - b. Continue to reshape the existing arrangements to meet new and emerging needs
 - c. Outsource the services either through competitive tender or sale of Acivico as a company
- 4.3 Each option will have different risk considerations which will need to be taken into account including the need to understand the cost implications, timescales, people and legal implications. One common theme is that any change will have a significant resource impact to transition from current status quo.

5 Consultation

- 5.1 Officers from Corporate Procurement Service, Legal Services, Capital Finance / Finance Service and Place, Prosperity and Inclusive Growth Directorate have been engaged in development of this report along with consultation with Acivico and the Cabinet Member for Finance and Resources.
- 5.2 The Group Managing Director of Acivico Ltd, has been engaged in the development of this proposal, along with members of the Senior Leadership Team of the company.

6 Risk Management

- 6.1 At this stage the main risks associated is the administrative aspects of resolving the formal contract, which this report seeks to do.
- 6.2 Changes to personnel, demands and capacity will remain a risk but will look to be mitigated as part formalising the programme to manage this change.
- 6.3 Further risks beyond this will be the necessary strategic review work to ensure that the continued operation of Acivico as a Teckal is the correct value for money outcome for the future.

7 Compliance Issues:

- 7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?
 - 7.1.1 The recommended decision is consistent with the Council's policies, plans and strategies. This delegated award report seeks to build on the earlier Cabinet approvals of the recommendations contained within the December 2018 report.

7.2 Legal Implications

- 7.2.1 There are no legal implications arising from this decision. As a wholly owned company, the Council is permitted, under the Public Contracts Regulations 2015, to directly place work with Acivico. The current Acivico contract does not restrict the number or term of the extensions that may be applied to it.

7.3 Financial Implications

- 7.3.1 Spend is likely to be within previous spending levels and aligned to relevant budgets, therefore no additional financial implications are anticipated arising from the extension. Spend during 2022/23 was:

- 1 BCC spend with DCFM from 01/04/22 to 24/03/23 was £17,103,956.60
- 2 BCC spend with BC for the same period was £1,700,791.59
- 3 Total spend £18,804,747.19
- 4 The above does not include Birmingham Children's Trust and it is based on invoiced amounts.

7.4 Procurement Implications (if required)

- 7.4.1 There are no procurement implications arising from this decision for the reasons stated under paragraph 7.2.1 above

7.5 Human Resources Implications (if required)

- 7.5.1 None

7.6 Public Sector Equality Duty

- 7.6.1 There are no PSED considerations to undertake at this time

8 Appendices

8.1 None

9 Background Documents

Public Cabinet report Dec 18

Delegated Award Report Oct 19

Birmingham City Council

Report to Cabinet

16 May 2023



Subject: OFSTED INSPECTION OF BIRMINGHAM CITY COUNCIL
LOCAL AUTHORITY CHILDREN'S SERVICES - 20
FEBRUARY TO 3 MARCH 2023

Report of: Sue Harrison, Director Children and Families

Relevant Cabinet Member: Cllr Karen McCarthy, Children, Young People & Families

Relevant O &S Chair(s): Cllr Kerry Jenkins, Education and Children's Social Care

Report author: Seamus Gaynor, Head of Executive, Birmingham
Children's Trust
Seamus.Gaynor@birminghamchildrenstrust.co.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, add Forward Plan Reference:		
Is the decision eligible for call-in?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 To share the findings of the February/March 2023 Ofsted inspection of children's services.
- 1.2 Ofsted has determined that in all areas inspected, services in Birmingham are Good. This overall judgement comprises four graded judgements, each of which was graded 'good'.

- the impact of leaders on social work practice with children and families.
- the experiences and progress of children who need help and protection.
- the experiences and progress of children in care.
- the experiences and progress of care leavers.

1.3 Ofsted found that:

“Since the last inspection in 2018, much progress has been made by Birmingham City Council and Birmingham Children’s Trust in improving the experiences and outcomes of their children. Children are now safeguarded through effective ‘front door’ arrangements, thorough child protection assessments and a strong response to safeguarding children at risk of exploitation. Children are supported at an early stage to remain in their families where possible. When intervention is required to protect children, it is proportionate to risk and need. When children need to come into care, their needs are met well in appropriate placements. Some children spend too long in stable placements awaiting the appropriate change in legal status to secure their permanence. Care-experienced young people benefit from a strong corporate commitment and ambition to enable them to fulfil their potential in life. Personal advisers develop supportive and encouraging relationships with young people, though for some, the earlier involvement of a personal adviser would help in their preparation for adulthood. Children in care and care-experienced young people are genuinely listened to and actively engaged in recruitment, staff training and service development. Despite significant trust investment and partnership engagement, response to domestic abuse is not proportionate to demand in the city.

Effective performance reporting and quality assurance arrangements help to ensure that leaders have a clear understanding of emerging themes and trends in practice, to which they quickly respond. Good recognition of the diversity of the population is evident throughout the overall strategic ambitions for the city and is reflected in services and support for children and families.”

1.4 Ofsted found that the following areas need to improve:

- the effectiveness of the response to domestic abuse.
- earlier pre-birth assessments to support early permanence planning, and the timely realisation of permanence plans and legal status for children in stable placements.
- earlier engagement of personal advisers for children leaving care.
- consistency of written plans.

1.4 An action plan will be drawn up to respond to the areas identified for improvement.

2 Recommendations

2.1 Cabinet is asked to note the content of Ofsted’s report which was published on 18 April 2023 and is attached to this report.

3 Background

- 3.1 Birmingham's children's services were judged by Ofsted as 'Inadequate' from 2008-2018. A full inspection in December 2018 judged services as 'Requires improvement to be good'.
- 3.2 A full inspection took place from 20 February 2023 to 3 March 2023, the outcome of which was that services are now judged to be 'Good' in all areas.

4 Options considered and Recommended Proposal

- 4.1 Not applicable.

5 Consultation

- 5.1 Not applicable.

6 Risk Management

- 6.1 Not applicable.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

- 7.1.1 Ofsted's findings that children's services are 'Good' supports the delivery of the Council's priorities as set out in the Birmingham City Council Plan 2022:
- Birmingham is an aspirational city to grow up in - we will improve protection of vulnerable children and young people (including those with Special Educational Needs and Disability).
 - Birmingham is an aspirational city to grow up in - we will inspire our children and young people to be ambitious and achieve their full potential.

7.2 Legal Implications

- 7.2.1 Birmingham children's services were inspected in line with the framework for inspecting local authority children's services (ILACS).
- 7.2.2 Birmingham Children's Trust was established in 2017 as a wholly owned company of Birmingham City Council following formal intervention by the Department for Education. The Trust delivers statutory Children's Social Care services on behalf of the Council through a commissioning arrangement and formally commenced operations in April 2018.

7.3 Financial Implications

- 7.3.1 Not applicable.

7.4 Procurement Implications (if required)

7.4.1 Not applicable.

7.5 Human Resources Implications (if required)

7.5.1 Not applicable.

7.6 Public Sector Equality Duty

7.6.1 Not applicable.

7.7 Environmental and Sustainability Implications

7.7.1 Not applicable.

8 Appendices

8.1 Ofsted report: Inspection of Birmingham City Council local authority children's services 20 February to 3 March 2023.

9 Background Documents

9.1 Ofsted letter of Notification for the ILACS Standard Inspection of Birmingham 13 February 2023.

Inspection of Birmingham City Council local authority children's services

Inspection dates: 20 February to 3 March 2023

Lead inspector: John Roughton, His Majesty's Inspector

Judgement	Grade
The impact of leaders on social work practice with children and families	Good
The experiences and progress of children who need help and protection	Good
The experiences and progress of children in care	Good
The experiences and progress of care leavers	Good
Overall effectiveness	Good

Since the last inspection in 2018, much progress has been made by Birmingham City Council and Birmingham Children's Trust in improving the experiences and outcomes of their children. Children are now safeguarded through effective 'front door' arrangements, thorough child protection assessments and a strong response to safeguarding children at risk of exploitation. Children are supported at an early stage to remain in their families where possible. When intervention is required to protect children, it is proportionate to risk and need. When children need to come into care, their needs are met well in appropriate placements. Some children spend too long in stable placements awaiting the appropriate change in legal status to secure their permanence. Care-experienced young people benefit from a strong corporate commitment and ambition to enable them to fulfil their potential in life. Personal advisers develop supportive and encouraging relationships with young people, though for some, the earlier involvement of a personal adviser would help in their preparation for adulthood. Children in care and care-experienced young people are genuinely listened to and actively engaged in recruitment, staff training and service development. Despite significant trust investment and partnership engagement, response to domestic abuse is not proportionate to demand in the city.

Effective performance reporting and quality assurance arrangements help to ensure that leaders have a clear understanding of emerging themes and trends in practice, to which they quickly respond. Good recognition of the diversity of the population is evident throughout the overall strategic ambitions for the city and is reflected in services and support for children and families.

What needs to improve?

- The effectiveness of the response to domestic abuse.
- Earlier pre-birth assessments to support early permanence planning, and timely action to progress permanence plans for children in stable placements through changes to legal status.
- Earlier engagement of personal advisers for children leaving care.
- Consistency of written plans.

The experiences and progress of children who need help and protection: good

1. Since the inspection in 2018, Birmingham Children's Trust and partners have developed and implemented strong early help services for children and families. Children and families benefit from an effective early help offer, with services that support them at the lowest level of intervention. Children receive a timely and thorough assessment of their needs that leads to effective plans that improve their experiences.
2. Concerns about children who need help and protection receive a timely and effective response from the Children's Advice and Support Service (CASS). Clear management oversight guides workers as to immediate actions. When there are safeguarding concerns, parental consent is appropriately dispensed with. Family history and targeted safeguarding checks inform decisions on next steps. Managers mostly apply the right thresholds, with timely progression to the appropriate service, with a clear rationale for intervention. However, the quality of information from education does not always contribute effectively to decision-making in CASS. Leaders have responded during the inspection by committing additional education resources.
3. Many children who experience incidents of domestic abuse through parental conflict are triaged by the police acting as a single agency, before being referred to social care. Police make decisions on next steps without full consideration of partners' information. This means that the trust cannot be assured that the needs and risks for children experiencing domestic abuse are fully understood. During the inspection, leaders have put in quality assurance measures in response to this.

4. The emergency duty service responds to children's needs in a timely and proportionate way. The service interacts and aligns with daytime and weekend services, with effective handover arrangements to daytime services.
5. When children are identified as being at risk of harm, there is an effective response through timely child protection strategy meetings, which are overseen well by managers and result in clear actions. An education representative or sufficient information from schools is not routinely available, resulting in decisions being made without full information. Leaders have acknowledged this and taken action to ensure that appropriate representation and information are now available.
6. Child protection assessments provide a clear analysis of risks. Children are seen quickly when risks are identified. Views of children, parents and professionals are sought to inform assessments and, as a result, child protection enquiries are thorough and lead to children receiving the right level of support.
7. Children and families benefit from the timely allocation of social workers, who commence assessments promptly. The views of children and adults are threaded throughout the assessment. Strengths and protective factors are clearly identified and inform analysis and appropriate decision-making. Management oversight consistently informs next steps.
8. The threshold to proceed to initial child protection conferences is appropriately applied. Most conferences include key agencies and have a balanced focus on risks and strengths.
9. The quality of child protection and child in need plans is inconsistent. When they are stronger, written plans consider children's needs well and include their wishes and feelings. However, the inconsistent recording of the plans makes it difficult to understand how progress is monitored, as actions are not always timebound. Families would find it difficult to follow some plans without support. Safety planning is routinely considered but is inconsistently recorded and is sometimes ambiguous, and therefore difficult for families to understand.
10. Core groups and child in need meetings are held regularly and review progress against children's plans. For most meetings, the relevant professionals attend and contribute to effective decision-making. Family group conferences are routinely held and result in plans that are effective and supportive, helping children to remain in their families.
11. For a small number of children suffering long-term neglect, social work visits and management oversight are less impactful, and children remain in neglectful situations for too long. Leaders have recognised this and have implemented a new neglect strategy in response. It is too soon to see the impact of this.

12. The quality of practice and management oversight for progressing children through the pre-proceedings stage of the Public Law Outline (PLO) has improved since the last inspection. However, some children experience drift and delay in how quickly their plans are progressed, and actions often remain outstanding for too long. Senior leaders have recognised the shortfalls in pre-proceedings practice and have strengthened the service with additional resources and improved monitoring systems. However, this has not yet had a demonstrable and consistent impact for all children.
13. For unborn children who are at high risk of coming into care, planning for permanence does not routinely start at the earliest opportunity. Pre-birth assessments are of good quality but are not always commenced in a timely way, leading to delay in securing the right legal framework to protect children. Some babies are placed in foster care rather than being matched with early permanence placements. This means that some babies are not always provided with stability and security at the earliest opportunity.
14. Social workers know their children well and develop strong relationships. Children are regularly seen in line with presenting needs. Children's experiences, diversity and cultural needs are explored through creative direct work as well as meaningful conversations to inform interventions.
15. Disabled children who receive help and protection mostly receive an effective service. Social workers and staff from partner agencies understand the needs and risks of these children. Assessments and plans are detailed and purposeful, with the views of children and families consistently recorded. Children's plans are progressed through meetings that are well attended by partner agencies. Some social workers are trained in alternative methods of communication so they can confidently connect with disabled children and ensure that their wishes and feelings are gathered during visits.
16. Once children are identified as being in a private fostering arrangement, they are visited and assessed in a timely way. Children's views are consistently heard, and social workers ensure that they are safe and settled where they live.
17. When children aged 16 or 17 present as homeless, they are quickly responded to by workers from the homelessness team. A clear and effective protocol between advisory services, housing and social care provides an immediate response to children, ensuring that initial safeguarding issues are addressed. While some children become looked after, it is not clearly recorded that all are fully informed of their accommodation rights.
18. Children who are at risk of criminal and sexual exploitation are supported effectively through a specialist team, EmpowerU. Daily multi-agency meetings ensure that immediate steps are taken to address risk. When children are assessed as at high risk, disruption and child protection strategy meetings are quickly held and actions are identified to try to mitigate risks. Safety plans and

risk assessments are updated regularly, with interventions having a positive impact on children and reducing risks. When children go missing, social workers in EmpowerU review episodes of going missing and conduct return home interviews to engage children in understanding risk factors.

19. There are effective systems in place to check that pupils' welfare is safeguarded. Pupils who are missing from school are tracked and agencies share concerns at the earliest opportunity. However, at times, the range of recording systems can get in the way of rapid understanding of a child's experience.

The experiences and progress of children in care: good

20. Children enter care in a timely manner and when it is in their interests to do so. Decisions for children to come into care are appropriately overseen by a senior manager. There is a clear rationale and children reviewing their records would understand why decisions were made about them.
21. Children's identity needs are well considered when seeking an appropriate placement match. Careful consideration is given to sibling relationships, with effective together or apart assessments helping to determine appropriate placement needs. This enables children to live with their brothers and sisters when it is in their best interests.
22. Children are encouraged and supported to keep in touch with important people in their lives. Family-time arrangements are in line with children's needs. Social workers reassess arrangements when circumstances change, or children express views of not wishing to see parents.
23. Thorough court social work assessments are reducing the need for the number of expert and independent social worker assessments. This is contributing to improved timescales and, as a result, decisions about children's long-term plans are made sooner.
24. Most care plans are appropriate and in line with children's needs. They are reviewed effectively by independent reviewing officers and children are encouraged and assisted to attend their review. Children's wishes and feelings are well considered and integrated into care plans, for example, their wishes around family time.
25. Children leave care to return to their families when it is right to do so. Timely and purposeful parenting assessments are undertaken to ensure that it is safe for the child to return home. This allows children to be supported to live with their families whenever this is possible and in their best interests.
26. Very few children in care are placed at a distance from their local area. Where this is the case, children are mainly in very stable long-term placements with

connected carers. These children progress well in the care of their wider families.

27. For many children in care who live with their parents or with connected carers, there are delays in progressing special guardianship applications and the discharge of care orders, sometimes many years after it is clear that these are stable long-term placements. There is a lack of effective management review of these children to ensure that the drift and delay is addressed. This means that some children do not have the opportunity for legal permanence when the time is right for them and, in some circumstances, children remain subject to statutory social work intervention for longer than is necessary.
28. For children who are placed at home with their parents on care orders, parenting assessments are not routinely reviewed and updated to ensure that their care arrangements remain appropriate and continue to meet their needs.
29. Children in care benefit from stable relationships with their social workers, who visit them regularly and in line with their needs. Children benefit from age-appropriate direct work, which helps workers to gain their views and helps children understand their family history and experiences. Children's voices are evident in case recordings and the child's wishes are acted on when appropriate.
30. There are several forums and panels for children and young people to participate and engage with the corporate parenting board and senior leaders. The voice of children and young people is well embedded, influencing wider practice and service development. For example, consultation with young people on what makes a good and stable relationship has influenced the trust's practice model and standards.
31. When children go missing from care, there is an effective response and pertinent information is shared. However, a small number of children are not offered timely return home interviews to ensure that risks are understood at the earliest opportunity.
32. Children's physical, emotional and mental health needs are well considered and most children in care make progress in their health and development. When children have additional needs, they are supported through prompt referrals to the therapeutic emotional support service (TESS), ensuring that the earliest interventions needed by children are offered promptly.
33. The virtual school (VS) has established and embedded effective links with schools, other council departments and a wide range of external partners. Care plans and personal education plans are well integrated. This means that those with oversight of any child work together very effectively to ensure that children can make good progress. Children in care are well supported by the VS for their next steps at all transition points.

34. Most children in care are living in appropriate homes that meet their assessed needs and where they are making progress. Most children benefit from stable placements. When there are difficulties between children and carers, care planning meetings are held and support is put in place to try to avoid placement breakdowns and children having to move.
35. A small number of children live with connected carers who are meeting children's needs but are not approved by fostering panel for reasons relating to concerns about their health, vulnerabilities or outstanding police or health checks. There is a lack of risk assessment and management oversight to ensure that children remain safe and supported in these arrangements.
36. There are a small number of children with complex needs in unregistered children's homes. The trust encourages providers to register with Ofsted, with whom they maintain routine dialogue on the progress of registrations. While concurrent searches take place, senior leaders and commissioning services seek to assure themselves that children's needs are met, through a high level of oversight of these placements.
37. Unaccompanied asylum-seeking children (UASC) are provided with suitable accommodation in a timely way. Social workers ensure that their immediate care and cultural needs are met. Children's health needs are quickly addressed through the New to the Country Clinic and children are offered support with their emotional well-being. Access to education is a priority, with many children attending English language courses. Children have access to an interpreter and are supported to get legal advice to help them understand their rights as a child in care and asylum seeker.
38. Managers have a good overview of the recruitment of mainstream foster carers and continue to recruit to offset the number of resignations. The trust is on target to recruit 30 mainstream foster carers this year. However, there has still been a decrease in mainstream foster placements available to children overall in this timescale.
39. Adopters are well prepared by the agency for the challenges that adoptive parenting can bring. Well-considered matching of children to their future families takes place in conjunction with the children's social workers. Adopters meet their children in a way that is focused on the needs of the child. Careful planning enables them to build meaningful connections with their children. This has resulted in few adoption breakdowns for children.

The experiences and progress of care leavers: good

40. Care-experienced young people benefit from personal advisers (PAs) who make time to develop strong and supportive relationships with their young people, understanding their lived experiences and their needs.

41. However, for most young people, PAs are not allocated soon enough, until close to their 18th birthday. Young people do not have access to the specialist expertise of the PA early enough to support early independence preparation. Once allocated to PAs, young people receive support to develop their independence skills.
42. Most young people have good access to their health records, are registered with a GP and can access health services as required. Those who need it are supported by TESS with emotional well-being and mental health needs until age 25. Young people's emotional well-being is routinely held in mind by PAs, who undertake skilled direct work where the young person is not ready to engage with other services. Specialist support is available for those with additional needs, such as the 'breaking the cycle' service for pregnant care leavers.
43. The local offer for care-experienced young people is comprehensive and is readily available in a range of formats. Care-experienced young people are familiar with the offer and appreciate the range of support it provides. PAs routinely share the offer and discuss it with young people but are always conscious of the need to ensure that young people fully understand their options and make well-informed choices.
44. Care-experienced young people are actively involved in a range of events, conferences and forums. These are a regular forum for providing information and exploring opportunities, but also for care experienced young people to showcase their achievements, meet up with others and feel valued.
45. Care-experienced young people who are parents feel particularly involved in contributing their voice. They feel that what they say is listened to and makes a difference, such as the development of a pregnancy pathway. They value participation opportunities as social events and feel less isolated as a result. They feel connected to senior leaders and feel part of a large family.
46. Accommodation options for young people are carefully considered with the young person's input and in their best interests. The majority are in suitable accommodation. However, for some young people as they turn 18, planning has not been effective in securing the right accommodation and a small number have had to move to placements less suitable in meeting their needs.
47. Care-experienced young people have up-to-date pathway assessments and plans that identify their needs and risks, which have actions that focus on improving the young person's outcomes. PAs are aspirational for their young people, encouraging them to set their goals high and helping them to try and achieve them.
48. Care-experienced young people benefit from PAs who have a good understanding of the risks they face and work with a range of agencies to

increase safety and reduce risk. Cultural dimensions to risk are understood, for example risk of trafficking and of forced marriage.

49. Most young people are in appropriate education, employment or training and they have longer-term aims and job ambitions they are working towards. Many benefit from the increasing range of apprenticeship opportunities open to them in the council, the trust and the local business sector, developing skills and helping them into permanent employment. PAs maintain dialogue with young people who are not in education, employment or training and proactively explore options with them, engaging other services as appropriate.
50. When unaccompanied asylum-seeker children leave care, they are well supported to access appropriate accommodation and employment, and to pursue their religious and cultural needs and legal rights.

The impact of leaders on social work practice with children and families: good

51. There are clear and effective governance arrangements between the council and the trust. The appointment of an experienced and permanent director of children's services (DCS) to the council in November 2021 has brought focus to improving those children's services delivered by the council. The chief executive and director of practice in the trust have a clear understanding of the main challenges they face and are working well with the DCS in meeting these. The trust has made strong progress in most areas which required improvement at the last inspection, and pace has been sustained through the pandemic and beyond. Political leaders give great priority to children in Birmingham. Despite the financial pressures the council faces, investment in strengthening services in response to increased demand is a continuing commitment.
52. There has been a positive shift in the quality and impact of partnership working between the council and the trust, along with other key strategic allies. This is particularly evident in the implementation of the early help strategy, with many more families receiving effective help at the right time. The response to exploitation through the EmpowerU service is a real strength.
53. Senior management oversight and arrangements to track progress of children's early permanence are not sufficiently effective. Legal oversight of some children escalated into the pre-proceedings stage of the PLO is not sought early enough to prevent drift and delay. Equally, too many children experience delay in the discharge of orders when successfully placed with their parents. During this inspection, leaders have acknowledged these issues and are making organisational and strategic changes aimed at ensuring greater focus and improved outcomes for these children.
54. The local authority and the trust have sought to develop the partnership response to the impact of domestic abuse on children and families. However,

this remains under-resourced to respond effectively to the increasing level of demand. Despite investment in several additional services and dedicated management oversight, the absence of important partner agencies in the initial triaging process and the absence of perpetrator programmes for high-risk offenders are known concerns for the trust. They are continuing to escalate their concerns about the impact of this gap in provision on the safeguarding of children.

55. The commitment to corporate parenting is a strength in Birmingham. A comprehensive work plan is overseen by an effective corporate parenting board. There are a wide range of forums and panels for young people to participate in, informing the ambitious and aspirational corporate parenting strategy.
56. Advocacy and mentoring arrangements for children and care-experienced young people are thorough and well promoted. This has helped to improve the quality and impact of the child's voice, for example in children in care reviews and family group conferences.
57. Leaders have an informed analysis of the placement needs of children in care and are responding effectively to the challenges in providing sufficient placements. Leaders adapt to new emerging issues promptly. For example, the unexpected significant increase in UASC numbers has been responded to effectively through the timely commissioning of relevant services.
58. The trust is developing a strong learning culture. The social work academy supports and trains a large cohort of newly qualified staff effectively. Staff have readily available access to appropriate training relevant to their areas of practice.
59. A well-embedded performance framework helps leaders to identify and respond to granular issues and trends in practice. Team managers are provided with detailed performance reports to help them ensure compliance with statutory work. Leaders are aware that the case recording system used in the trust needs further improvement to help improve data quality and enhance reporting.
60. Quality assurance arrangements are effective. Quarterly evaluations of practice inform training and service development. This is resulting in continually improving practice and services to children and families. Extensive auditing activity takes place, although more could be done to track the completion of recommended actions, demonstrating the impact on outcomes for individual children.
61. Most social workers have manageable caseloads, and all are very positive about working for the trust, feeling respected and valued by leaders. The positive organisational culture established in the trust is enabling the incremental development of a relationship-based, trauma-informed practice model to

permeate through the workforce. Supervision is held regularly, although it is not consistently effective in progressing children's plans and addressing drift.

62. Strengthening and stabilising the workforce is a priority for leaders in Birmingham. There is a comprehensive workforce development strategy in place. Internal structural changes have been made in the trust to maximize the impact of non-social work qualified staff in supporting families at an earlier stage of need, however, recruitment to such posts as PAs for care-experienced young people remains a challenge. There are strong and well-received internal processes for staff recognition, pay and rewards, helping to sustain staff retention.

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for children looked after, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

You may reuse this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence, write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

This report is available at <https://reports.ofsted.gov.uk/>.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: <http://eepurl.com/iTrDn>.

Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

© Crown copyright 2023

Birmingham City Council

Report to Cabinet

16th May 2023



Subject: STAYING INDEPENDENT AT HOME POLICY – MAJOR ADAPTATIONS AND KEY SAFE SERVICE DELIVERY

Report of: Professor Graeme Betts, CBE
Director for Adult Social Care

Relevant Cabinet Member: Cllr Mariam Khan - Health and Social
Cllr Yvonne Mosquito - Finance and Resources

Relevant O & S Chair(s): Cllr Mick Brown - Health and Social Care
Cllr Akhlaq Ahmed - Resources

Report author: Sarah Feeley,
Commissioning Manager
Email: sarah.feeley@birmingham.gov.uk

Timsey Deb,
Head of Service
Email: Timsey.deb@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011358/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1 Executive Summary

- 1.1 The report is seeking approval to extend the Major Adaptation and Key Safe Contracts to ensure that services can be provided to support citizens to remain living independently in their homes.

2 Recommendations

- 2.1 That Cabinet; -
 - 2.1.1 Approves the Waiver for the contract extensions as set out in **Appendix 2**.
 - 2.1.2 Approves a 7-month extension for current contracts for the provision of Key Safes and Major Adaptations as detailed in 7.4.2 - 7.4.4 for the maximum value of £6.372m.
 - 2.1.3 Authorises the City Solicitor (or their delegate) to conclude and enter into all legal documents to give effect to the above

3 Background

- 3.1 In March 2022 Cabinet approved the implementation of the Staying Independent at Home (SIAH) Policy which widened the use of the Disabled Facilities Grant and increased the range of assistance that can be provided to citizens.
- 3.2 The SIAH Policy has now been fully implemented and services are being delivered to ensure that citizens are supported to remain living within their own homes.
- 3.3 The Cabinet Report in March 2022 approved the delegation of the Procurement Strategy for a new service model. This report also outlined a range of contracts that required extension to ensure continuity of service delivery while the procurement of an integrated service was being developed. These were extended in line with the original procurement timeline detailed within the Cabinet report.
- 3.4 Additional due diligence and service development was required on the new service model being proposed which has impacted on proposed contract start date for the new service. This means that current services are due to expire before the new service commences.
- 3.5 The procurement for the new delivery model was launched on the 29th March 2023 with a closing date of the 23rd June 2023. Subject to a successful process it is anticipated that the new arrangements will be mobilised during November and December for a 1st January 2024 contract start date.

4 Options considered and Recommended Proposal

- 4.1 Do Nothing – do not extend the contracts. This is not recommended as there is a statutory requirement for the Council to provide adaptations through the Delivery of Disabled Facilities Grants.
- 4.2 Extend the contracts – this allows services to continue for the time required for the procurement exercise to be completed. This is the recommended proposal.

5 Consultation

- 5.1 The contents of this report were discussed at the Staying Independent at Home Programme Board on the 14th March 2023. The Board were supportive of the recommendations within this report.

6 Risk Management

- 6.1 The policy was developed through a robust project management programme that includes the management and identification of risks that are tracked as part of the project delivery. The current contracts will expire on the 30th June 2023 which means continuation of services could be impacted as any delivery would be outside of Council governance. This is also an increased risk that the instability of not having a contract could cause providers to not continue to deliver the services required.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

- 7.1.1 Birmingham is an aspirational city to grow up in – through the policy implementation this will give greater choice to citizens of all ages to be able to make a more informed decision about living at home with support to ensure home is a safe environment. This widens the options available to citizens to have greater choice when addressing their social care need.
- 7.1.2 Birmingham is a fulfilling city to age well in – by implementing the Staying Independent at Home Policy the Council will be able to support citizens to remain living as independently as possible within their own homes.

7.2 Legal Implications

- 7.2.1 The Housing Grants, Construction and Regeneration Act 1996 (HGCRA 1996) places a mandatory duty on the Local Authority to provide grants towards the costs of works required for the provision of facilities for people living with disabilities as defined in the Equality Act 2010.
- 7.2.2 Under Section 111 of the Local Government Act 1972, a local authority has the power to take action which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions and therefore has a general power to enter into contracts for the discharge of its functions. Section 93 of the Local Government Act 2000 gives the Secretary of State power to awarded grants to local authorities for expenditure incurred by them in the provision of welfare services determined by the Secretary of State.

7.3 Financial Implications

- 7.3.1 The cost of the proposed contract extensions detailed in 7.4.2 - 7.4.4 will be a maximum of £6.372m for 7 months and will be funded through the annual Disabled Facilities Grant that is received by the Council. There is no

additional funding required from the Council to support the extensions of the contracts.

7.4 Procurement Implications

7.4.1 The new service for Staying Independent at Home: Adaptation and Improvement Service is currently following a procurement process, with a tender return date of 23rd June 2023, and a proposed start date of the 1st January 2024.

7.4.2 The services that require a maximum 7-month extension until the 31st January 2024 are:

Key Safes

This service is currently provided by Black Country Housing Group and was extended previously in line with the original procurement timeline with a current expiry date of the 30th June 2023. With a proposed maximum value of £146,000.

Major Adaptations

This service is currently broken down into 2 lots as detailed below:

7.4.3 Lot 1 (lifting equipment) also extended in line with the original procurement timeline with a current expiry date of 30th June 2023. With a proposed maximum value of £1.226m. These extensions would be with:

- Able Access UK Ltd
- Dolphin Lifts Midlands Ltd

7.4.4 Lot 2 (bathrooms and kitchens) also extended in line with the original procurement timeline with a current expiry date of the 30th June 2023. With a proposed maximum value of £5m. The extensions would be with:

- 3MS Gold Services Ltd
- Able Access UK Ltd
- Bickford Construction
- Eden Adaptations
- Goodwells Ltd
- Hardyman Group Ltd
- John Gillespie Contractors Ltd
- Laker BMS Ltd
- S Kitaure Construction

7.4.5 In light of the details outlined in 3.3-3.5 the Council seeks to amend the contracts in accordance with the Public Contract Regulations (PCR 2015). Clause 72 of the Public Contract Regulations (72.1.bii) permits contract

modifications “for additional works, services or supplies by the original contractor that have become necessary and were not included in the initial procurement, where a change of contractor—

(ii) would cause significant inconvenience or substantial duplication of costs for the contracting authority, provided that any increase in price does not exceed 50% of the value of the original contract;”

- 7.4.6 Given that this arrangement is time-limited, and that the procurement process is underway the risk of challenge from other potential providers is considered to be minimal and outweighed by the risk of not having a continuation of service in place.
- 7.4.7 In order to further mitigate the risk, a Voluntary Ex Ante Transparency (VEAT) notice will be published notifying the market of our intention to extend these contracts.
- 7.4.8 The Contracts will be managed by the Multi-Disciplinary Team Manager within the Adult Social Care Directorate, supported by the Commissioning Manager as required.

7.5 Human Resources Implications

- 7.5.1 None

7.6 Public Sector Equality Duty

- 7.6.1 Through the continued delivery of the service the support and assistance will continue to be available to citizens.
- 7.6.2 See **Appendix 1** Equality Impact Assessment (EQUA1114)
- 7.6.3 The requirements of Standing Order No. 9 in respect of the Council’s Equal Opportunities Policy are incorporated in the Contract for those services proposed to be extended.
- 7.6.4 The requirements of the Equality Act 2010 are specifically included in the Contract to comply with, the Act.

7.7 Environmental and Sustainability Implications

- 7.7.1 All providers are aware with the Council’s aims for a Sustainable Birmingham, including how providers use equipment, materials and consumables which minimise environmental impact. This continues to be monitored through contract management processes that are already in place.

8 Appendices

- 8.1 **Appendix 1** - Equality Impact Assessment (EQUA1114)
- 8.2 **Appendix 2** – Completed Waiver Form

9. Background Papers

- 9.1 Cabinet Report 22nd March 2022 – Staying Independent at Home Policy – Widening the Use of the Disabled Facilities Grant (Key Decision Ref. No. 009964/2022)

Screening exercise

Protected characteristics: Marriage and Civil Partnership

Not Applicable

Marriage and civil partnership details:

Protected characteristics: Pregnancy and Maternity

Not Applicable

Pregnancy and maternity details:

Protected characteristics: Race

Not Applicable

Race details:

Protected characteristics: Religion or Beliefs

Not Applicable

Religion or beliefs details:

Protected characteristics: Sexual Orientation

Not Applicable

Sexual orientation details:

Socio-economic impacts

Please indicate any actions arising from completing this screening exercise.

Please indicate whether a full impact assessment is recommended

NO

What data has been collected to facilitate the assessment of this policy/proposal?

Consultation analysis

Services are required to ensure that citizens can continue to receive the support and assistance as described in legislation. This will be to ensure that provision is available during the procurement process for the new service model.

Adverse impact on any people with protected characteristics.

The continuation of services will ensure that citizens who meet the criteria for support and assistance will be able to do so. There are no identified adverse impact on citizens as a result of this proposal.

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

Not applicable as there are no identified adverse impacts as a result of the contract extensions.

How will the effect(s) of this policy/proposal on equality be monitored?

What data is required in the future?

Are there any adverse impacts on any particular group(s)

No

If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal

Consulted People or Groups

Informed People or Groups

Summary and evidence of findings from your EIA

The continuation of services during the

QUALITY CONTORL SECTION

Submit to the Quality Control Officer for reviewing?	No
Quality Control Officer comments	Continuation of existing service in advance of completion of tender process. No change in respect of equality impact.
Decision by Quality Control Officer	
Submit draft to Accountable Officer?	Yes
Decision by Accountable Officer	Approve
Date approved / rejected by the Accountable Officer	12/04/2023
Reasons for approval or rejection	
Please print and save a PDF copy for your records	Yes

WAIVER FORM

PROJECT / CONTRACT TITLE	Major Adaptations – Lot 1 (lifting equipment) Major Adaptations – Lot 2 (bathrooms and kitchens) Key Safes
PROJECT / CONTRACT REFERENCE NUMBER	TBC
DESCRIPTION OF CONTRACT (GOODS / SERVICES PROVIDED)	The delivery of major adaptations to citizens homes, including bathrooms, kitchens, extensions etc. The delivery of key safes – supply and installation.
SUPPLIER (where relevant)	Major Adaptations Lot 1 (lifting equipment) Able Access UK Ltd Dolphin Lifts UK Ltd Major Adaptations Lot 2 (bathrooms and kitchens) 3MS Gold Services Ltd Able Access UK Ltd Bickford Construction Eden Adaptations Goodwells Ltd Hardyman Group Ltd John Gillespie Contractors Ltd Laker BMS Ltd S Kitaure Construction Key Safes Black Country Housing Group
CONTRACT PERIOD	Current contracts expire on the 30 th June 2023
VALUE (£/p)	Major Adaptations Lot 1 – extension value £1.226m Major Adaptations Lot 2 – extension value £5m Keysafes – extension value £146,000
FUNDING SOURCE	Disabled Facilities Grant
DIRECTORATE	Adult Social Care and Health
SERVICE AREA	Commissioning – Strategy and Integration
SERVICE LEAD	Sarah Feeley / Aldin Kahrman

DIRECTOR	Graeme Betts	
HEAD OF SERVICE	Michael Walsh / Timsey Deb	
Please indicate the justification for a Waiver to the Procurement and Contract Rules		
i. Efficiency / expediency in relation to process:	Following the Rules in whole or part would not add value to the intended outcomes and would significantly impact the delivery of the Council Plan and priority outcomes. A Waiver would not compromise transparency and accountability.	
ii. Increased cost / loss of income:	Following the Rules in whole or part would likely result in increased costs or loss of opportunity.	
iii. Time constraints beyond the control of the Council:	Following the Rules in whole or part would create unreasonable time pressures to deliver outcomes required. In such cases this must not be through poor planning or lack of action by the Council to have created the time constraint.	
iv. Avoidance of reputational damage:	Failure to act promptly would have a serious, damaging and long-term impact on the reputation of the Council, that from a time perspective the Council cannot afford to be mitigated through a formal tendering process.	
v. Request for noting for transparency as a formal Breach of the Rules:	Noting outcome of formal Breach investigation and seeking to note in line with Waiver Approval procedure.	✓
Please provide details on reasons for applying for a Waiver		
<p>There has been significant time spent on developing a future service model as part of the implementation of the Staying Independent at Home Policy. The current contractual arrangements have been in place for a significant period of time, with limited provision available to improve services for the citizens of Birmingham. As part of the policy development was the procurement options for an integrated service model to improve the efficiency, speed, quality and delivery of the works to citizens homes. Additional due diligence was required to get all of the detail worked through with officials and therefore the original procurement timeline was not achieved. As the procurement has now been published the extension request is to ensure services can continue to be provided while the procurement is completed and new service model mobilised.</p>		
Which part(s) of the Procurement and Contract Governance Rules are being sought to be waived?		
<p>The proposal is to waiver 4.59 of the Procurement and Contract Governance rules in order to be able to then follow the negotiated procedure.</p>		
What implications, risk(s) or consequences would apply if a Waiver is not approved?		

<p>The risk of the waiver not being approved would mean that the council is not able to meet its statutory duty to provide major adaptations to citizens who are eligible for works through a disabled facilities grant. More importantly it would mean citizens are not supported to live within their own home safely, with the adaptations that would improve their outcomes.</p>			
<p>What longer term plans are in place to ensure compliant contractual arrangements will be established prior to the end of the contract awarded under Waiver?</p>			
<p>The procurement process for the Staying Independent at Home: Adaptation and Improvement Service is already underway and will close on the 23rd June 2023. The service being procured will be delivering all the services detailed within this waiver as well as some additional requirements.</p>			
<p>Other Comments</p>			
<p>DECLARATIONS</p> <p>I (the undersigned) declare that I have no conflicts of interest which would otherwise prevent my signature to this Waiver.</p>			
<p>Directorate Service Lead</p>	<p>Louise Collett</p> <p>Director Commissioning</p>	<p>Date</p>	<p>29/03/2023</p>
<p>Corporate Procurement Comments</p>			
<p>Given the slippage in the procurement timeline and the values of these contract extensions, then Cabinet approval is required to approve this Waiver.</p>			
<p>Name / Title</p>	<p>Mike Smith</p>	<p>Date</p>	<p>03/04/2023</p>

AUTHORISATIONS			
	DIRECTORATE SIGN OFF	CORPORATE SIGN OFF	Date
Over £5,000 up to £100,000	Assistant Director or Head of Service (in line with the Scheme of Delegations)	Relevant Head of Category (Corporate Procurement Service)	
Comment (if required)			
Name / Title			
Over £100,000 to £200,000	Assistant Director	Assistant Director (Procurement)	
Comment (if required)			
Name / Title			
Over £200,000 to £500k (revenue) or to £1million (capital)**	Director	Section 151 Officer in conjunction with Cabinet Member (Finance)	
Comment (if required)			
Name / Title			

**** Above these levels and/ or Key Decision and/ or where deemed required by the Cabinet Member formal sign off is required at Cabinet.**

Birmingham City Council

Report to Cabinet

16 May 2023



Subject: Affordable Housing - Sites for Disposal

Report of: Strategic Director for Place, Prosperity, and Sustainability
– Paul Kitson

Relevant Cabinet Member: Cllr Ian Ward - Leader of the Council
Cllr Sharon Thompson - Housing and Homelessness
Cllr Yvonne Mosquito- Cabinet Member for Finance and Resources

Relevant O &S Chair(s): Councillor Akhlaq Ahmed – Resources Councillor Saima Suleman – Economy & Skills

Report author: Kerry Scott Programme Director for Housing Delivery
Kerry.scott@birmingham.gov.uk
Anita Pearce – Interim Affordable Housing Delivery Project Manager
anita.pearce@birmingham.gov.uk

Are specific wards affected?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s): Bartley Green, Brandwood & Kings Heath, Bromford and Hodge Hill, Erdington, Soho and Jewellery Quarter, Moseley, Yardley East, Tyseley and Hay Mills		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 010451/2022		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential: Exempt Appendices 5 and 6 under paragraph 3. Information relating to the financial or business affairs of any particular person (including the council)		

1 Executive Summary

- 1.1 This report seeks to establish the principle for the sale of the Council's freehold or long leasehold (250 years) interest in identified surplus land to Registered Housing Providers and / or Developer Partners to deliver affordable housing depending on the circumstances for each transaction.
- 1.2 The report seeks to declare surplus to the Council's requirements the land listed in Appendix 1 and shown edged bold on the attached plans at Appendix 2, comprising circa 4.9 ha (12.1 acres) that can accommodate approximately 237 affordable housing units as identified in Appendix 1.
- 1.3 The recommendations contained in this report are fully in line with the Council's Housing Strategy 2023-2028 presented to Cabinet on 13th December 2022, that provides the strategic platform and direction for the Council to increase the number of affordable homes delivered by Birmingham Municipal Housing Trust (BMHT), but also through other partnership routes such as Registered Providers and / or Development and Contractor Partners. This strategy will provide much needed quality, energy efficient accommodation for the citizens of Birmingham and surrounding areas.
- 1.4 Options for the identified land assets have been fully considered and the recommended sale to Registered Providers / Developer Partners provides the best outcomes for the Council to deliver affordable homes at an accelerated rate.
- 1.5 Affordable housing takes many forms; affordable rent, shared ownership, subsidised market sale, rent to buy, key worker homes, and the more traditional social rent model are all examples of tenures that are defined as affordable housing. Different tenures need to be accelerated because one size does not fit all and we know from research that 54% of households are unable to afford market housing before subsidy. It is likely that the housing developed as a result of these land disposals will create affordable housing across a number of different tenures including social rent, affordable rent, rent to buy and affordable home ownership.
- 1.6 The definition of what is 'affordable' for households has been much debated within national policy impacting which parts of the community are able to access affordable housing. In the Housing Strategy 2023- 2028 the definition is kept wide to cover a range of household circumstances. The charity Shelter says affordable housing should cost no more than 35% of a household's income after tax and benefits. However the ratio between price and income does not consider household borrowing costs to acquire housing and, because such figures are calculated at an aggregate level, they do not reflect the distribution of housing affordability regionally.

2 Recommendations

- 2.1 That Cabinet approve the principle for the sale of the Council's interest in identified surplus land to Registered Housing Providers / Developer Partners to deliver affordable housing, either as single sales or a combination of packages for sale. Such sales to be either freehold or long leasehold for a minimum term of 250 years.

- 2.2 That Cabinet declare surplus to the Council's requirements the land listed in Appendix 1.
- 2.3 That Cabinet note the land assets have been identified from both the Council's General Fund & Housing Revenue Account (HRA) for sale to Registered Providers and / or Developer Partners to provide affordable housing across the city.
- 2.4 That Cabinet approve the sale of the land identified in Appendix 1 to Registered Providers / Developer Partners for the purpose of delivering affordable housing that is delivered to high quality standards including the minimum national space standards and the Council's planning policy requirements.
- 2.5 That Cabinet approve the principle of identifying surplus land where appropriate over the next 3 years (2023-2026) for both the potential disposal to Registered Providers / Developer Partners for the delivery of affordable housing and development as part of the Council's affordable homes programme.
- 2.6 That Cabinet delegate to the Strategic Director of Place, Prosperity, and Sustainability (or their delegate), in consultation with the Leader and the Cabinet Member for Finance and Resources, approval of the final transaction details for the disposal.
- 2.7 That Cabinet delegates authority to the Strategic Director for Place, Prosperity, and Sustainability, in conjunction with the Assistant Director Corporate Procurement (or their delegate), the Strategic Director of Council Management (or their delegate), and the City Solicitor & Monitoring Officer (or their delegate) to approve the procurement strategy and the award of contract, if required, for the appointment of an external professional adviser to support the sale process.
- 2.8 That Cabinet delegates to the Assistant Director of Housing Delivery authority to negotiate and finalise the disposal terms, subject to 2.6 above.
- 2.9 That Cabinet note the purchasers will pay a contribution towards the Council's surveyors and legal costs, to be determined on agreement of final sale terms.
- 2.10 That Cabinet authorise the City Solicitor and Monitoring Officer or appointed external advisors to prepare, execute, and complete all relevant legal documentation to give effect to the above.

3 Background

- 3.1 The demand for affordable housing across the city and surrounding areas is extremely high. With a higher than national average waiting list and increased numbers of families in temporary accommodation, it is a key priority and objective of the City Council over the coming years to accelerate affordable housing delivery.
- 3.2 The Housing Strategy 2023-2028 presented to, and approved by Cabinet on 13th December 2022, provides the strategic platform, and clear direction for the Council to increase the number of affordable homes. This statement of intent will afford the ability to deliver much needed high quality, energy efficient accommodation for the citizens of Birmingham and surrounding areas.

- 3.3 To achieve this key ambition at scale and pace, the Council will need to engage with key stakeholders and partners. This work is already underway with on-going discussions and forums with Registered Providers, Developer Partners, and Homes England. Through these discussions, it is clear all partners are keen to support the Council in their key objective to accelerate the delivery of affordable housing. Options of working together in joint ventures and partnerships have been discussed and provide opportunity to not just increase delivery of affordable homes, but also secure inward investment and Homes England grant funding into the City.
- 3.4 To help to support both the Council's and Registered Providers / Developer Partners ambitions, the disposal of surplus land through the disposal process identified in this report (i.e., marketing solely to Registered Providers / Developer partners) will increase the land supply to support the accelerated delivery of affordable housing. The sites identified for sale have been provisionally assessed in terms of planning compliance and viability, and subject to further due diligence and planning consultation, are considered suitable for residential development.
- 3.5 It is proposed the Council will benefit from being able to nominate new tenants into all new homes developed (called nomination rights) for a minimum of ten years.
- 3.6 It is proposed that sites will be released in tranches and available solely for sale to Registered Providers / Developer Partners for the delivery of affordable homes of varying affordable tenures.
- 3.7 Over the next 3 years (2023-26), it is the Council's ambition to provide affordable housing delivery partners with a pipeline of development opportunities. These sites will be sold for the delivery of affordable housing, providing the city with a range of tenures such as social rent, affordable rent and a variety of affordable home ownership products.
- 3.8 The delivery of affordable homes on the identified sites will assist the city in meeting its housing target (as detailed in BDP Policy PG1) of 19,400 additional affordable dwellings over the BDP period (2011 to 2031).
- 3.9 To inform and support this proposal, Savills have been appointed as external agents to provide valuation and property professional advice.
- 3.10 As there are no final known development proposals at present, an Environment and Sustainability Impact Assessment cannot be completed at this stage. Any development outputs arising from the recommendations of this report will be the subject of future reports and subsequent planning applications and consents, where Environment and Sustainability impact will be fully considered.

4 Options considered and Recommended Proposal

- 4.1 Option 1 - Do Nothing. The Council is not meeting the current demand for affordable housing through its existing delivery vehicle and needs to bring in additional providers to help meet the demand (90% of all new housing units would need to be affordable to meet current demand). Birmingham Municipal Housing Trust (BMHT) has developed a significant amount of affordable housing over recent years

however, through Right to Buy (approx. 600 homes per year) BCC have seen large losses of housing stock and will face a continual loss over the coming years. Therefore, do nothing is not an option as the demand is not being met and the Council would suffer reputational damage if it did not commit with this new approach of supporting the BMHT programme by developing additional affordable homes through this model. As part of the Housing Strategy the Council wishes to promote partnership working with Registered Providers (RPs) to exploit and accelerate the delivery of affordable housing through identifying suitable development land opportunities.

- 4.2 Option 2 - Development of some sites through a sale to Registered Providers to accelerate affordable housing delivery. The route of disposing of some of the Council's surplus land to Registered Providers and / or Developer Partners is just one of the key ways that the Council can accelerate the delivery of affordable housing. The success of BMHT has been significant, however there is now a need for a collective effort from both BMHT, RPs and /or developer partners to bolster the supply of affordable housing, moving away from having just one major player delivering one tenure type.

This route will enable stakeholders to secure additional inward private investment and Homes England grant into the city. It will also facilitate the ability to offer different tenure types such as Shared Ownership and Rent to Buy which are affordable products. Registered providers and their contractor partners have large development portfolios and a variety of different specialisms from sheltered housing to supported accommodation; their stock makes up just over 40,000 units in the city. The Council is already committed to be 'Open for Business' and has welcomed several partners and investors into the city. By accepting this recommendation, the Council will endorse its support to the approved Housing Strategy by providing a framework in which BMHT can work with partners, by providing a supply of land suitable for housing development which will bring additional affordable homes to the city.

- 4.3 Option 3 - Accelerate Development of sites by BMHT. This option would mean BMHT remains the only main affordable housing developer in the city. However, to meet the demand for affordable housing, the BMHT programme would need to be expanded and accelerated to accommodate the additional units required to meet demand. The challenges which are highlighted in Option 2 would also need to be overcome by BMHT – including additional tenure mixes that BMHT currently do not provide. Registered Providers are well practised in providing homes across a wide range of affordable tenure types; including shared ownership and rent to buy. Whilst BMHT continue to play a major role in the delivery of new homes; encouraging RPs to develop in the city through disposing of Council land to them improves the options available for citizens who need affordable homes. Continuing to operate using current systems will not meet the ever-accelerating demand and therefore this option is not viable. The reliance on BMHT being the only main delivery provider of affordable housing also puts additional delivery and cost risk on BCC which an RP would usually be responsible for. By expanding the number of delivery partners in

the city, this risk can be spread amongst providers, and greater inward investment can be attracted into the city. The local housing needs and tenure types will be specified as part of the marketing process and sale of general fund sites would not prejudice 4.2 above.

- 4.4 Option 4 – Sale of sites for a policy compliant mix of tenures. The sites can be sold on the open market for a planning policy compliant mix where 35% of the homes are affordable on sites of 15 dwellings or more. However, as three of the eight sites are below this threshold, instead of 237 homes, a policy complaint package of sites would see this number reduced to just 74 affordable homes. This is not going to help achieve the affordable homes targets BCC has set. In addition, the reduction in overall land receipt between an open market policy compliant scheme and 100% affordable is estimated to be just £1.58m, which means providing those 163 affordable homes will equate to a land receipt lost of just under £9,700 per home. This is in part due to the ability of 100% affordable housing sites to draw in grant funding from Homes England. For this reason, this option has been discounted.
- 4.5 Recommended Option: Option 2 is recommended as being the preferred option to be able to accelerate affordable housing delivery of an estimated 237 new homes whilst reducing build cost and risk to the Council. In addition, the “lost” land receipt anticipated is less than £10k per housing plot.

5 Consultation

- 5.1 All relevant Ward Members have been invited to comment on the paper and responses recorded at Appendix 4.

6 Risk Management

- 6.1 There are no immediate risks to the Council’s holdings if the proposal does not proceed, aside from the risk of holding vacant assets.
- 6.2 The ‘risk’ of not proceeding could only be seen in terms of a lost opportunity to accelerate the delivery of affordable housing on the identified sites.
- 6.3 The Council will ensure that the new affordable homes are allocated to those most in need from the Council’s nominations list and this will remain the first consideration when identifying and allocating to the new build schemes. The RPs and development partners will be asked to provide BCC with 100% nomination rights on lettings on newly-developed homes for a minimum of ten years.

7 Compliance Issues:

- 7.1 The recommendations are consistent with the following plans and strategies:
- 7.1.1 A Bold Prosperous Birmingham: Making sites available for development to Registered Providers and their Partners will allow the Council to capitalise on inward investment, increase the supply of affordable housing and enable successful development to help regenerate communities

- 7.1.2 A Bold Healthy Birmingham: the provision of new affordable housing types will improve the health of citizens by ensuring safe, sustainable, and suitable homes are delivered. This includes homes for those who have both physical and mental health issues. This also includes those experiencing homelessness
- 7.1.3 A Bold Green Birmingham: the provision of new homes will go some way to meet the City's commitment to route to zero will be delivered. The new homes will be built to modern standards to the Council's specification.
- 7.1.4 A Bold Inclusive Birmingham: the new affordable homes will be allocated under the council's policy and help families affected by the cost-of-living crisis as the homes will be built to new higher quality and EPC standards saving money on energy bills.
- 7.1.5 A Bold Safe Birmingham: the provision of new affordable homes will ensure they are "secure by design" and will contribute to safer neighbourhoods.

7.2 Legal Implications

- 7.2.1 Sections 120 - 123 of the Local Government Act 1972 authorise the Council to hold, appropriate and dispose of land. The disposal power in Section 123 of the Local Government Act 1972 is subject to the best consideration test. The Assistant Director of Investment and Valuation will monitor the sales process to ensure it complies with legislation and in the event an under value transaction is recommended under 2.6 above, will seek to comply with Circular 06/03: Local Government Act 1972 general disposal consent (England) 2003 disposal of land for less than the best consideration that can reasonably be obtained or seek specific consent from the Secretary of State to proceed, if required.
- 7.2.2 Section 1 of the Localism Act 2011 contains the Council's general power of competence, which is circumscribed only to the extent of any applicable pre-commencement restrictions and any specific post-commencement statutory restriction of the power, and Section 111 of the Local Government Act 1972 contains the Council's ancillary financial and expenditure powers in relation to the discharge of its functions including the disposal and acquisition of property.
- 7.2.3 Sections 32 to 34 of the Housing Act 1985 contain the Council's powers to dispose with the consent of the Secretary of State of land held for the purposes of the provision of housing accommodation under that Act. The General Housing Consents 2013 (issued March 2013 and corrected July 2013) set out the circumstances where such disposals can take place without the need for specific consent.
- 7.2.4 The Council's in-house Legal team can complete all legal matters associated with any transactions.

7.3 Financial Implications

- 7.3.1 These transactions may generate a capital receipt for the Council. The capital receipts will be available to fund the City Council's capital programme, and ringfenced to the HRA where the assets are currently vested within the HRA.
- 7.3.2 An initial valuation appraisal has been undertaken by Savills which estimates the unrestricted open market value of the sites listed in appendix 1 to be £5.40m, and the likely sale value restricted for affordable housing to be £3.83m leading to a potential discount of £1.57m. A summary of the individual site values is set out in Exempt Appendix 5 with Savills full valuation report at Exempt Appendix 6 of this report. The reduced capital receipt sum will need to be balanced against the benefits of developing for 100% affordable housing and the level of reduced receipt will only be fully known once the sites have received offers.
- 7.3.3 It is Government policy that local authorities should dispose of surplus land wherever possible. Generally, it is expected that land will be sold for the best consideration reasonably obtainable. However, there is recognition that there may be circumstances where an authority considers it appropriate to dispose of land at less than the best consideration that may be available under the circumstances. The sites identified are not deemed to be of strategic value such that the Council would wish to retain any control other than through normal legal covenants.
- 7.3.4 VAT advice will be sought for each disposal to ensure the most tax efficient method is being used for each disposal transaction.
- 7.3.5 The purchaser will pay a contribution towards the Council's professional costs.

7.4 Procurement Implications (if required)

- 7.4.1 Internal and external resources are being used to evaluate and execute the transactions. The valuation commission has already been procured.
- 7.4.2 The procurement implications if the appointment of an external professional adviser to support the sale process for this project is required are that the award of contract will be conducted compliantly with the Public Contracts Regulations 2015 (PCR2015) and the Council's Procurement and Contract Governance Rules.

7.5 Human Resources Implications (if required)

- 7.5.1 None have been identified, internal staff resource is being used to deliver this workstream.

7.6 Public Sector Equality Duty

7.6.1 An Equality Assessment has been carried out EQUA 1016 dated 17th January 2023 and is attached at Appendix 3. This identifies no adverse impacts on any groups protected under the Equality Act 2010.

8 Appendices

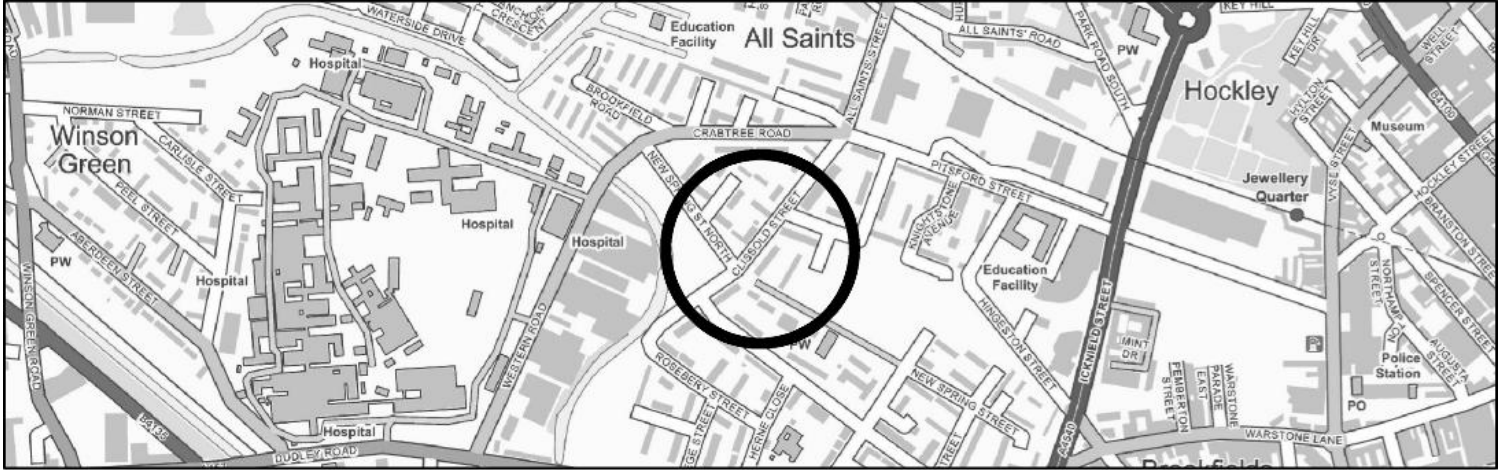
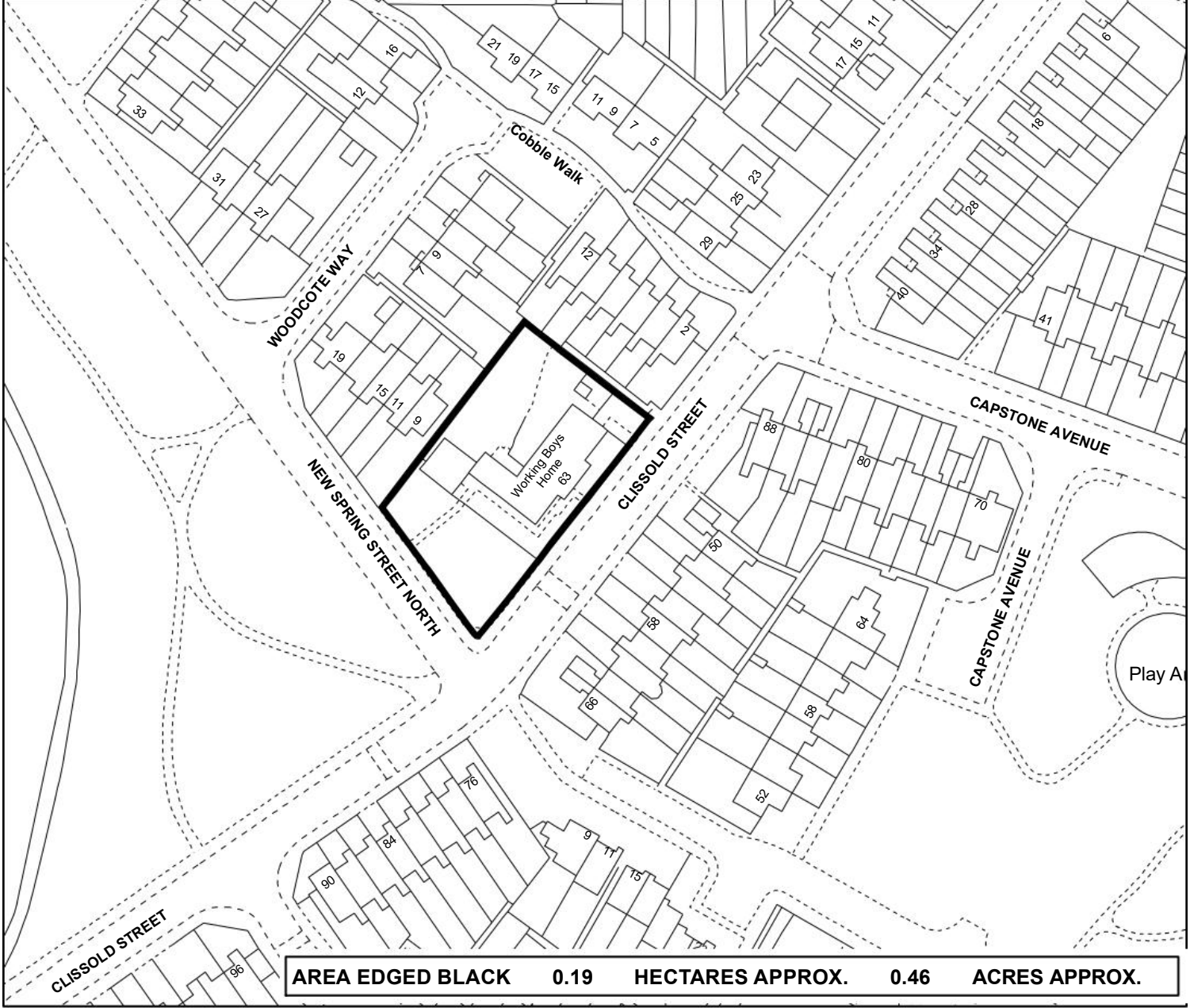
- Appendix 1 – List of Sites
- Appendix 2 - Site Plans
- Appendix 3 - Equality Assessment
- Appendix 4 - Ward Member Consultation
- Exempt Appendix 5 – Summary of Site Values
- Exempt Appendix 6 – Savills Valuation Report

9 Background Documents



Council's Housing Strategy 2023-2028 presented to and approved by Cabinet on 13th December 2022.

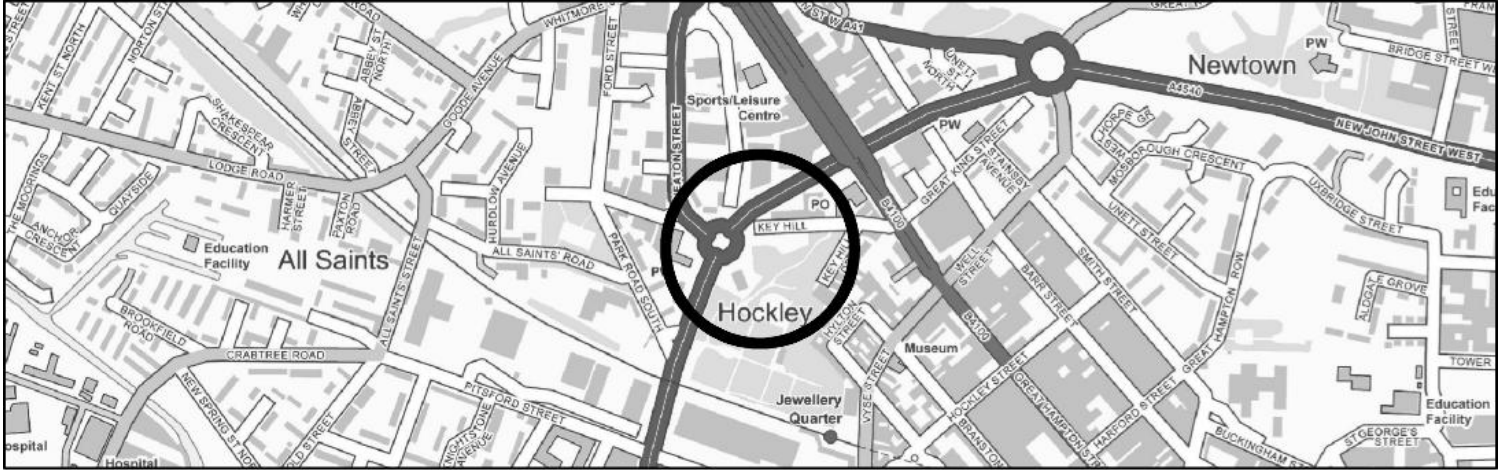
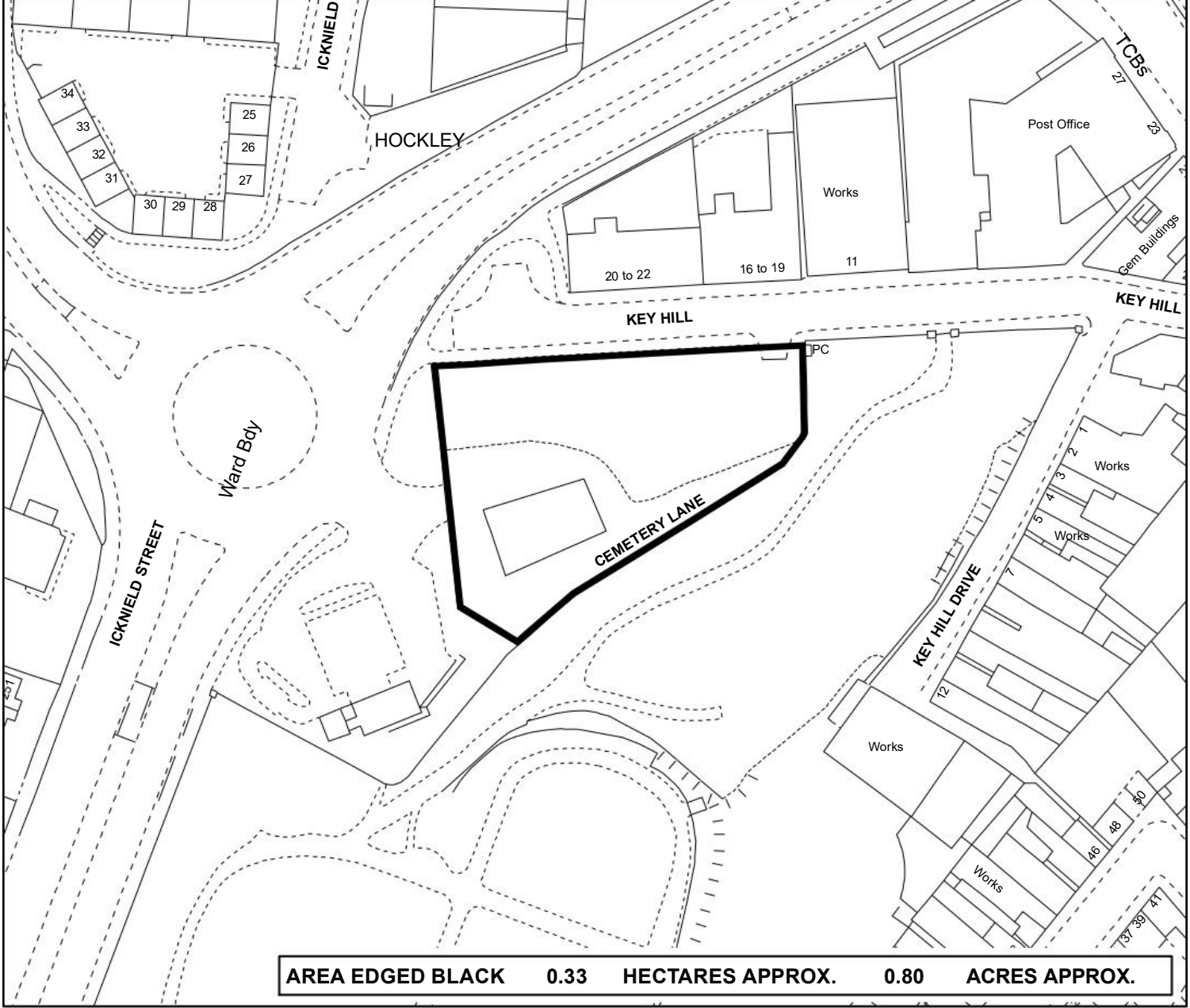
APPENDIX 1 - LIST OF SITES

SITE ADDRESS	SITE AREA	PROPOSED UNITS TO BE BUILT	PROPERTY ACCOUNT	WARD
Site at Clissold St, Hockley B18 7HQ	0.19ha (0.47ac)	8	General Fund	Soho and Jewellery Quarter
Site at Key Hill, Hockley B18 5NX	0.31ha (0.77ac)	45	General Fund	Soho and Jewellery Quarter
Site at Station Rd, Stechford B33 8BP	0.98ha (2.43ac)	70	General Fund	Yardley East
Site at Illeybrook Square, Bartley Green B32 3DD	1.27ha (3.13ac)	52	HRA	Bartley Green
Site at Olton Boulevard West, Spring Rd, Olton B11 3HY	1.07ha (2.64ac)	21	HRA	Tyseley and Hay Mills
Site at Partons Rd, Kings Heath B14 6TA	0.72ha (1.77ac)	23	HRA	Brandwood & Kings Heath
Site at Cadine Gardens, Kings Heath B13 8QN	0.14ha (0.36ac)	6	HRA	Moseley
Land at Bromford Lane, Bromford B24 8BU	0.2ha (0.5ac)	12	General Fund	Erdington





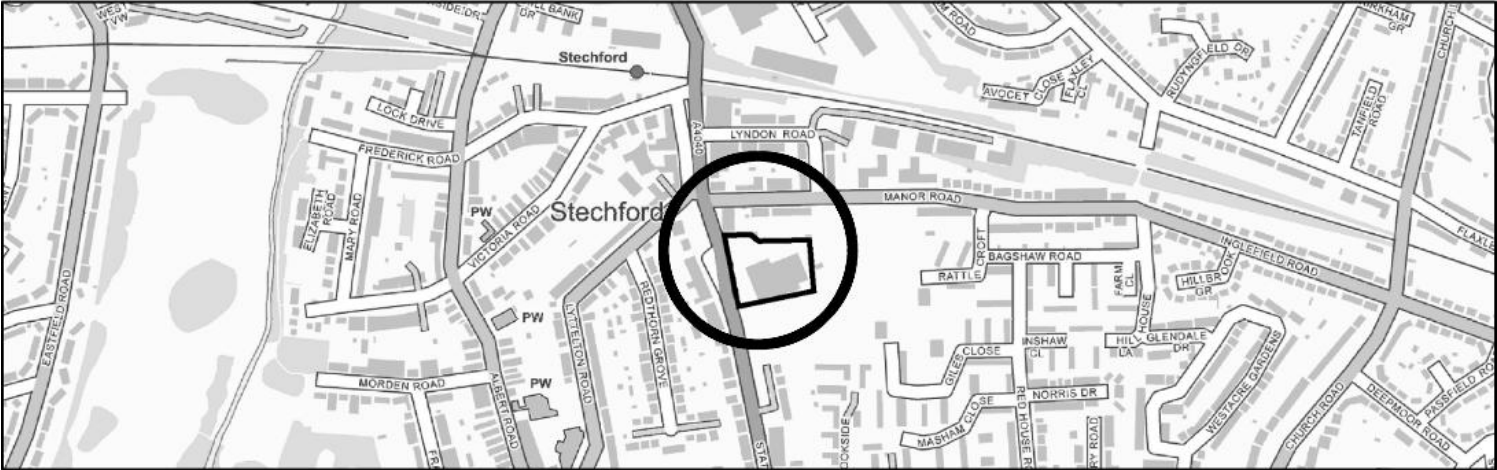
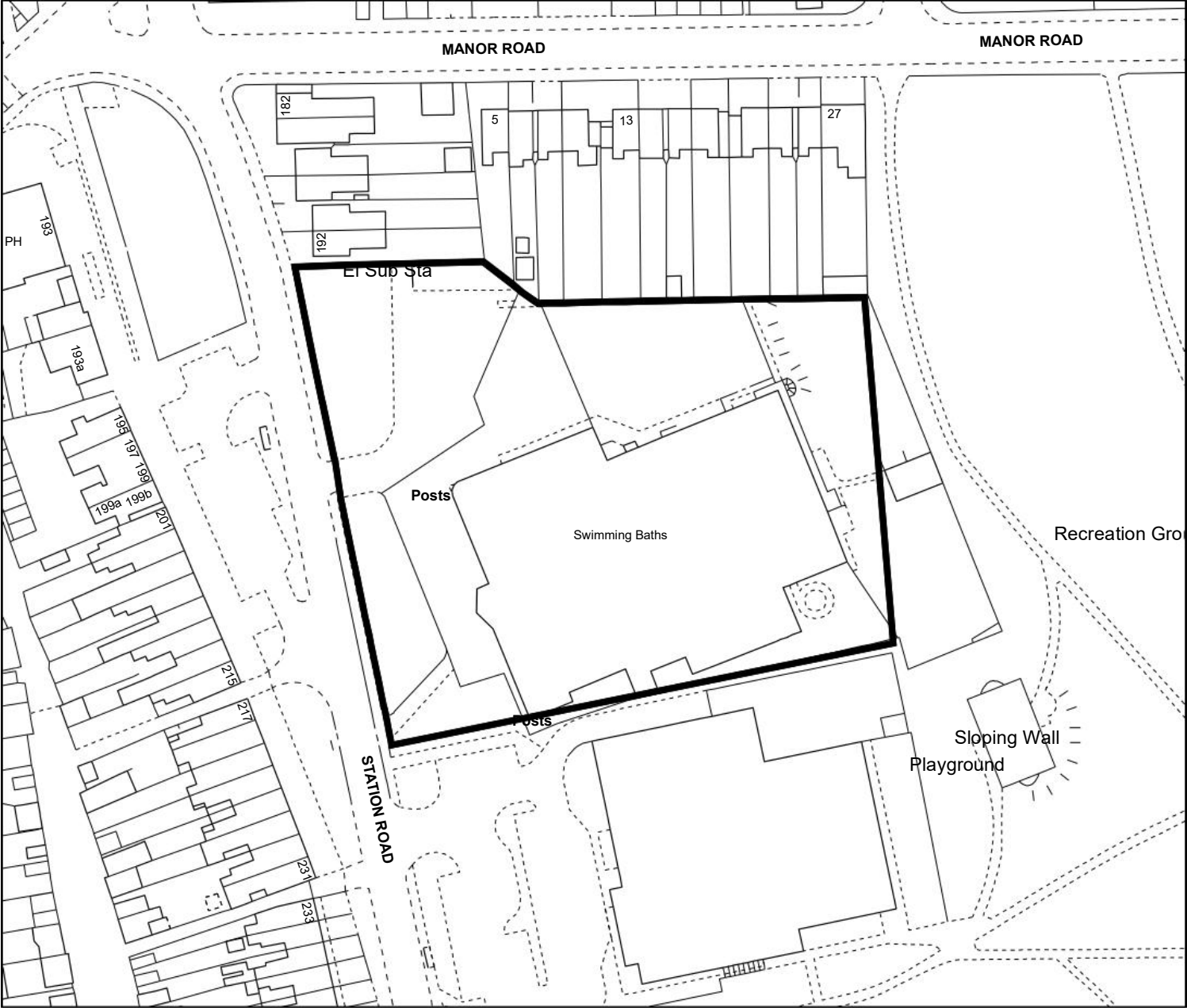
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Former Childrens Home 63 Clissold Street Soho & Jewellery Quarter	 129 of 416	Scale (Main Map)	Drawn	Date
		1:1,250	Bharat Patel	10/11/2022
		O.S.Ref SP0587NW		





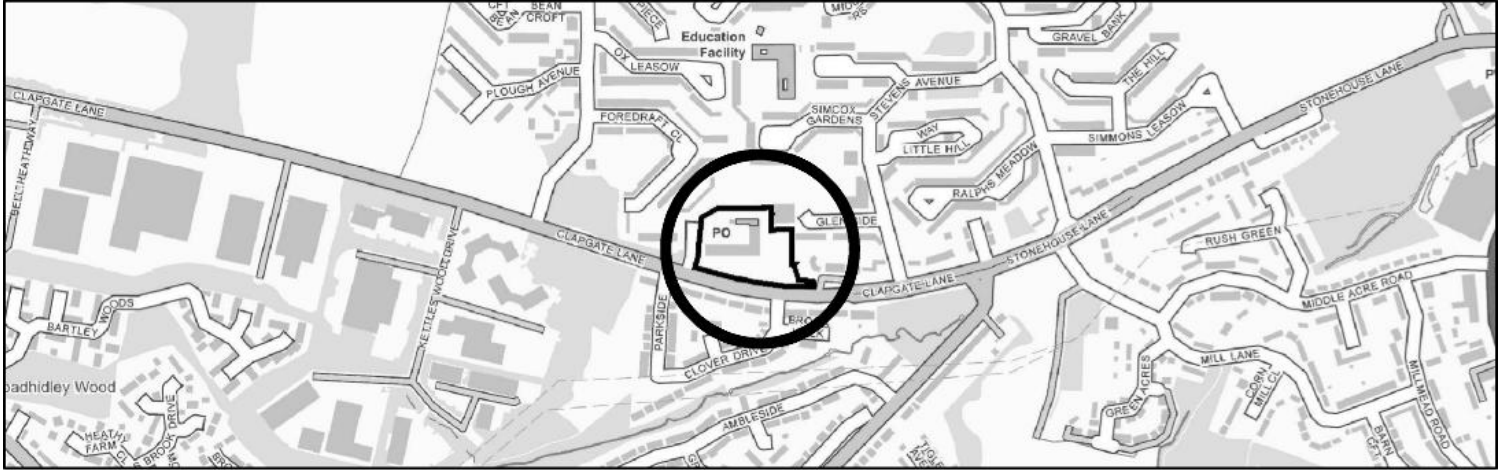
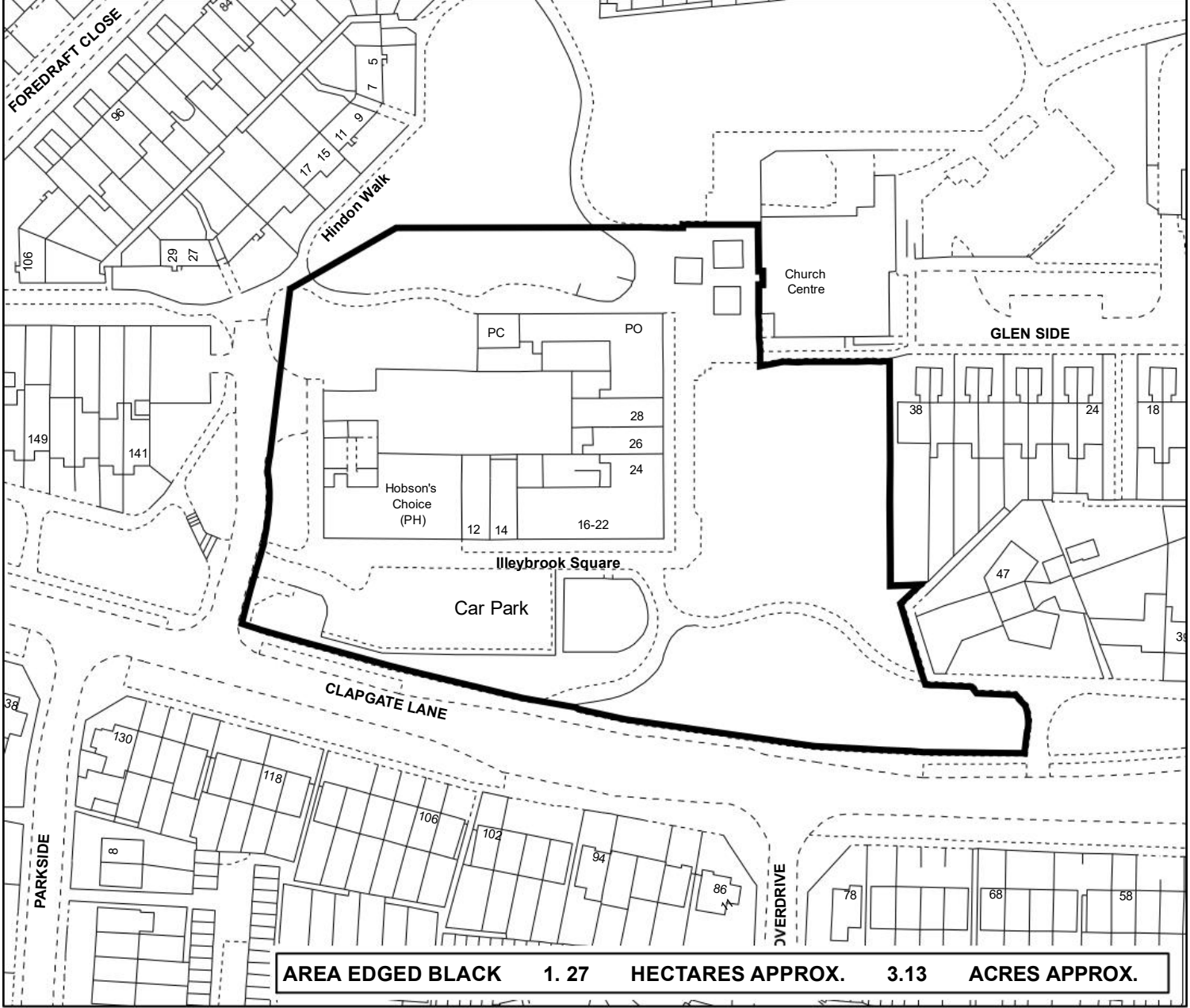
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Land At Key Hill Ladywood		Scale (Main Map)	Drawn	Date
		1:1,250 O.S.Ref SP0588SE	Bharat Patel	10/11/2022





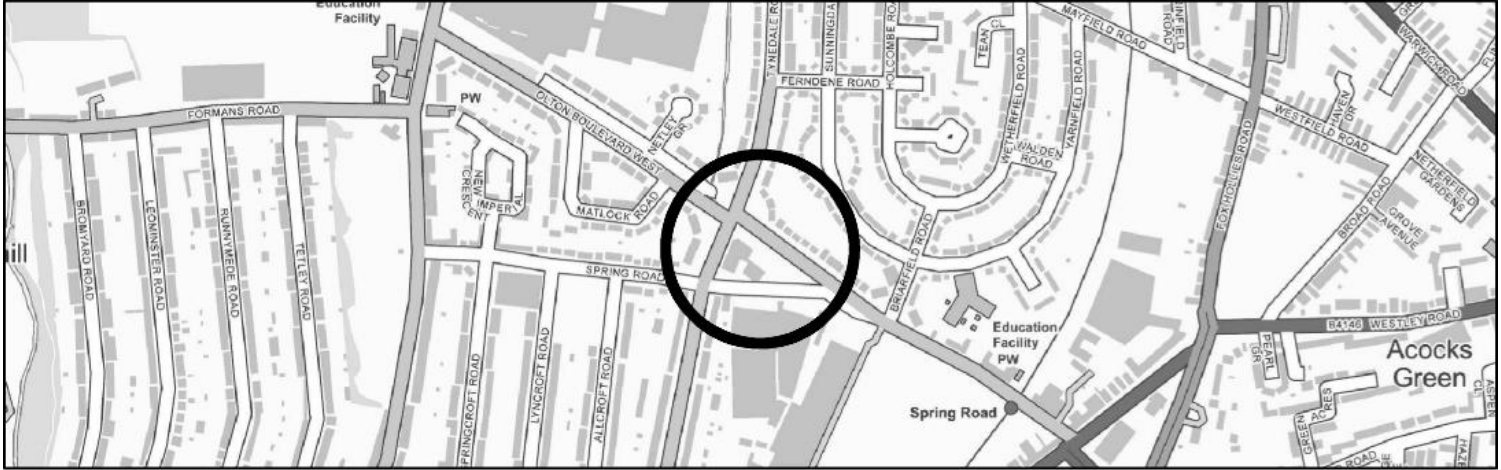
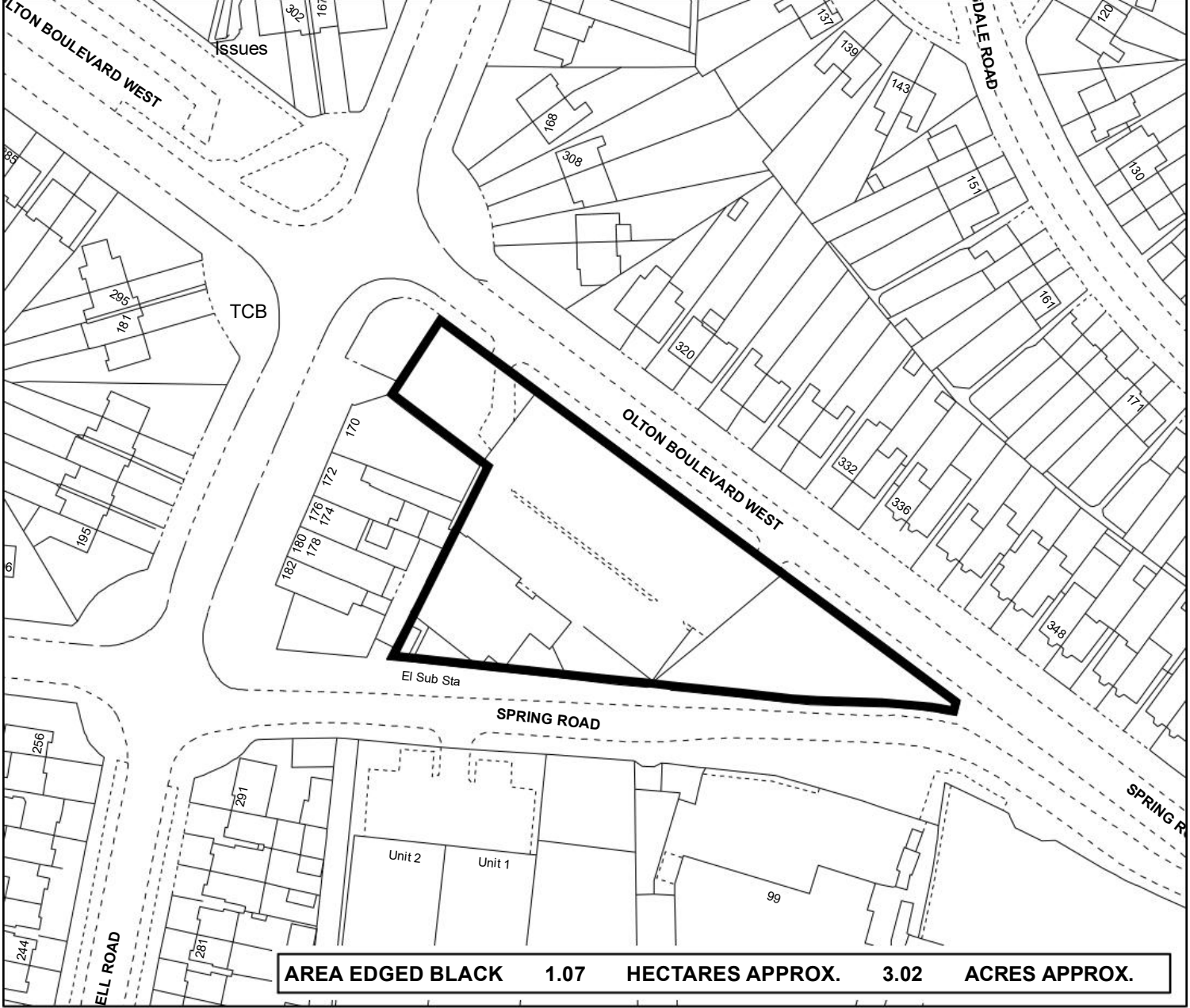
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Land At Station Road Yardley East	 Page 131 of 416	Scale (Main Map)	Drawn	Date
		1:1,250 O.S.Ref SP1387SW	Bharat Patel	14/12/2022





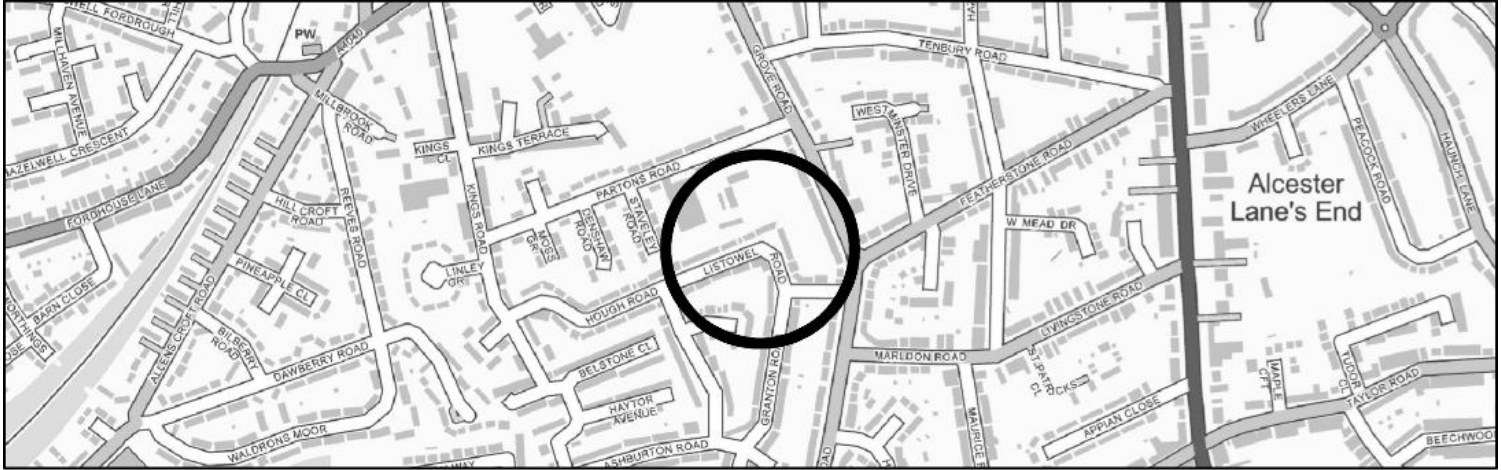
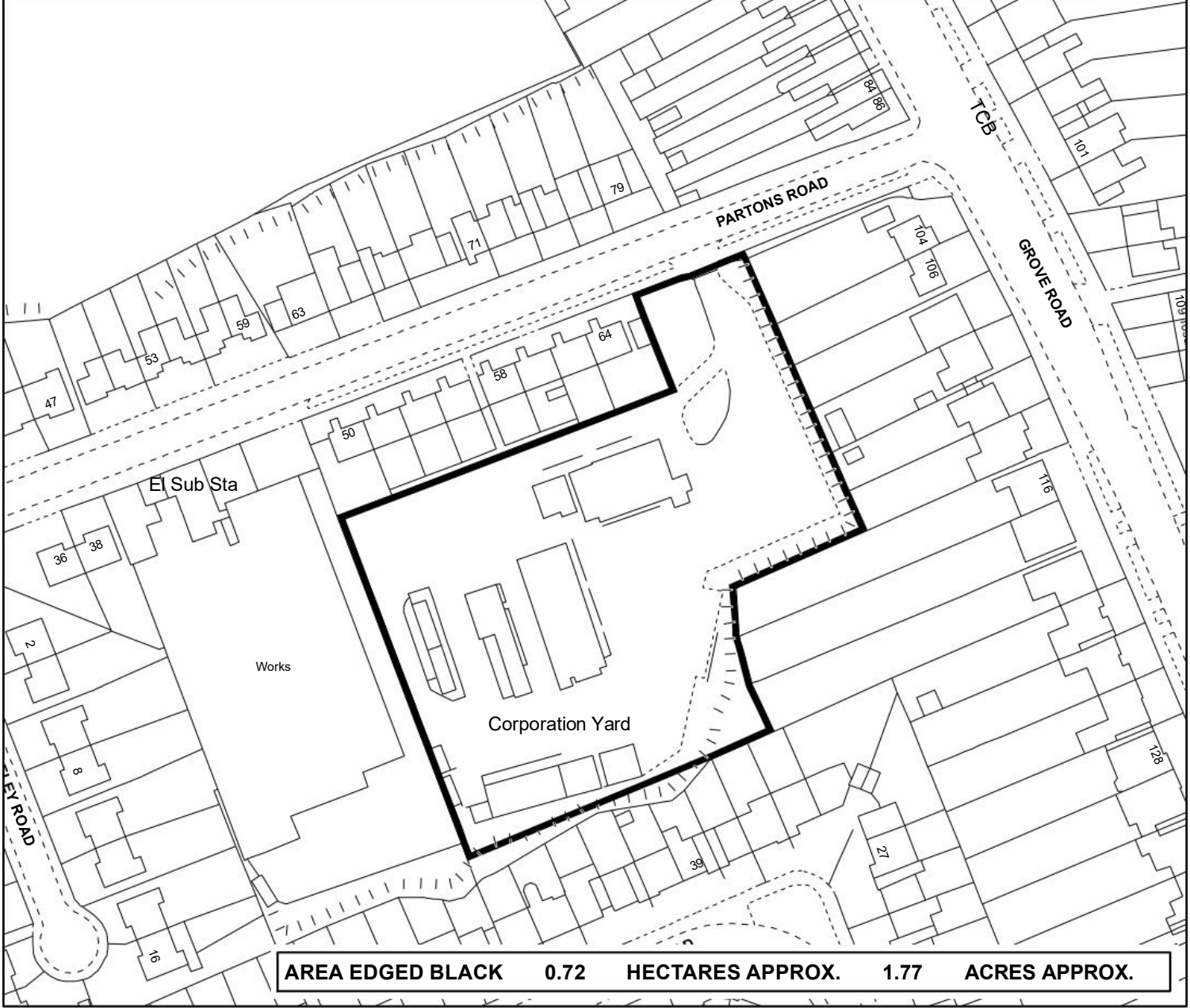
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Illeybrook Square Bartley Green	 Plan 132 of 416	Scale (Main Map)	Drawn	Date
		1:1,250 O.S.Ref SP0082NE	Bharat Patel	10/11/2022





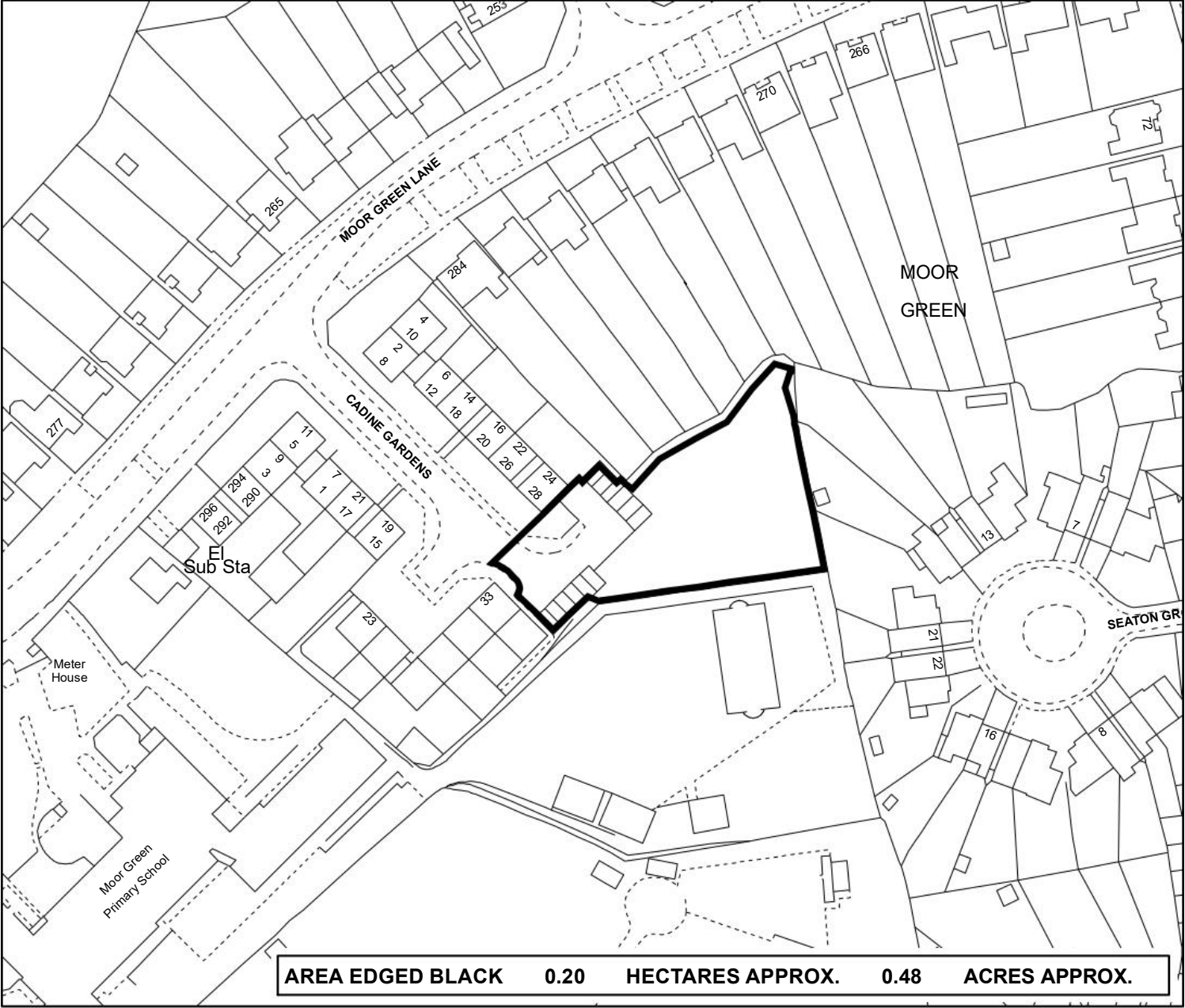
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Land At Olton Boulevard West-Spring Road Tyseley & Hay Mills	 O.S.Ref SP1083SE	Scale (Main Map)	Drawn	Date
		1:1,250	Bharat Patel	10/11/2022





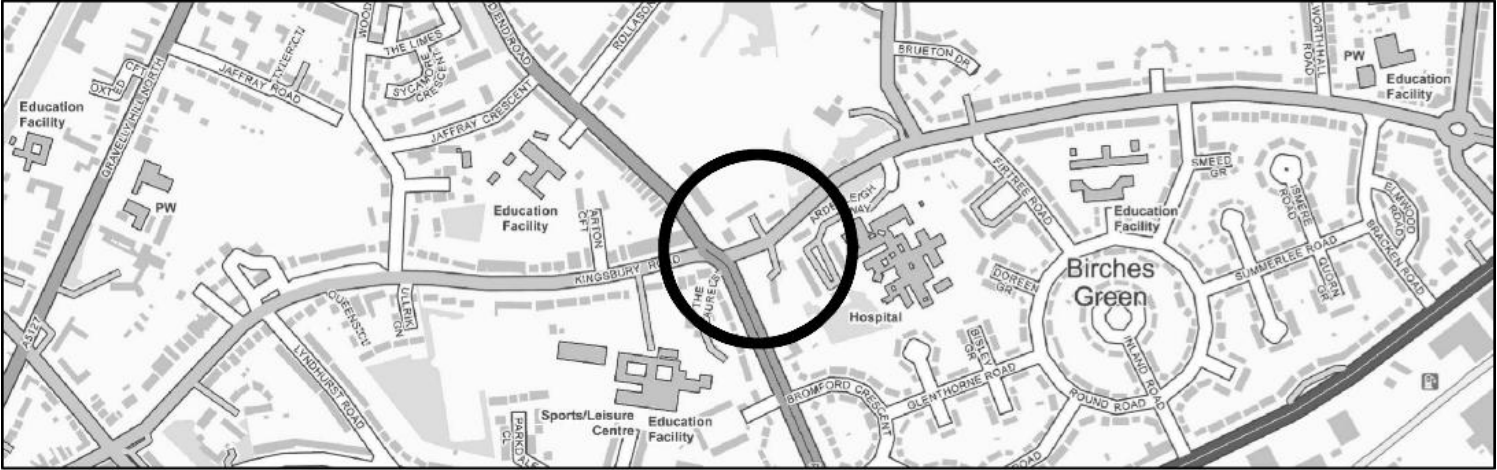
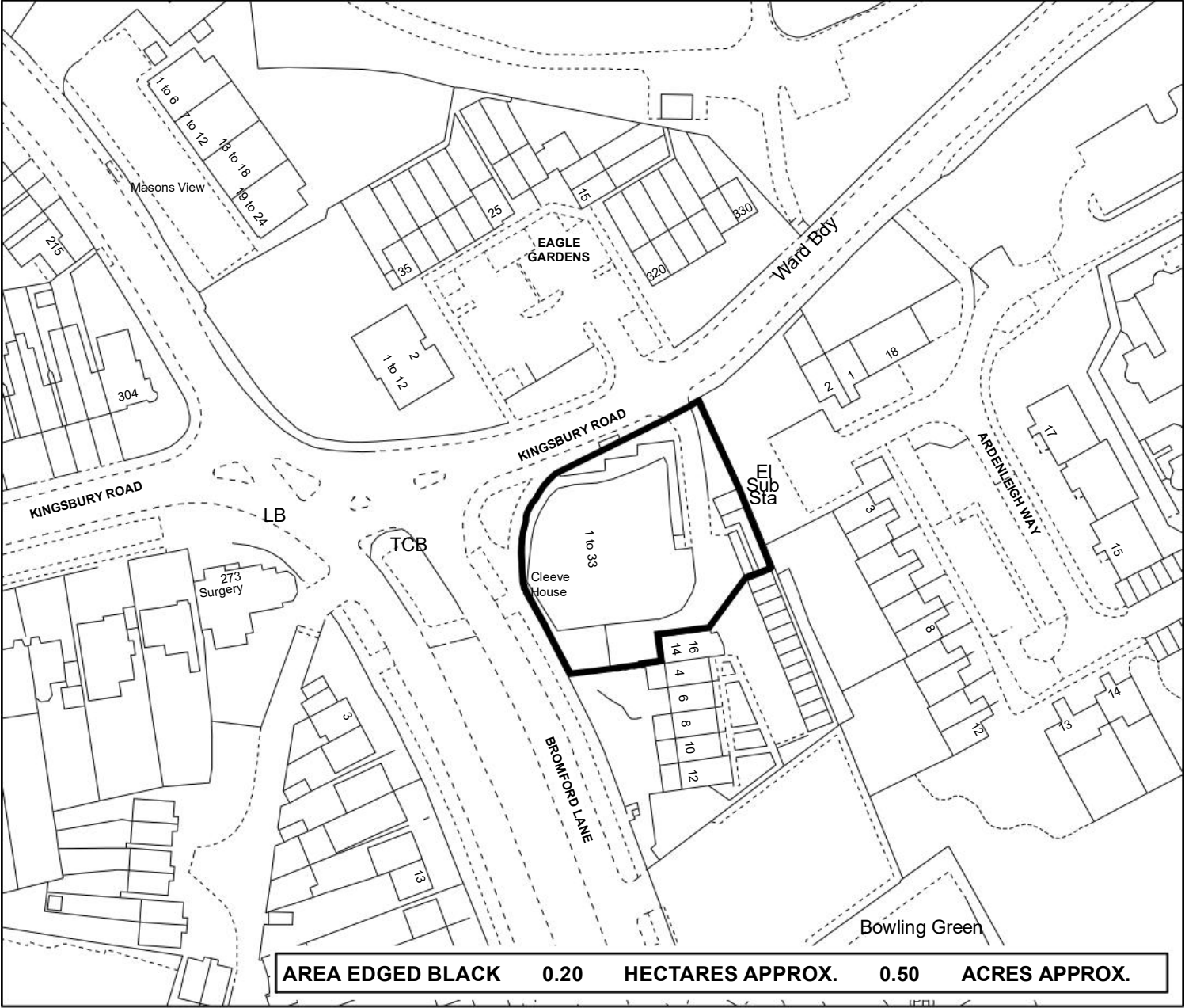
© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Site At Partons Road Brandwood & King's Heath	 Page 134 of 416	Scale (Main Map)	Drawn	Date
		1:1,250	Bharat Patel	10/11/2022
		O.S.Ref SP0680NE		





© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Cadine Gardens (Land to the rear of 276-284) Moor Green Lane Hall Green		Scale (Main Map)	Drawn	Date
		1:1,250 O.S.Ref. SP0682SW	Bharat Patel	14/11/2022



© Crown Copyright and database right 2022. Ordnance Survey 100021326.
You are not permitted to copy, sub-licence, distribute or sell any of this data to third parties in any form.

 Birmingham City Council		Kathryn James Assistant Director Property Place, Prosperity & Sustainability Directorate 10 Woodcock Street Birmingham, B7 4BG		
Site at Bromford Lane Erdington	 Plan 136 of 416	Scale (Main Map)	Drawn	Date
		1:1,250 O.S.Ref. SP1190NW	Bharat Patel	14/11/2022

Title of proposed EIA	Affordable Housing - Sites for Disposal
Reference No	EQUA1016
EA is in support of	New Function
Review Frequency	Annually
Date of first review	16/11/2023
Directorate	Inclusive Growth
Division	Property Services
Service Area	Property Valuation & Sales
Responsible Officer(s)	<input type="checkbox"/> Felicia Saunders
Quality Control Officer(s)	<input type="checkbox"/> Eden Ottley
Accountable Officer(s)	<input type="checkbox"/> Eden Ottley
Purpose of proposal	To seek to establish the principle for the sale of the Council's freehold or long leasehold (250 years) interest in identified surplus land to Registered Housing Providers and/or Developer Partners
Data sources	Consultation Results; relevant reports/strategies; relevant research
Please include any other sources of data	
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Service Users / Stakeholders; Employees; Wider Community
Age details:	<p>The sales will not have a negative impact on the grounds of age due to the fact any sale will have to be to an individual of an adult age.</p> <p>With regard to the sale of assets the officers engaged will be qualified chartered surveyors and of an age where there are no negative impacts.</p>
Protected characteristic: Disability	Service Users / Stakeholders; Employees; Wider Community
Disability details:	<p>The sales will not have a negative impact on the grounds of disability. However, subject to future use the purchaser/new owner would be responsible for any access to work obligations.</p>

With regard to the sale of assets any officers with a known disability will be supported to ensure all appropriate actions are taken to enable them to undertake their duties safely and securely.

Protected characteristic: Sex

Service Users / Stakeholders;
Employees; Wider Community

Gender details:

The sales will not be conducted on the basis of gender and will be via the open market tender. Therefore, there are no negative impacts in relation to this protected characteristic.

The sale of assets will be undertaken by the most appropriate officers based on experience, capacity and time, not the gender of available officers.

Protected characteristics: Gender Reassignment

Service Users / Stakeholders;
Employees; Wider Community

Gender reassignment details:

The sales will not be conducted on the basis of gender reassignment and will be via open market tender. Therefore, there are no negative impacts in relation to this protected characteristic

The sale of assets will be undertaken by the most appropriate officers based on experience, capacity and time, not the gender reassignment of available officers

Protected characteristics: Marriage and Civil Partnership

Service Users/ Stakeholders;
Employees; Wider Community

Marriage and civil partnership details:

There are no known conditions for which these assets will be disposed of in the context of marital status. The sales will be by open market tender. Therefore there are no negative impacts or implications for this characteristic.

The marital status of officers involved in the sale of assets will not be a criteria consideration. Sales will be undertaken by the most appropriate officers based on experience, capacity and time.

Protected characteristics: Pregnancy and Maternity

Service Users / Stakeholders;
Employees; Wider Community

Pregnancy and maternity details:

There are no criteria which exclude pregnant individuals. The sales will be by open market tender. By implication there will be no negative impact on the grounds pregnancy or purchasers and/ or officers involved in the sale of assets.

Protected characteristics: Race

Service Users / Stakeholders;
Employees; Wider Community

Race details:

The sales will be by open market tender and will not be conducted on the basis of race. Therefore, there are no negative impacts in relation to this protected characteristic.

The sale of assets will be undertaken by the most appropriate officers based on experience, capacity and time, not the race of available officers.

All assets will be available to members of the community based on the criteria associated to respective assets.

Protected characteristics: Religion or Beliefs

Service Users / Stakeholders;
Employees; Wider Community

Religion or beliefs details:

The sales will be by open market tender and will not be conducted on the basis of religion. Therefore, there are no negative impacts in relation to this protected characteristic.

The sale of assets will be undertaken by the most appropriate officers based on experience, capacity and time, not their religion of available officers.

All assets will be available to members of the community based on the criteria associated to respective assets.

Protected characteristics: Sexual Orientation

Service Users / Stakeholders;
Employees; Wider Community

Sexual orientation details:

The sales will be by open market tender and will not be conducted on the basis of sexual orientation.

Therefore, there are no negative impacts in relation to this protected characteristic.

The sexual orientation status of officers involved in the sale of assets will not be a criteria consideration. Sales will be undertaken by the most appropriate officers based on experience, capacity and time.

Socio-economic impacts

Please indicate any actions arising from completing this screening exercise.

Please indicate whether a full impact assessment is recommended

NO

What data has been collected to facilitate the assessment of this policy/proposal?

Consultation analysis

Adverse impact on any people with protected characteristics

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

How will the effect(s) of this policy/proposal on equality be monitored?

What data is required in the future?

Are there any adverse impacts on any particular group(s)

No

If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal

The delivery of affordable homes on the identified sites, will assist the city in meeting its housing target (as detailed in BDP Policy PG1) of 51,100 additional homes, including approximately 19,400 affordable dwellings over the BDP period (2011 to 2031).

To seek to establish the principle for the sale of the Council's freehold or long leasehold (250 years) interest in identified surplus land, Registered Housing Providers and / or Developer Partners to deliver affordable housing.

To facilitate the sale of the identified assets officers have undertaken their due diligence in addressing the 9 protected characteristics, in the context of selling the known sites and found at this stage of the sale process there are no negative impacts which will adversely affect a sale.

Consulted People or Groups

Informed People or Groups

Summary and evidence of findings from your EIA

The Leader of the Council and the Cabinet Member for Housing and Homelessness have been consulted and are supportive of the recommendations of this report.

Relevant officers from Investment & Valuations, Housing Delivery, Finance and Legal Services have been consulted in respect of the preparation and are supportive of the recommendations of this report.

All relevant Ward Members have

been consulted and their comments recorded. The Property Investment Board comprising officers from Property Services, Finance and Legal recommends proceeding with the transaction.

The proposed land sales programme will generate capital receipts to support the Financial Plan 2021-2025 by generating resources and thus helping to achieve a balanced budget.

The sites listed have been identified as assets the City Council should consider disposing to promote investment and growth.

To facilitate the sale of the identified assets officers have undertaken their due diligence in addressing the 9 protected characteristics, in the context of selling the known sites and found at this stage of the sale process there are no negative impacts which will adversely affect a sale.

Having reviewed all protected characteristics, it has been determined there are no issues which impact negatively on any members of the community and therefore a full equality assessment is not required.

QUALITY CONTORL SECTION

Submit to the Quality Control Officer for reviewing?

Yes

Quality Control Officer comments

Decision by Quality Control Officer

Proceed for final approval

Submit draft to Accountable Officer?

Yes

Decision by Accountable Officer

Approve

Date approved / rejected by the Accountable Officer

17/01/2023

Reasons for approval or rejection

Yes

Last modified at 17/01/2023 01:08 PM by Workflow on behalf of Eden Ottley

Close

Appendix 4 - Ward Member Consultation

PROPERTY ADDRESS	WARD	CONSULTATION	COUNCILLOR RESPONSE	OFFICER RESPONSE
Site at Clissold St, Hockley B18 7HQ	Soho and Jewellery Quarter	Email dated 10/1/2023 requesting comments by 16/1/2023 Further email dated 31/1/2023 requesting comments by 13/2/2023 Further email 17.4.23 requesting comments by 24.4.23	Councillor Sybil Spence – Email response dated 2/2/2023 requesting that whenever the Council are disposing of land it would be good if the buyer would consider building social housing. One of the reasons why residents cannot get a proper home in which to live is because some landlords with private properties are putting them in slums. Then when the tenants ask for repairs to be done, they cannot find the landlords. Councillor Chaman Lal – Email response dated 31/1/2023 confirming support for those surplus sites within Soho and Jewellery Quarter Ward being used for social housing	Email response dated 2/2/2023 - Comments acknowledged and noted. Email response dated 31/1/2023 - Comments acknowledged and noted.
Site at Key Hill, Hockley B18 5NX	Soho and Jewellery Quarter	Email dated 10/1/2023 requesting comments by 16/1/2023 Further email dated 31/1/2023 requesting comments by 10/2/2023 Further email 17.4.23 requesting comments by 24.4.23	Councillor Sybil Spence – Email response dated 2/2/2023 requesting that whenever the Council are disposing of land it would be good if the buyer would consider building social housing. One of the reasons why residents cannot get a proper home in which to live is because some landlords with private properties are putting them in slums. Then when the tenants ask for repairs to be done, they cannot find the landlords. Councillor Chaman Lal – Email response dated 31/1/2023 confirming support for those surplus sites within Soho and Jewellery Quarter Ward being used for social housing	Email response dated 2/2/2023 - Comments acknowledged and noted. Email response dated 31/1/2023 - Comments acknowledged and noted.

Appendix 4 - Ward Member Consultation

Site at Station Rd, Stechford B33 8BP	Yardley East	<p>Email dated 10/1/2023 requesting comments by 16/1/2023</p> <p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by 24.4.23</p>	<p>Councillor Deborah Harries - No response received</p> <p>Email received via Mark Gamble 26.4.23 to highlight a frustration in having all sites included in paper for consultation.</p>	Email response to Cllr Harries 26.4.23 to explain the paper and the next steps with the Station Road site
Site at Illeybrook Square, Bartley Green B32 3DD	Bartley Green	<p>Email dated 10/1/2023 requesting comments by 16/1/2023</p> <p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by 24.4.23</p>	<p>Councillor Bruce Lines – Tel con 10/1/2023 and email dated 24/1/23 raising concerns regarding local resident consultation and request for officers to attend Ward Forum prior to Cabinet on 13/2/2023</p> <p>Councillor Kerry Brewer – No response received email 10/1/ 2023</p>	<p>Response to Cllr Lines – The report is seeking to establish an in-principal approval to the proposed programme of land sales. As requested, Officers will attend Ward Forum to outline proposals.</p> <p>Officers met Cllr Lines and Cllr Brewer at Illeybrook Square on 30.3.23 to discuss the site, plans for the future and the Cabinet paper. Both Cllrs are keen that the site is redeveloped, but would like to highlight the three commercial units that are occupied would like to be kept up to date with proposals and ideally a new scheme should look to include some commercial, if at all possible. They agreed that this will be part of the planning process and had no objection to the Cabinet report.</p>
Site at Olton Boulevard West, Spring Rd, Olton B11 3HY	Tyseley and Hay Mills	Email dated 10/1/2023 requesting comments by 16/1/2023	Councillor Zafar Iqbal MBE – No response received	

Appendix 4 - Ward Member Consultation

		<p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by 24.4.23</p>		
Site at Partons Rd, Kings Heath B14 6TA	Brandwood & Kings Heath	<p>Email dated 10/1/2023 requesting comments by 16/1/2023</p> <p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by 24.4.23</p>	<p>Councillor David Barker – No response received.</p> <p>Email received 18.4.23 asking for more information.</p> <p>Councillor Lisa Trickett – No response received</p> <p>Response received from Cllr Barker on 21.4.23 to give a response from both Cllr Trickett and Cllr Barker to stress they support the land being used for: high-spec, good quality, net-zero homes, but would want them to be totally / predominantly affordable / social – perhaps even a co-operative development.</p>	<p>Email to Cllrs Barker and Trickett sent 19.4.23 giving information on the process and work on the site to date.</p> <p>Email to both Councillors on 24.4.23 to advise that the sites will be developed for affordable housing and that the specification will be picked up in the planning process.</p>
Site at Cadine Gardens, Kings Heath B13 8QN	Moseley	<p>Email dated 10/1/2023 requesting comments by 16/1/2023</p> <p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by</p>	<p>Councillor Izzy Knowles – Email dated 15/1/23 and Tel Con 16/1/23, My comments on the scheme are that Moseley is in need of more good quality secure tenancy social housing and I am disappointed the council appear to have abandoned the plan to build six high quality modular housing units on the Cadine Gardens site.</p>	<p>Response to Cllr Knowles - The proposed affordable housing land sale programme should be seen as complementing existing BMHT activity rather than instead of.</p> <p>Registered Social Landlords are able to offer differing tenure types to solely social rent offered through BMHT build programmes. This provides opportunity to deliver housing with wider levels of affordability for those aspiring to both rent and secure home ownership.</p>

Appendix 4 - Ward Member Consultation

		24.4.23	Councillor Kerry Jenkins– No response received	Your other comments regarding the presence of Japanese Knotweed on site and a watercourse adjacent the site are noted, and already aware to officers. The impact of both factors on any potential development will be disclosed as part of the technical information released to would be developers as part of the final sales pack produced.
Land at Bromford Lane, Bromford B24 8BU	Erdington	<p>Email dated 10/1/2023 requesting comments by 16/1/2023</p> <p>Further email dated 31/1/2023 requesting comments by 13/2/2023</p> <p>Further email 17.4.23 requesting comments by 24.4.23</p>	<p>Councillor Robert Alden – No response received. Emailed 17.4.23 and response given: I am happy to support the disposal of the land subject to it being for housing, not flats /apartments and would ask that the Council place a covenant on the site to prevent the future conversion of any houses built on the site into HMO's or Exempt Accommodation.</p> <p>Councillor Gareth Moore - No response received</p>	<p>Officer response given 17.04.23 The disposal of the land will be for the benefit of delivering affordable housing but we can't at this stage say whether this will be for flats or houses. A scheme will be based on need and that demand will be identified by the housing provider who will be developing the site. It will also be subject to gaining planning consent which will involve consultation and compliance with policy. At the moment, we can't say whether the site will be developed for flats as to put this restriction in place at this stage will deter purchasers and devalue the site. I hope that you understand the situation.</p> <p>Cllr Alden responded: Understand the situation but ask that the final report notes the comments I made as we have a surplus of flat style accommodation locally and a real shortage of family housing.</p>

Birmingham City Council

Report to Cabinet

16th May 2023



Subject: RESPONSE TO INDEPENDENT REVIEW OF BIRMINGHAM SPECIAL EDUCATIONAL NEEDS AND DISABILITY INFORMATION, ADVICE AND SUPPORT SERVICE (SENDIASS)

Report of: Sue Harrison,
Director Children and Families

Relevant Cabinet Member: Cllr Karen McCarthy, Children, Young People & Families

Relevant O &S Chair(s): Cllr Kerry Jenkins, Education & Children's Social Care

Report author: Helen Price,
Director Strategy, Commissioning and Transformation
helen.x.price@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 010978/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential :		

1 Executive Summary

- 1.1 An independent review of Birmingham SENDIASS was undertaken by the National Children's Bureau in spring 2022. This review found a number of issues within the SENDIASS service which needed to be addressed by the Council.
- 1.2 One of the main concerns arising from the independent review is the failure of the service to comply with 18 out of 21 of the national minimum standards.

- 1.3 The Council is committed to delivering a SENDIASS service and has been exploring options for future delivery of the service to ensure that it complies with the national minimum standards.
- 1.4 This report provides an update on improvements to the service, sets out the options considered to ensure compliance with the minimum standards and seeks Cabinet's agreement for the recommended option.

2 Recommendations

- 2.1 That Cabinet:
 - 2.1.1 Notes the report produced by the National Children's Bureau following its independent review of Birmingham SENDIASS (**Appendix A**).
 - 2.1.2 Notes the improvements made so far by Birmingham SENDIASS and the plan to ensure full compliance with the national minimum standards (**Appendix B**).
 - 2.1.3 Agrees the recommendation that a robust plan and monitoring arrangements are in place to ensure the service moves towards full compliance with the national minimum standards.

3 Background

- 3.1 All local authorities are required under the Children and Families Act 2014 to provide free impartial, confidential and accurate information, advice and support about education, health and social care for children, young people and their parents and carers on matters relating to special educational needs and disability. In Birmingham this is provided by SENDIASS, a Council department.
- 3.2 All SENDIASS services are required to comply with a set of minimum standards that were developed by Information Advice and Support Services (IASS) managers, parents and Councils in consultation with the Department for Education. They are based on the law, the SEND Code of Practice and relevant quality standards.
- 3.3 In October 2021 the Secretary of State for Education issued a [statutory direction to Birmingham City Council](#) requiring the Council to take steps to improve its SEND services, including co-operating with the DfE appointed SEND Commissioner, John Coughlan.
- 3.4 In February 2022, [the SEND Commissioner published his first report](#) to the Secretary of State for Education. In this report, the Commissioner made 18 recommendations. The report and its recommendations have been accepted in full by the leadership of the Council, [as noted by Cabinet in November 2022](#).
- 3.5 One of the recommendations made by the SEND Commissioner was; '*The SENDIASS service in Birmingham should be externally reviewed with recommendations brought back to the IB (SEND Improvement Board) in due course*'.

- 3.6 The National Children's Bureau was asked to undertake an independent review of SENDIASS. This review commenced in March 2022 and considered how Birmingham SENDIASS was meeting the national minimum standards.
- 3.7 A report setting out the findings from the independent review was shared with the SEND Improvement Board in July 2022 and is appended to this report (**Appendix A**). The Council and the SEND Improvement Board have accepted the findings of this review.
- 3.8 The review concluded that Birmingham SENDIASS was non-compliant with 18 out of 21 of the national minimum standards and required significant and rapid improvement. The review also offered recommendations as to the future deliver model of the service.
- 3.9 The review also found that Birmingham SENDIASS was not sufficiently focussed on its core statutory functions. In addition to its statutory role, Birmingham SENDIASS has developed a 'Front Door' project in recent years that has provided a different service for families.
- 3.10 The 'Front Door' project had taken a social care approach and was staffed by agency workers and social work students on placement. The review found significant crossover with the statutory SENDIASS work and a lack of engagement with Birmingham Children's Trust, the commissioned provider of Children's Services.
- 3.11 This model of family support needs to align with the Early Help services provided by Birmingham Children's Trust, as commissioned by the Council.
- 3.12 From the start of May 2023 family support is being provided through an appropriate provider, Birmingham Children's Trust, enabling Birmingham SENDIASS to focus on delivering its statutory functions to support families.
- 3.13 These statutory functions have not been provided in compliance with national minimum standards for some time and need to become fully compliant as soon as possible.

4 Options considered and Recommended Proposal

- 4.1 An options appraisal was carried out, with the following options being considered:
- 4.1.1 Option 1 - Put robust plan and monitoring arrangements in place to ensure the service moves towards full compliance with the national minimum standards.
- 4.1.2 Option 2 - Secure an alternative, external, experienced provider with a strong track record of providing a family centred, legally compliant SENDIASS service, through carrying out a compliant competitive tender exercise.
- 4.2 These options were assessed against the extent to which they would enable the delivery of a fully compliant SENDIASS and address the non-compliance identified by the National Children's Bureau without delay.

- 4.3 The following five appraisal criteria have been used to assess the options. These options were revisited in March and April 2023 following new management arrangements being put in place for the service:
- 4.3.1 **Improvement and compliance** - Enables the service to quickly improve and to become compliant with the required minimum standards.
 - 4.3.2 **Impartiality** - Provides a service that is sufficiently independent and arm's length that will enable parents and children to have confidence that the service is impartial, and its advice is seen as such. Appropriate distance from the Council and Children's Trust's front door arrangements is essential.
 - 4.3.3 **Understands its strengths and weaknesses** - Develops a service that is outward looking, knows its strengths and weakness and is supported by good quality data which is uses to drive improvement
 - 4.3.4 **Constructive problem-solving approach** - Develops a service that promotes constructive problem-solving approaches to resolving differences and enabling services to correct mistakes and get the right support for parents and children at an early stage and at appropriate levels.
 - 4.3.5 **Promotes best practice** - Enables the service to become consistent with more positive practice that is evident in other SENDIASS services.
- 4.4 The option to put a robust plan and monitoring arrangements in place to ensure the service moves towards full compliance with the national minimum standards was assessed against the criteria and the following was found:
- 4.4.1 **Improvement and compliance** – The current service has had sight of the improvement plan and report since July 2022. As at January 2023, insufficient improvement against the minimum standards had been evidenced. New management arrangements have been in place since January and there is now increased confidence about the service's capacity to improve towards compliance. There is a detailed plan that will move the service towards compliance (**Appendix B**) against which significant progress has already been made.
 - 4.4.2 **Impartiality** – The NCB review report details that the arrangements in place did not offer sufficient impartiality and distance from the Council and Children's Trust's front door. The arrangements were not sufficiently distanced to allow families to have confidence in the advice being sufficiently independent and impartial. The NCB's review of SENDIASS (p12) describes the service's Impartiality Policy as '*not robust enough as it doesn't explain how the service delivers or maintains impartiality.*' Since the end of April 2023, the service is focussed on delivering its statutory functions with family support delivered by Birmingham Children's Trust. This enables sufficient impartiality for the SENDIASS work and distance from the Council and the Trust's front door.

- 4.4.3 **Understands its strengths and weaknesses** – The service as it was organised and operated up until January 2023 did not have a good understanding of its strengths and weaknesses, as demonstrated by the service's lack of acceptance of the findings of the independent review. A strong focus on developing robust systems and policies to support them has been evidenced since January 2023 which has led to improved management confidence that the service now understands its strengths and weaknesses.
- 4.4.4 **Constructive problem-solving approach** – The review report details the high number of escalations and tribunals that the service is involved in, as well as little evidence of attempting to resolve issues in a more constructive way. A significant cultural and practice shift has taken place in the team since January 2023 that has demonstrated a constructive problem-solving approach.
- 4.4.5 **Promotes best practice** – Best practice has begun to be evident within the team, with management committed to the cultural shift required to achieve this.
- 4.5 Examining this option against the appraisal criteria indicates that the service can achieve sufficient improvement in a timely way, provided that progress against the action plan is closely monitored. Option 1 is therefore the recommended option.
- 4.6 As part of this options appraisal, the Council considered how other Councils secure their SENDIASS services. Some Councils outsource these services with third sector providers and there are several not-for-profit providers with significant expertise of providing good quality, compliant services. This allows for a body of expertise in this type of advice service to be developed and shared.
- 4.7 The option to secure an alternative, external, experienced provider with a strong track record of providing SENDIASS through a compliant competitive tender exercise was considered against the appraisal criteria:
 - 4.7.1 **Improvement and compliance** – Securing an experienced provider with significant experience of delivering fully compliant, good quality SENDIASS would offer good potential for achieving rapid improvement when the process is complete. The process to complete a compliant competitive tender following a key decision will take three months with a further three months to mobilise the service. Improvement could continue during the mobilisation period. However, as accelerated improvement is currently in train, going through a commissioning exercise at this point in time could slow down the pace of improvement.
 - 4.7.2 **Impartiality** – This option would ensure the service was fully independent of the Council and offered information advice and guidance that is impartial. Appropriate distance from the Council and the Children's Trust's front door arrangements would be achieved. The current arrangements since May 2023 have resolved this issue.

- 4.7.3 **Understands its strengths and weaknesses** – Any tender process would seek evidence that appropriate policies, improvement arrangements, data and information would be in place. Becoming part of a larger family of SENDIASS services would allow for proven ways of applying data and quality assurance processes to be applied. These would be evaluated during any tender processes.
- 4.7.4 **Constructive problem-solving approach** – This option would allow best practice in terms of mediation, problem solving and early rectification of mistakes to be shared from other SENDIASS any successful provider currently manages. Evidence of doing this will be examined during the tender process. The in-house service is now showing problem solving approaches when dealing with queries and requests for support from families.
- 4.7.5 **Promotes best practice** – This option would allow for consistency to be achieved and close comparison and sharing of good practice from other SENDIASS any successful provider manages. The in-house service is now adopting best practice in these areas.
- 4.8 Option 2 would have allowed for improvement to be achieved within a realistic timescale. However, given that noticeable improvement has begun to be made by the service and a robust action plan is in place, undertaking a tender exercise is not recommended at this time, as it could now risk delaying the service's improvement journey timescale.

5 Consultation

- 5.1 The National Children's Bureau's report was taken to the SEND Improvement Board in July 2022 where its findings were discussed.
- 5.2 Engagement has taken place on the review, the options appraisal and the recommended option with the Cabinet Member for Children, Young People and Families and the Corporate Leadership Team (CLT).
- 5.3 The Education and Children's Social Care Overview and Scrutiny Committee considered a redacted version (to remove individuals' personal information) of the National Children's Bureau's report at its reconvened meeting on 25 January 2023.
- 5.4 At that meeting, the Committee agreed three recommendations:
 - 5.4.1 That the Director of Children's Services ensures that all planning, commissioning and reviewing of services in her Directorate complies with the SEND Code of Practice by ensuring it seeks to engage and hear the voices of children and young people, and their parents.
 - 5.4.2 That the appropriate and adequate funding and resourcing was put in place for SENDIASS as a matter of urgency; that the service remains in-house; and that an agreement for joint commissioning work with the NHS was sought as a priority. This path offers the most effective future arrangement for a

SENDIASS in Birmingham reflecting the national pattern of SENDIASS delivery across the country.

- 5.4.3 The Chair together with the Scrutiny Officer to confirm outstanding questions that would be submitted to the report author based on the discussion during the meeting, with a request these were answered by the meeting of Cabinet on 14 February 2023.

5.5 The Committee's first and second recommendations have been accepted.

5.6 In relation to the third recommendation, the Chair and the Scrutiny Officer confirmed outstanding questions will be submitted to the report author, with a request these were answered by the meeting of Cabinet on 14 February 2023. However, it was not possible for the independent author to be compelled to respond by a particular date and no written questions for the independent auditor were received.

5.7 A petition, signed by over 1,000 people, asked Birmingham MPs to raise the 'threats to Birmingham SENDIASS' with the Government Minister responsible for SEND. This petition was submitted at the Full Council meeting in February 2023 and was considered when the options appraisal was revisited.

5.8 When the independent report was published, the Council received feedback from SENDIASS staff, some elected members and a limited number of families opposing any changes to the method of delivering the SENDIASS service. The Council has received no complaints about the SENDIASS service since January 2023.

6 Risk Management

6.1 Risks in delivering against the recommendations made by the SEND Commissioner are identified, evaluated and controlled through the SEND Improvement Board.

6.2 We are aware that we need to make rapid improvements to this service to ensure compliance with the national minimum standards. Any delay to this means families are continuing to receive a non-compliant service.

7 Compliance Issues:

7.1 **How are the recommended decisions consistent with the City Council's priorities, plans and strategies?**

7.1.1 The recommended option supports the delivery of the Council's priorities as set out in the Birmingham City Council Plan 2022:

- Birmingham is an aspirational city to grow up in - we will improve protection of vulnerable children and young people (including those with Special Educational Needs and Disability).

- Birmingham is an aspirational city to grow up in - we will inspire our children and young people to be ambitious and achieve their full potential.

7.2 Legal Implications

- 7.2.1 On 15 October 2021 the Secretary of State for Education issued a statutory direction under section 497A(4B) of the Education Act 1996, directing the Council to take a number of steps including complying *‘with any instructions of the Secretary of State or the SEND Commissioner in relation to the improvement of the Council’s exercise of its SEND functions and provide such assistance as either the Secretary of State or the SEND Commissioner may require’*.
- 7.2.2 The Council is therefore required to act upon the recommendations set out in the SEND Commissioner’s Report dated February 2022, one of which was that there should be an external review of Birmingham SENDIASS with recommendations brought to the SEND Improvement Board.
- 7.2.3 Section 32 of the Children and Families Act 2014 places a duty on the Council to “...*arrange for children and young people for whom it is responsible, and the parents of children for whom it is responsible, to be provided with advice and information about matters relating to the special educational needs of the children or young people concerned...*”. Part 2 of the statutory guidance ‘the SEND Code of Practice January 2015’ sets out further requirements for operating Information and Advice Services, including the requirement that they be impartial and provided ‘at arms’ length’ from the Local Authority and ICB.
- 7.2.4 Under S.111 Local Government Act 1972 the Council has power to do anything (whether or not involving the expenditure, borrowing or lending of money or the acquisition or disposal of any property or rights) which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions.

7.3 Financial Implications

- 7.3.1 The proposed 23/24 net budget is £718,169. This includes estimated Pay Award and other adjustments.
- 7.3.2 There has also been a temporary budget earmarked for Agency resource required in the service for 23/24. This is approximately £455,242 and is to help fund the additional resource required on a short term basis.
- 7.3.3 The above 23/24 budgets quoted are indicative and a review into historical financial governance of the service is currently in progress.
- 7.3.4 The scope of the review includes the historical and current year budget setting and monitoring processes, expenditure on agency staffing, and wider compliance with the Authority’s financial and governance controls. Work on budget setting and monitoring is complete, whilst the review of agency staff

recruitment and expenditure, as well as financial and governance control compliance is on-going as further investigation is undertaken following initial findings.

7.4 Procurement Implications

- 7.4.1 There are no procurement implications related to the recommended option.

7.5 Human Resources Implications

- 7.5.1 As per the recommendation in 2.1.3, there are no immediate HR implications as the recommendation is for the service to be kept in-house.
- 7.5.2 Staff recruitment and management will continue to be conducted in accordance with the Council's policies and procedures.
- 7.5.3 A redesign of the SENDIASS service is planned to take place this year with the aim of ensuring the service has the right number of staff at the right level to successfully deliver the service and achieve positive outcomes moving forward. At present the service is carrying a number of vacancies and these will be reviewed as part of the redesign.

7.6 Public Sector Equality Duty

- 7.6.1 Inspections of Birmingham's services for children and young people with SEND by Ofsted and the Care Quality Commission (CQC) have identified areas of weakness that needed to be addressed.
- 7.6.2 The Council has had regard to the Public Sector Equality Duty and in particular notes that the functions carried out by the Council's SEND services, including SENDIASS, are designed to support the aims set out in section 149 of the Equality Act 2010, particularly for those with the protected characteristics of disability and age.

8 Appendices

- 8.1 **Appendix A** - National Children's Bureau review of Birmingham SENDIASS.

- 8.2 **Appendix B** – Action plan

9 Background documents

- 9.1 Local area SEND inspection (May 2021)
<https://files.ofsted.gov.uk/v1/file/50166306>
- 9.2 Statutory Direction to Birmingham City Council in relation to its Special Educational Needs and Disability (SEND) service provision, under Section 497a(4b) of The Education Act 1996 (October 2021)
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1026624/Statutory_Direction_-_Birmingham_City_Council.pdf

- 9.3 First Report to the Secretary of State for Education by John Coughlan CBE,
Commissioner for SEND Services in Birmingham (February 2022)
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1076725/Final_Improving_Special_Educational_Needs_and_Disability_SEND_Services_in_Birmingham.pdf

Date: 31st May 2022

Part 1.

1.1 Executive Summary

Birmingham City Council (BCC) commissioned the National Children's Bureau (NCB) to conduct an independent review of its current Information, Advice and Support Service (IASS) to ensure the service design and offer was fully meeting its statutory obligations as described in the Minimum Standards (MS). This review aimed to illustrate the strengths of Birmingham SENDIASS whilst identifying areas for service improvements when non-compliance is identified.

This review commenced in March and concluded in May 2022 and is based on detailed discussions with key individuals and a review of the management information available. The review concludes that Birmingham SENDIASS is 85% non-compliant when assessed against the MS. This means the service is only compliant with 3 out of the 20 standards with 55% RAG rated red. These findings are a direct contrast to the information provided by the SENDIASS to the Information Advice and Support Programme in January 2022, where the service self-evaluation return reported it was fully compliant (100%) when assessed against the MS and the management information provided to this review in April 2022 where the service self-assessment return was 80%, when assessed against the MS.

The review found some inadequacies in the SENDIASS infrastructure, including weak policies, lack of a service development plan, an "exclusive" steering group, poor data collection and associated analysis and reporting that is essential to reliably fulfil annual national benchmarking activities (although it does participate in these) and to inform service development and delivery. This could include key data, not asked for by anyone else but necessary to support for example new initiatives or exploring a suspected concern.

This review found the service presents as insular, with entrenched ways of working that do not routinely empower parents or YP and appears to be operating in a silo. Unhelpfully it is seemingly encouraging families to do the same by not promoting constructive or positive engagement with other council related services working with families with SEND. This is further exacerbated by routinely not allowing opportunities for services, particularly SENAR, to put things right in a non-confrontational way at an earlier stage. It reinforces this insular approach by in recent months creating its own YP Participation Group and a parents' group both of which have an unclear remit and, as far as I can ascertain are unknown outside of the service including by the LA, and the Parent Carer Forum (PCF) who have expressed keenness to engage and work in partnership with SENDIASS but to no avail. Understandably this approach and an apparent reluctance to change, also seems to have alienated other departments across BCC.

A fundamental requirement is, and always has been since their statutory status in 2001, for IAS services (previously known as Parent Partnership Services) to be a distinct service that operates at armslength from the LA. This is achieved in a range of ways and from a parent or young person (YP) being perceived in this way can be key to their success. This perception has to be wide reaching for it to be meaningful and true but it was reported to the review by a parent, that they and many other parents they "knew" via a FaceBook local SEND page, didn't trust the service and would never use it unless they were desperate. Birmingham SENDIASS may consider itself to be operating at armslength, but it needs to address the perception of potential service users. Being so intrinsically linked with Front Door appears to be blurring those lines considerably.

Based on the past performance of the LA, particularly prior to May 2021 when OFSTED revisited, it's possible that SENDIASS thought there was little point in trying to get the LA to comply with the legal requirements of the C&FA 2014 and so used their legal knowledge to ensure parents and CYP's rights were protected and believed that appealing to the SEN and Disability Tribunal (SENDIST) was the most effective option. Based on a rather crude calculation (£253,000,000, reported widely since December 2021 as being spent by LAs defending appeals since 1.9.2014, divided by total number of nationally registered appeals = £6206.91 per appeal.) BCC has had approximately 1626 appeals registered since 1.9.2014 to 31.12.21 totalling an astonishing £10,092,435.70 which equates to half a new school. In 2019 Birmingham SENDIASS was the "named representative" in approximately 236 appeals (out of 295 appeals registered against BCC) or in 2020 in 209 (out of 261 appeals registered against BCC). To put this in context, the national average for a SENDIASS service's involvement in some capacity with tribunal cases is 40 a year, and attending and supporting a parent or young person directly is only 4. This latter figure may also include being the named representative. Please see appendices SE1a and SE1b. Even when taking into consideration the size of BCC, this requires significant attention by all departments including SENDIASS, to ensure all earlier options available to resolve issues are explored and exhausted, to avoid the SEN budget being used in such a negative and unproductive way.

The first and immediate decision to be made is how to enable SENDIASS to become a jointly commissioned, adequately funded, distinct and standalone service. There seem to be two options; restructure the existing service and this must include a significant staff training programme, or commission from a different supplier. The action plan is intended to act as a road map to get things on track so the service can deliver all it is required to do. Bringing about such change will bring challenges and will need accompanying support and resources, along with the backing of the SEND Improvement Board et al including HR, coupled with commitment and willingness by everyone, including SENDIASS, to agree a positive way forward. Only when this happens will more families living in Birmingham affected by SEND, be able to have a fully functioning SENDIASS that is fully compliant with the minimum standards and that can be easily "found", as well as being able to access the full range of support it is required to provide and that might be needed.

1.2 Background

This independent review for BCC was conducted by [REDACTED] (NCB associate). Since 2014, [REDACTED] has worked extensively in writing and delivering training to support government funded programmes. [REDACTED] has also carried out similar reviews and investigations both independently and on behalf of NCB following an established format.

It focussed on looking for evidence and formalised processes being in place to support the MS. An extensive investigation was carried out initially remotely looking at management information and documents from 2018 - 2022 shared by CDC in relation to DfE funding through the Information Advice and Support programme (IASP). The review also took into account other reports provided by [REDACTED] and information available in the public domain including the SENDIASS page on BCC website. The purpose of going back to 2018 was to give some idea of progress within the service and also to give a fairer and more accurate picture due to the necessary changes and limitations on practice that arose from Covid restrictions commencing March 2020. The paper exercise was followed up with face-to-face meetings with key LA staff, the SENDIASS and the PCF. The conclusions reached in this report are based on the evidence both written and verbal provided during this review process, or where there is lack of supporting evidence to the contrary, particularly where it has been requested. It has required an exceptional level of due diligence for a variety of reasons, including some confused, contradictory and vague information of which clarity has been sought.

From what I have come to understand, including from Baron Robert Kerslake's review in 2014, Birmingham Council as a whole has been in various states of disarray for many years possibly back to 1.1.2000 when

SENDIASS in its original form as a Parent Partnership Service (PPS), was first established. It would seem that this chaotic backdrop without a fully functioning infrastructure, may have not been conducive to a more conventional PPS/SENDIASS to develop, resulting in the service as it is today. In general, it is not “performing” like any service nationally.

For many IASS nationally, some of what they do isn’t formalised and is on an ad hoc basis. Although at times it may be necessary to work in this way, it can make it difficult to report or evidence. This means it may not be obvious to those outside of the service or possible to “prove” compliance with the MS rather than the service being non-compliant. Where this is thought to be the case, a recommendation for action to address this has been included as everything SENDIASS does, should be accurately recorded and reportable to measure success, progress and compliance, especially where nationally agreed processes exist. This in turn requires the service to have the correct infrastructure in place including for example an independent database; reliable, accurate and accessible information available easily found, usually on their own website; a current development plan; effective management structure; all staff trained and familiar with application of ALL aspects of C&FA 2014 in relation to SEND. As well as helping to “prove” compliance, all of this helps to improve transparency and supports how the service is armslength from the LA.

What should be a strength is that Birmingham SENDIASS has had the same manager since the service’s inception on 1.1.2000 as a Parent Partnership Service. This means the manager will have had numerous opportunities to participate in training, alongside access to extensive resources relating to setting up and maintaining a compliant service etc. and ensure it has all the key elements in place.

SENDIASS services have a strong well established (predating the year 2000) support network consisting of quarterly or termly regional meetings and an eforum where tips and resources are frequently shared. They also have access to NCB dedicated staff who operate the IASS Network. Birmingham SENDIASS is able to access all or any of these to address service challenges they face should they need to.

Although Birmingham SENDIASS appears to be understaffed for such a large LA and is one of the more poorly funded services (see appendices IASSN 3 & SE 1b) ranging from £0.49 to £3.31 per head with an average of £1.20 and Birmingham SENDIASS being at only £0.53, this does not provide the full picture (as explained in 2.2E below).

In addition, Birmingham SENDIASS has received additional funding from the Information, Advice and Support Programme (IASP) administered by NCB on behalf of the DfE for the period 1.4.2018 to 31.3.22 totalling £115,792. No reference to this funding has been included in the annual reports covering these dates or the changes to the service that should have arisen. Given the combination of resources and training opportunities from 1.1.2000, it is not unrealistic to expect that Birmingham SENDIASS should be better placed to:

- comply with all legal requirements
- comply with majority if not all minimum standards (first introduced in SEN Code of Practice 2001)
- have a sound infrastructure including, policies, formalised practice and independent systems for effective recording, monitoring and reporting
- effective management structure to ensure armslength from LA and needs led.

Currently the service is not functioning in this way.

1.3 Agreed tasks

- I. Audit and provide the local authority (Sue Harrison, DCS) with assurance as to the quality of their current SENDIASS offer against the Minimum Standards.
- II. Identify for the LA good practice within current service delivery and where practice needs to improve.

- III. Review existing governance and quality assurance mechanisms and suggest improvements.
- IV. Provide a systematic action plan in light of the audit process to help the LA address non-compliance where this has been identified, or where service improvement should be focused.

1.4. Schedule of meetings to support review process

28.4.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face ([REDACTED] home office)

26.4.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Telephone

10.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face

30.3.22 & 11.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Teams (30/3) & Face to face (11/5)

12.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face

As well as the above meetings a range of documents dating from 1.9.2014 to current day, provided by the IASS and CDC were reviewed as well as an extensive appraisal of the IASS web pages included on the LA website being carried out.

1.5 Documents reviewed to inform this report

Document title & date	
IASP docs from NCB	
A	2018 Birmingham Task Order IASP.11072018
B	2018 Case Study - Assessment and provision of Need
C	2018 Case Study - Innovative Practice October 2018
D	2018 IASP self-review
E	2019 Birmingham IASP service operational plan docx
F	2019-20 Birmingham Task Order IASP TO SIGN
G	2019-21 operational plan
H	2020-21 Birmingham IASP contract variation SIGNED
I	2020-21 Birmingham IASP service operational plan
J	2021 B'ham Oct reporting
K	2021 Birmingham IASP service operational plan updated
L	2021 March report
M	2021-22 Birmingham IASP Task Order
N	2022 Bham contract check-in report form
From Parent Carer Forum	
O	bpcf-sendiass-partnership-agreement (1) (1)
From SENDIASS	
1	Appeal Rates Birmingham & Hampshire comparator Data included 2014-19
2	myth busters created 18.2.21
3	Staffing - SENDIASS Birmingham April 2022
4	1. Birmingham SENDIASS Board Remit Undated
5	4. SEND Statutory Process Training - PFA Team 16th Sept 2021
6	5. SEND Statutory Process Training - CAMHS ST 4.10.21
7	Agenda - Parents SENDIASS meeting dated 20.9.21
8	Birmingham SEND Multi-Agency Front Door dated 3.1.22
9	Birmingham SENDIASS Conference 30 Nov 2021
10	Flyer SENDIASS Professionals Meeting Nov 19.11.21
11	JD - SENDIASS Head of Service Created 3.3.19 last updated 29.9.21
12	Minimum Standards Self-assessment template with notes - SENDIASS Birmingham 23.4.22
13	Parent Partnership Group 2022
14	pg3(A) Allocation Sheet (EHC Needs Assessment)
15	pg3(B) Allocation Sheet (EHCP Progress)
16	pg3(C) Allocation Sheet (EHCP Content)
17	pg3(D) Allocation Sheet (Placement)
18	pg3(E) Allocation Sheet (School or Setting Meeting)
19	pg3(F) Allocation Sheet (Annual Review)
20	pg3(G) Allocation Sheet (Exclusion)
21	pg3(H) Allocation Sheet (Other)
22	pg4 Professionals involved
23	pg5 Family Targeted Assessment
24	pg6 Genogram
25	pg7 CYP Views & Details of Direct Work
26	pg8 Signs of Safety Form
27	pg9(i) Working with Parents & Carers
28	pg9(ii) Working with CYP
29	pg14(i) Quality Assurance Form Parent Carer
30	pg14(ii) Quality Assurance Form - Young Person
31	SEND Statutory Process Training - BCT Disabled Social Care Team 8.10.21

32	SENDIASS Board Agenda - Monday 17th January 2022
33	SENDIASS Board Minutes 17th January 2022
34	Young People's Participation Charter Undated see line 35
35	Young Peoples Participation Charter Created 2.12.21
xSENDIASS - Information Pack (not dated for creation, review or update)	
36	1. SENDIASS Information Pack Contents Page
37	Leaflet SENDIASS
38	SENDIASS - Annual Review Process
39	SENDIASS - Annual Review Timescale Chart
40	SENDIASS - Appeals
41	SENDIASS - Areas of SEND
42	SENDIASS - Assessment Process
43	SENDIASS - Assessment Timescale
44	SENDIASS - Confidentiality Policy
45	SENDIASS - Definition of Advocacy
46	SENDIASS - Disability Discrimination
47	SENDIASS - EHCP 'Cease to Maintain'
48	SENDIASS - Exclusions
49	SENDIASS - Home to School Transport
50	SENDIASS - Impartiality Policy
51	SENDIASS - Information for Young People
52	SENDIASS - Issuing an EHCP
53	SENDIASS - Mediation
54	SENDIASS - Naming a Placement
55	SENDIASS - Personal Budget
56	SENDIASS - SEND Support & School Funding
57	SENDIASS - Tribunal Hearings
58	SENDIASS - What are Special Needs
59	SENDIASS - What is an EHCP
60	SENDIASS - Young People with SEND
SENDIASS Annual Report (6) (from SENDIASS)	
61	SENDIASS Annual Report (1) 1.9.14-31.8.15
62	SENDIASS Annual Report (2) 1.9.15-31.8.16
63	SENDIASS Annual Report (3) 1.9.16-31.8.17
64	SENDIASS Annual Report (4) 1.9.17-31.8.18
65	SENDIASS Annual Report (5) 1.9.18-31.8.19
66	SENDIASS Annual Report (6) 1.9.19-31.8.20
Joint Commissioning – 2021 (from SENDIASS)	
67	Item 1 - Covering Note 12th January 2021
68	Item 2 - SENDIASS Joint Commissioning Paper 30th June 2020
69	Item 3 - Schedule A SLA Joint Commissioning Created 28.12.19
70	Item 4 - Schedule B Joint funding SENDIASS Created 27.6.20
71	Item 5 - Schedule C Financial Overview SENDIASS Created 26.12.19
72	Item 6 - Schedule D data processing Created 26.12.19
73	Item 7 - Schedule E Joint Funding SLA SENDIASS Created 26.12.19
74	Item 8 - Minimum Standards with DfE DH sign off
75	Item 9 - Birmingham IASP contract variation 20-21 SIGNED 31.3.20
76	Item 10 - Cat 2 Restrictions. Action Plan Created 9.6.20
77	Item 11 - SENDIASS Operational Plan Created 27.6.20
78	Item 12 - SENDIASS Leaflet
79	Item 13 - The Role of SENDIASS in the Community Family Educational Recovery Programme (2020) Created 27.6.20
80	Item 14 - Quality Assurance Form

1.6 Documents created as additional supporting evidence

APPENDIX REF	TITLE OF DOCUMENT
App SE 1a	SENDIST data costs re B/Ham
App SE 1b	SENDIST Data comparisons re B/Ham
App SE 2	Summary of additional funding to IASS via IASP from NCB 2018-22 (ref 1.5 A-N above)
App SE 3	Summary re casework numbers from each annual report
App SE 4	B/Ham Quality Assurance Form Parent Carer (Evaluation form)
App SE 5	Summary user satisfaction stats from each annual report
App SE 6	Anonymised emails to SENAR
App SE 7	Minimum Standards final RAG rating
App SE 8	Notes of meetings with [REDACTED]
App SE 9	Documents reviewed to inform report with comments

1.7 SENDIASS – Overview (meetings with [REDACTED])

30.3.22 via Zoom and in person 11.5.22 in Birmingham City Council offices)

[REDACTED] expressed strong views that the LA really do not want a SENDIAS service or want to have anything to do with them. [REDACTED] feels they want to crush it because they “trample over their green shoots”. [REDACTED] believes they are not liked because they “are too truthful” and honest.

Topics of discussion

- Annual reports/data recording; purpose, level of detail and availability
- Parents Group and Young People (YP) Participation Groups; membership, publicity and purpose
- Outsourcing; pros and cons
- Staffing; structure and roles
- SENDIASS website; content and status
- Tribunals; SENDIASS role
- Service evaluation; content, roll out and return rate
- Steering Group; membership and role
- Young People (YP); casework and consent
- PCF; relationship

See Appendix SE 8 for further details of discussions

Part 2. Review outcomes

2.1 Identified strengths in the service offer

- A. It has an Access database – this means it will be easy to build in all the required elements of recording relating to casework.
- B. All staff seem to have accessed and completed levels 1 to 3 of the IPSEA Legal Training programme.
- C. The [REDACTED] speaks 5 community languages
- D. Some families like the service they receive. National IASSN reporting in 2021 regarding feedback received, included the following quote attributed to Birmingham SENDIASS

Q5 Overall how satisfied are you with the service we gave?

'We need you to continue doing what you do without barriers. Funding is an issue all round. You are a testimony of excellence considering funding struggles,'

2.2. Identified weaknesses in the service offer

A. Data recording is unreliable, incomplete, insufficient, and not being reported or analysed effectively

Poor data recording. The only data provided for this review, despite making several requests, is that which is included in the annual reports. However, this is very basic and relates mainly to gender, ethnicity, year group, postcode and breakdown of some types of cases. This is unusual and means that the service does not have the necessary evidence for the work it does, the work it is unable to do and the demand on the service/in Birmingham.

I asked [REDACTED] via email 25.4.22 for a breakdown of further information ([REDACTED] responses are in blue):

- i. How many for each of the national intervention levels (1-4) or certainly a split between helpline one-off calls and casework. **All these are LEVEL 4 as the requirement was to only report on these.***
- ii. How many cases relate to SEN Support vs EHCP related etc. **These are all EHCPs as the requirement was to only report on these as a comparator for the SEND EHCPs in the Department.**
- iii. How many direct referrals are there from CYP. **None, the CYP area of work has only started since September 2021. This is in contradiction to Annual Report 5; 2018-19 "A particular feature of this year's work has been providing information, advice and support to children and young people directly." Their stats since then include over 60 at one time of 16+ (>Y12).**
- iv. A breakdown re the route to the service i.e. how service is initially found. Again broken down to distinguish between parents and CYP. **This has not been captured as a reporting target previously and will begin from September 2021.**
- v. The Annual Report for 2020/21. **This has not been produced as SENDIASS casework data and SEND Early Help Front Door data have not been kept separate.**

* A follow up email was sent 25.4.22 asking who had specified this requirement – no reply was received.

The "Allocation forms" (parent details and recording forms) currently in use, possibly introduced for Front Door (see Section 2.2E for further information), mention IMPULSE and as SENDIASS uses an Access database it would seem they have 2 recording systems in use. I can only conclude SENDIASS is also now recorded only on IMPULSE, the LA system because if it was still on Access it would be available. Birmingham did participate in the IASSN annual benchmarking activity (IASSN Funding, Casework and Staffing Data Report) for 2021. I am unclear what data was submitted in relation to casework.

There appears to be no data analysis. Usually this would be a minimum of termly or quarterly to monitor changes in trends so that service delivery can be adapted accordingly, including service delivery such as developing resources or providing training for professionals or parents/YP. This should be clearly reported in an annual report (available publicly) and reflected in the service development plan. It should also inform strategic work with the LA and is usually a requirement for commissioning, including joint commissioning purposes or for making a business case for extending the service to inform and support the narrative. Services are expected to follow the nationally agreed 4 levels of intervention (Appendix IASSN 2). The 4 levels distinguish between the level of complexity of cases and the SENDIASS staff time factor involved. This is important for the purposes of national reporting and benchmarking as well as for service development. Level 1 equates to one-off enquiries at the helpline stage and could include signposting to additional resources etc and level 4 is "Detailed and continuing assistance and guidance with preparation and support during: First Tier Tribunal (SEND), including DDA complaints to Tribunal, Complaints to Ombudsman, Judicial Review, Disputes about Child Protection". The guidance included in Appendix IASSN 2 makes it clear to services what

is expected, including examples of casework for each level and when to send the evaluation form, an expectation for each of the 4 levels when the case is closed.

Statistical evidence is also helpful to demonstrate if the service doesn't have capacity to meet demand. This again would be a typical requirement to support a business case or commissioning. When asked if SENDIASS recorded service deficit (occasions when they could not provide support to families due to lack of staffing capacity), SENDIASS said (30.3.22) they didn't because such occasions never occurred as everyone gets support, including a same day service if needed. Unexpectedly the service manager still carries a caseload. When asked about other barriers that might prevent the service being able to offer support such as local geographical challenges or language, this was quickly dismissed as the [REDACTED] informed me [REDACTED] speaks 5 languages and they are perfectly located centrally with good transport links.

The "Allocation forms" being used have SENDIASS as their heading with no mention of Front Door. They have titles for different types of enquiry relating to elements of SENDIASS work such as EHC Needs Assessment, EHC Progress, Placement, Annual Review etc. with each form also stating: "Ensure you have obtained all the relevant information to complete the Family Targeted Assessment, Genogram, and Signs of Safety straight away." These additional forms are also cause for concern:

- "Family Targeted Assessment" this very much follows the medical model of disability and consequently not at all person centred as intended by the C&FA. All casework should be underpinned by the Section 19 Principles. There is no mention of aspirations or desired goals, interests etc. No reference to impact on home life or what family needs to be different and what that might look like. It does not reflect the values included in the YP charter which hold true for all CYP and their families. Not a typical or relevant approach for IASS to adopt.
- "Genogram" Most of this info is not relevant or required for IASS work and again is too intrusive. Could use person centred circles of support instead if relevant.
- "Signs of Safety" It is not standard or necessary for IASS to have such a form. It is not their role to identify signs of risk and try to intervene but to escalate appropriately whenever safeguarding might be an issue. This is another example of blurring the boundaries, compromising being armslength and also breaching the "impartiality policy" i.e. non-judgemental. Staff may not be "qualified" to make this judgement call, if they are it is not relevant to the role they are fulfilling in SENDIASS i.e. they are not employed as social workers.

NB. GDPR requires services to only have info that is relevant to the task in hand.

B. Poor infrastructure, weak unimplemented policies, failure to empower families or deliver casework or operate in line with typical practice of IAS services

- i. Based on the evidence available it would appear that the service is focussing on, or prioritising cases that can be escalated to formal and publicly reportable redress namely SENDIST. Despite the review making several requests, including on 11.5.22 when it was agreed to provide full breakdown of casework by 5pm 13.5.22, there is no evidence to demonstrate what levels of casework exist apart from Level 4 intervention (Tribunals). What's more, during this review worrying examples have emerged where SENDIASS has not provided accurate information that would have meant situations raised with them could have been resolved at casework levels 1-3. This included where a simple telephone enquiry asking why Section I was left blank in the draft EHCP, resulted in being told "don't worry about that – go to Tribunal!". When the same parent spoke to other (Birmingham) parents about this, they all said they had received a similar response from SENDIASS. Furthermore, an example was provided of SENDIASS explaining to a parent "I am so sorry SENDIASS cannot help you as we do not have a Decision to Appeal – you should have received a response to the Annual Review by now." This clearly looked like a situation that "qualified" for SENDIASS to be offering information, advice and support and yet the parents, who from the content of the email appear to be really struggling and in desperate need for support, were refused any further assistance from SENDIASS.

- ii. **Not being armslength or operating within permitted and widely accepted SENDIASS boundaries** meaning it is unlikely to fulfil the armslength requirement all the time, therefore, it cannot be viewed as armslength per se. Impartiality and being armslength from the LA with regard to parents and YP usually comes down to perspective. It is important therefore, particularly for an in-house service to establish consistent and clear boundaries around the service to ensure it can maintain its distinct and unique position. This can in part be achieved by having strong impartiality and confidentiality policies, shared with parents or CYP from the outset and that are understood by everyone within SENDIASS and all stakeholders, and upheld to the letter (see “x” below). Neither of these things appear to be happening in Birmingham. [REDACTED]
[REDACTED] It is also acting at times as if it is the LA representative by directing or telling a school what it should do, or speaking with an authority to parents/carers that SENDIAS services do not have such as informing them they can take the child off role (parents do have this right) and the LA will provide 4 hours of home tuition each day (this is for the LA to decide and would usually be dependent on the individual circumstances). It is possible this is raising unrealistic expectations and is certainly not empowering families or making them aware of all their options.
- iii. **Not respecting/recognising boundaries of others.** This includes sending emails on behalf of parents and/or cc’ing parents and numerous people within the LA, often at an inappropriate level. For example a situation that should be addressed at an operational level such as a SENAR caseworker in the first instance. SENDIASS recently contacted a senior LA officer requesting a copy of an EHCP on behalf of a school. They were refused – it is unclear why the school, if for example they had mislaid their copy, couldn’t have made the request to the LA directly themselves. SENDIASS then contacted an even more senior LA officer (DCS) with the same request, except this time it was reported as a safeguarding issue and was making the request under the guise of Front Door. It is still unclear why usual and established safeguarding protocols weren’t implemented either by the school, SENDIASS or Front Door. This could have caused avoidable delay and unnecessary confusion. Given the recent high national profile arising from professional confusion leading to potentially avoidable tragedy, this approach should be avoided at all costs. Everyone should follow the LA existing protocols and policies regarding safeguarding without adding unnecessary additional levels.
- iv. **Duplication and insular approach.** Although many SENDIASS have developed their own YP participation group and some a specific parent group, what is unusual about the Birmingham arrangements are that the already established PCF and those in the LA that I spoke to, knew nothing about their existence. Neither of the SENDIASS groups are “advertised” and it is unclear what their remit is, or visible/accessible to others who may want to join. It is also unclear if it is the YP or the parents themselves who are reaching out, or if SENDIASS staff are doing so in their name or on their behalf. This lack of transparency reinforces how the service is operating in a silo.
- v. **Representing in all Tribunal appeals instead of making case by case decisions according to individual circumstances.** It is reported in all annual reports that the LA states that SENDIASS is representing (confirmed by LA this means acting as their representative not “supporting” or “involved with”) 80% of all Birmingham Tribunals. This equates in 2019 to SENDIASS representing in approximately 236 appeals or in 2020 in 209. To put this in context with regard to the national picture, the IASSN Funding, Casework and Staffing Data Report 2021 reported, that *“Tribunal numbers continue to rise. Services are supporting an average of 40 tribunal cases a year in some form, and attending and supporting a parent or young person directly with 4”*. [REDACTED]
[REDACTED] IASSN, clarified that “directly” in this instance means attendance at the actual hearing or representing. [REDACTED] confirmed that SENDIASS details are on the Tribunal forms in the “representative” fields and the “representative” box is ticked for them to be the contact from SENDIST. This means that SENDIST communication is NOT going to parents at all but directly to SENDIASS. Usual practice would be to get the parent to get back in touch when they receive communication and forward it to SENDIASS not the other way round, unless there are exceptional circumstances requiring a representative. The requirement is stated in MS 3.5 as “The IASS provides

information, advice and support before, during and following a SEND Tribunal appeal in a range of different ways, dependent on the needs of the parent or young person. This will include representation during the hearing if the parent or YP is unable to do so."

SENDistT guidance on this states:

Who can be a representative?

A representative is someone who will give advice on the issues in the appeal, prepare the paperwork and represent the person making an appeal to the Tribunal. They can also be an advocate. They could be a volunteer from a charity, a paid representative, a solicitor or barrister. **Most appeals to the Tribunal are made without a Representative. The Tribunal will support both parties through the process of making an appeal to ensure that it is decided fairly and justly.**

- vi. **Casework for YP either over 16 or over 18s.** This is very confusing. The way that stats are reported in all the annual reports since 1.9.2014, illustrates casework for year groups from Y12 upwards i.e. YP. For period 1.9.2014 to 31.8.2020, 250 YP feature in stats, 127 of these are 18 or over. In report 5; 2018/19 it stated **"A particular feature of this year's work has been providing information, advice and support to children and young people directly."** Which implied that prior to that, the casework relating to YP was still carried out with their parents. It seems unlikely they all could be assumed as lacking capacity. Annual report 6 2019/20 noted a significant increase in referrals relating to YP i.e. 66 compared to 48 in previous year but didn't mention anything else about this during its report nor does it at any time include any stats relating to parents referrals compared to CYP directly contacting the service. I asked SENDIASS for clarification via email 25.4.22 "How many direct referrals are there from CYP?" The reply **"None, the CYP area of work has only started since September 2021."** Nationally many services reported an increase in referrals from CYP during lockdown. This was down to a range of reasons e.g. they were at home and not in school so were around when their parents were contacting the service and they liked and were comfortable using various technology to contact the service. Unclear why the national pattern of contact with CYP wasn't replicated in Birmingham. Although SENDIASS said they always explain they will need to speak directly with the YP to get their views if their parent contacts the service and always get written consent from YP before they engage with them, an anonymised email copying the LA in, dated Aug 2021, shows SENDIASS in contact with a parent re Post 16 placement for a YP described by the parent as "quite capable". It doesn't make any reference to speaking directly to the YP or requiring consent. The vagueness regarding data recording and the mixed information provided when direct work actually started, unfortunately makes it very difficult to understand what exactly is going on.
- vii. **Not all SENDIASS staff equipped with appropriate skills and knowledge to do the job including providing IAS to empower families.** It is fundamental that SENDIASS services do not take over but empower parents and YP in every way, not just with their rights but to enable them to engage and contribute including with all aspects relating to EHCPs. The SENDIASS "allocation sheet – EHC Needs Assessment" includes the following *guidance* **"If the CYP is on roll at a school/setting, ask the parent to arrange a meeting for you and the parent to also attend to discuss the CYP's learning and for the parent/carer to discuss their concerns. (You can contact the school to ask for a meeting/more information if you feel that is more appropriate)"**. This is potentially disempowering parent from the outset. It is unknown how schools respond to such a direct request from SENDIASS. It is hoped they would ask to see written permission before sharing information however, if the request is made under the guise of a qualified or student social worker, would a school realise they are only acting in the capacity of a member of SENDIASS and their professional qualifications are irrelevant and would go along with such a request. Another example of how confusion can arise and the boundaries being blurred.
- The review has received worrying recollections from the LA and a parent. In a recent mediation meeting where a SENDIASS member of staff supporting a parent with a refusal to access appeared to have adopted an advocacy model of taking on the issue as if it was their own. The SENDIASS member

of staff is described as insisting on a special school (assuming this is what the parent wanted) without understanding this is not even possible without an EHCP and the meeting was about refusal to assess. A parent reported how when she first contacted SENDIASS because she wanted some assistance requesting a statutory assessment. She was very surprised by the response she received when she phoned them – she was asked what exactly she expected them to do about it, they were too busy and expecting an important phone call and hung up. Mum made a complaint and received a response from [REDACTED]. (NB SENDIASS in their annual report state they do not receive any complaints).

- viii. **Evaluations/feedback.** Although in annual reports since 2018, it states it requests feedback based on the QA form that CDC have produced (Appendix IASSN 4). It has changed Q2b completely. The national one is carried out anonymously and contact details are optional. They are sent out at the end of all enquiries when the case is closed. The Birmingham SENDIASS version (Appendix SE 4) requests contact details not offering this as optional. The forms are then added to case files. This is not in the spirit that is intended. According to feedback from a small sample from PCF recently involved with SENDIASS, none of them knew anything about a feedback form. In every annual report from 1.9.2014 to 31.8.2020 It includes similar wording “it is worthy of note, over the 4 years since the changes in legislation, the service has received no ranking below satisfactory;”. Only Q5 has a “satisfaction” rating (0=Very unsatisfactory to 4=Very Satisfied) so this cannot be assumed they are positive about all aspects included in the other questions in the evaluation form.
- ix. **Annual reports** are vague and repetitive from one year to the next, much of it cut and pasted without any changes. They do not include sufficient detail or include information relating to such as new initiatives or service development. There is also no reference to any of the service changes or projects being funded by IASP including the website development. There has not been an annual report since 31.8.2020. The reason for this is being given as because there’s no separate data for SENDIASS as it’s all mixed in with Front Door. The annual report should consist of several elements with stats being just one of them. I am unclear who the annual reports were shared with in the past, but they were not available in the public domain and they should be.
- x. **Policies** available for the review were the Confidentiality Policy and Impartiality Policy. Neither are sufficiently detailed meaning they are weak. The Confidentiality Policy is far too vague and doesn’t explain what confidentiality means and its boundaries or how it is applied operationally. The Impartiality Policy is also not robust enough as it doesn’t explain how the service delivers or maintains impartiality. What it does correctly state it doesn’t implement e.g.
 - “We will help families with decisions regarding services and options in relation to schools and other service providers in a similar, open manner
 - We will provide full information and advice distinguishing between guidance, legislation and local policy to assist families to fully explore all options and to come to their own decisions. We will avoid advising people ‘what to do’”
 - We will build good cooperative relationships with our colleagues throughout the local authority, Children’s Trust and Health to ensure that our respective roles are well understood and respected.

Based on the written information shared via its web page and provided to this review, there is little to no evidence to suggest it delivers on these points.

- C. **Poor quality, misleading and unclear information being provided.** The little information available on the SENDIASS web pages on the LA website is geared towards formal address and not early intervention or non-confrontational resolution. It also includes incorrect information biased towards the assumption the LA is wrong. It is not impartial meaning it should relate to the law and in context, clearly explaining any wider implications it may have. None of them are written in plain English and do not empower parents or YP by outlining what all their options might be or include any reference to how SENDIASS might be able to assist at all stages. None of the animations relating to EHCPs produced by CDC are included and there is no separate or accessible information for children or YP.

D. **Service is virtually invisible - no website.** The service has minimal presence online and does not use social media and was not keen on my suggestion to use it as a quick way of disseminating information. The fact that a page on the LA website, containing only brief information and considerably less than the MS require, was seen by SENDIASS as sufficient for it to be considered compliant with the MS 3.3 is worrying. The web page also doesn't include any accessible or plain English information. It also doesn't have a complaints policy included as stated in the MS. A copy of a complaints policy has not been submitted to the review amongst key documents, so it is unclear if they do have one. The refusal to consider social media such as FaceBook when nationally, when managed well, it has been found to be a very effective way of disseminating information to parents and also easy for them to share to an even wider audience.

E. **Ineffective staffing structure breaching the requirement for the service to be armslength.** Birmingham SENDIASS is no longer a "distinct" standalone service due to the overlap with the "Front Door" project it created although it provides a different service to SENDIASS. Once again the boundaries between the two being blurred or non-existent. It was explained the Front Door project came into existence at the start of lockdown in March 2020 and was funded until 31.3.22. It is unclear if it currently has any official status within the LA as it seems to be a Social Care based approach but is not in the Children's Trust with the other Social Care departments and services. See appendix SE 8.

There is such confusion and crossover between SENDIASS and Front Door roles, as it seems to be the same staff, with over 30 agency staff, operating across both. They all appear to use SENDIASS in their job titles e.g. in emails or in attendance at meetings. The staff structure originally provided to the review on 13.4.22 included only 4 posts and makes no reference to vacant post(s) or volunteers, yet SENDIASS has for many years had 12 Social Work students at a time on placement (up to 60 in a year), who are unpaid with zero costs in terms of out-of-pocket expenses, who are supported by 2 agency staff also not included in that staffing structure. On 11.5.22 SENDIASS described their structure as much greater than the original document (up to 50 members of staff) and agreed to provide a full staff structure but didn't. It is impossible to understand the current staffing arrangements, which could provide useful evidence going forward in understanding the levels of staffing needed to meet the actual demands on SENDIASS. The review has been unable to ascertain what the overall budget for all this is or where/how the core SENDIASS funding is being applied. The review was told that an enquiry might start off as SENDIASS case but then becomes Front Door or possibly the other way round. No information has been offered regarding the referral pathway for Front Door in its own right.

[REDACTED]

F. **Ineffective management structure including Steering Group (SG).** The terms of reference, agenda and minutes from January 2022 meeting provided for the review raise some concerns, such as the agenda and minutes not making any reference to being updated by or monitoring SENDIASS performance or overview of a service development plan. SG minutes for a longer period of time might have given a different perspective but they were not provided as agreed. Although PCF are not on the SG because SENDIASS doesn't want to "add to their burden..." the PCF confirmed they had actually asked SENDIASS to be on SG but had been refused. They are prepared to be on it. They also confirmed there are no parents, YP or CVS on it. Given the profile of the current SG, minutes from 17.1.22, which was well attended, 13 attendees (excluding SENDIASS staff) included 8 "Independent Members" (described to the review as "those with an interest in SEND which could include parents" – but none of them are), with

apologies from a further 13 that included 3 more “Independent Members” and 2 city councillors, it could be quite an intimidating and overwhelming atmosphere for parents and YP to feel they have any voice never mind an equal voice. The current profile of the SG, although may look impressive on paper, means it does not fulfil the requirements of MS 1.7.

G. Non-compliance with majority of Minimum Standards

The self-assessment completed by Birmingham SENDIASS for national reporting in January 2022 rated the service as fully (100%) compliant with the MS and on 25.4.22 for this review at 80%. The reason for the difference in the 3 months was attributed to the external review stalling the joint commissioning process.

Based on the evidence provided for this review it is considered to be non-compliant with 85% of the MS. This means it is only compliant with 3 out of the 20 standards and 55% are RAG rated red.

Examples of non-compliance that are not separately covered in A to F above are:

- i. No Service Development Plan
- ii. Not jointly commissioned – the one that the SENDIASS manager cites as being responsible for 3 of her 4 identified areas of non-compliance and was being championed because of the extra funding it is expected to bring
- iii. No strategic work either within service or with stakeholders

2.3. Proposed aims to address weaknesses

Given the overall non-compliance with the minimum standards, there is a need for drastic action to be taken here.

1. SENDIASS to become a distinct and standalone service again with its own staff who are not employed in any other LA department or service. Consideration needs to be given whether this can be achieved by keeping the service in-house with a major restructure or whether it should be commissioned to a different supplier. If the latter, given the size of Birmingham Council and the low starting point of where the service currently is, there will be a need to consider restricting the tendering applications in terms of efficiency and reliability, to only coming from larger organisations with established systems in place and experience at running successful SENDIAS services, compliant with at least 85% of minimum standards, in larger size authorities.

The following points need to be factored in with either option in point 2.3:1 above.

2. Service to be restructured to include employing sufficient permanent staff and dedicated admin support, with JDs and grades to match the levels of responsibility to reduce reliance on student social workers (they can still be deployed within the service, if it appropriate to their placement requirements but e.g. in level 2 cases only). All staff, existing and new, will be required to participate in a prescribed “back to basics” training programme.
3. Effective management arrangements for staff, finances etc and a properly functioning steering group in accordance with MS.

4. For the service to be jointly commissioned in line with MS 1.1. For a Service Level Agreement (SLA) to be produced, pinned tightly against MS, including management arrangements, quality assurance, monitoring and reporting requirements etc.
5. To ensure it has a sound infrastructure to include robust policies, formalised processes and sufficiently detailed data recording in place.
6. For the Birmingham SENDIAS Service to adopt a transparent, streamlined, methodical, evidence based and systematic approach across all aspects of their service underpinned by robust quality assurance and reliable data.
7. To be compliant with all of the MS e.g. website, development plan, armslength, impartial etc.
8. To improve and increase visibility and transparency of the Birmingham SENDIAS Service for all families entitled to receive a service and not just those with a right of appeal.
9. For the Birmingham SENDIAS Service to be proactively and constructively engaged strategically, informed by reliable evidence and data, to start to promote positive relations between the IASS and key LA partners/depts and for a culture of trust to start to grow. This should ultimately lead to achieving better outcomes for families by helping others “get it right” and reduce the need for IASS to be involved in a negative and reactive way.

2.4. Required action to deliver on the aims

Uncouple SENDIASS from Front Door with immediate effect i.e. each has its own staff without any crossover and distinct database.

Explore both options in point 2.3:1 above with agreement established for joint commissioning and the level of core funding required for the service to become and maintain full compliance, and meet the needs of the community it is required to serve effectively and efficiently. Whichever option is decided upon the following and all the actions outlined in the table 2.2A to 2.2G below still apply.

Ensure the service has a sound infrastructure, adopts typical approaches employed nationally and is compliant with the Minimum Standards

The time factor and the range of skills, knowledge and experience to effectively deliver the aims outlined in 2.3 above and the actions outlined in the table 2.2A to 2.2G below, are not to be underestimated and it is expected that a range of additional resources, including external support will be required to achieve it all.

This action plan below is expected to act as a road map to establish a fully functioning and compliant strong SENDIASS capable of meeting local needs across all levels of SEND and with the correct systems and processes in place to keep it so. This plan needs to be considered in the spirit it is intended and what mustn't happen is scrutinisation to seek out gaps to be exploited as an opportunity to derail any attempt to improve outcomes for SEND families living in Birmingham.

A relaunch of the service should be considered once all the basics are in place and new practice is established, to make it clear to all stakeholders it's an “out with the old and in with the new” approach.

2.5. List of appendices to support delivery of the aims

APPENDIX REF	TITLE OF DOCUMENT	REPORT REF
App IASSN 1	IASS Minimum Standards	
App IASSN 2	Intervention levels for IASS August 16	2.2.A3
App IASSN 3	Funding, Casework and Staffing Data Report 2021	
App IASSN 4	IASS Service User Evaluation EXTENDED Oct 15	2.2.B5
App RK 5	Sample Initial Enquiry doc to illustrate key fields	2.2.A1; 2.2.A2
App RK 6	Sample STATS CODING examples re nature of enquiry	2.2.A1; 2.2.A2
App RK 7	Monitoring report template	2.2.A5; 2.2.B10
App RK 8	Confidentiality policy suggested wording	2.2.B1
App RK 9	Impartiality Policy suggested wording	2.2.B1
App RK 10	EMPOWERMENT MODEL and evaluation 2022	2.2.B2; 2.2.B8
App RK 11	Evaluation by professionals	2.2.B5
App RK 12	Complaints procedures and IASS	2.2.B9
App RK 13	Volunteer JD or description	2.2 E6
App RK 14	Volunteers advert	2.2 E6
App RK 15	Steering Group TOR	2.2 F2
App RK 16	SLA draft against MS - 2 appendices incl TOR and AR template	2.2 G1
App RK 17	IASS Dev Plan re MS blank template	2.2 G2
App RK 18	Section 19 principles	2.2 B4

Proposed Action Plan

2.2 A	To establish reliable and sufficiently detailed data recording so it can be analysed effectively to inform strategic planning		
Action ref.	Suggested actions to take	By who	completed by
1	To update and maintain SENDIASS Access database to accommodate wider level of detail to support all aspects of service development and delivery and to fully support national benchmarking. (Sample Appendices RK 5 and RK 6 to illustrate level and type of detail to be considered). The database is to be exclusively used for recording SENDIASS work only. To clearly distinguish between direct contact with YP vs parents and record appropriate permissions received. Referral pathways are easily reported on		
2	To develop new referral forms to record appropriate personal details and key information relating to the casework issues to be recorded in line with GDPR requirements i.e. no "one size fits all" recording extraneous information not pertinent to the individual circumstances. (Sample Appendices RK 5 and RK 6 to illustrate level and type of detail to be considered).		
3	Service to adopt, apply and accurately record the nationally agreed 4 levels of intervention (Appendix IASSN 2).		
4	To ensure they ask and then record and date if parents give permission to speak to others stating exactly who e.g. school staff, EP, SEN case worker etc. and also to note anyone they refuse to give permission for (this may form part of a discussion). This needs to be routinely checked and updated. It is not to be assumed as an open-ended agreement.		
5	Data should be routinely "pulled off", ideally monthly but a maximum of termly, for analysis. All key data should be presented for a range of audiences including e.g. commissioners, steering group, etc and be included in regular public reports e.g. termly or annual reports (sample template for reports attached Appendix RK 7) made available e.g. on website. See 2.2 B9 below		
6	Database is exclusively accessed by SENDIASS employees and volunteers only. Ensure all staff within SENDIASS understand the recording requirements and establish system for database to be routinely and efficiently updated i.e. without unnecessary delay preferably by dedicated member of staff i.e. administrator post to reduce or avoid mishaps.		

2.2 B	All operational processes and procedures are formalised and policies are sufficiently detailed to be clear and watertight		
Action ref.	Suggested actions to take	By who	completed by
1	To update confidentiality and impartiality policies (Sample policies attached Appendices RK 8 & RK 9) to ensure they are watertight and improve transparency. To add dates re: created, amended and next review and make them widely available. Make sure all SENDIASS staff including temporary or volunteers, are fully briefed and understand how they are applied operationally. Make sure all stakeholders have a clear understanding of them.		
2	To adopt an empowerment model of service delivery supported by improved information being available. (See Appendix RK 10) See 2.2 B7 below Develop plain English step-by-step truly impartial resources to support parents/YP in understanding of what their rights are outlining all their options to implement them, promoting an engagement model and not a confrontational approach from the outset. Make available on website and everywhere else that is relevant. Can also be mailed out. (See 2.2 D3 below) If appeal made to tribunal ensure it takes a “supporting” role and can explain any exceptional circumstances that requires it to “represent” i.e. representation will be the exception not the norm. Routinely provide training sessions for parents/YP on common themes such as SEN Support and reviews, Draft EHCPs, Annual Reviews, including how to get the most out of meetings. (NB encourage parents to identify who their natural supporter is i.e. within their family, friendship circle or community and invite them to training sessions with them.) offer via face to face or virtual and at different times to improve reach.		
3	For all staff to clearly understand and stick to the boundaries of their role and the SENDIASS remit. This includes when supporting parents in escalating a concern, it is done with respect, at the appropriate level, promotes and encourages partnership working. Only suitably trained and experienced staff should be dealing with level 4 interventions. Lesser inexperienced staff could joint work and shadow at meetings (with all party agreement) e.g. mediation to continue their professional development.		
4	Staff handbook to include step-by-step processes Accelerating completion of IPSEA legal training (levels 1-3) should be considered alongside the need to consolidate learning and application before taking next level. All casework should be underpinned by Section 19 Principles (See Appendix RK 18).		
5	The nationally agreed evaluations to be sent out at the end of each case (according to the guidance in Appendix IASSN 2) preferably the extended version (Appendix IASSN 4) The short version is the 6 questions in the yellow boxes only. These should be sent out in the spirit that is intended, that is anonymously and kept separately i.e. not attached to case file. These should be fully recorded, analysed e.g. service practice might need to adjusted, and included in the Annual Report in full i.e. all questions. Numbers sent out and percentage return should also be included. Evaluation forms should also be adopted for capturing professional feedback e.g. those attending a meeting with SENDIASS and parents. (Appendix RK 11 sample)		

6	To consistently follow and apply at all times the impartiality policy. This includes being clear with all stakeholders that the service only accepts direct referrals from parents or CYP and only in exceptional circumstances will it deviate away from this principle. The service will not store or have access to reports without the consent of the parent/YP.		
7	Service development plan to address all areas of non-compliance. Consider involving permanent members of staff as each taking an area of responsibility e.g. website, resources, training, CYP, etc. to foster a collective ownership and pride in the service.		
8	Introduce a formalised triage system (when to ensure cases are consistently prioritised according to set criteria. Service deficit recording to be introduced and reported See 2.2 B 2 above. Appendix RK 10 NB this can only be piloted when range of step by step resources are available		
9	To have its own complaints procedure (Appendix RK 12 sample)		
10	To produce an annual report based on termly/quarterly reports. (Appendix RK7 suggested template) These should be available publicly e.g. website, LO, mailshot etc. It will include as a minimum: <ul style="list-style-type: none"> I. Self-assessment e.g. RAG rating of Minimum Standards with examples of evidence if green and explanations or actions if amber or red II. Full stats broken down re casework, referral pathways etc and analysis including comparison to previous reporting period(s) III. Reporting on evaluations/feedback received and any changes this has brought about to service practice IV. Relevant national and local issues or changes impacting on families in relation to their reason for contacting SENDIASS V. Pressures on service e.g. increase in referrals, staff sickness, office relocation, funding e.g. cut, new source, etc VI. Overview of service activity including breakdown of training sessions provided, themes, audience (parents, YP professionals – stating who e.g. SENCo, SEN governors, YOT. VII. Updates to policies or website VIII. New initiatives e.g. a volunteer programme, monthly drop-ins, weekly evening help-line IX. Training attended by staff X. Steering Group – how many times it met, changes or vacancies 		

2.2 C	Establish stringent quality assurance processes across all aspects of service, with an external element (initially at least)		
Action ref.	Suggested actions to take	By who	completed by
1	Agree key principles of quality assurance e.g. accuracy, plain English, accessibility, relevant to the intended audience (especially those new to the “system”), truthful and in context. It should also include references/links to original source e.g. SEN Code of		

	Practice, C&FA 2014, LA policy so they can be cross referenced by the reader if they wish to ensure transparency. They should also reflect PCP principles as the C&FA 2014 was built on these too.		
2	Establish quality assurance reviewing group (suitable for remote working). Members need to be selected for appropriateness for different aspects according to nature of materials. Ideally at least one member will not have any professional connection with SEN or education etc. for some of not all parent/YP targeted resources because if it makes sense to them it will likely make sense to others. For example training materials for professionals may need different input for sessions required for parents or CYP even if same topic e.g. Annual Reviews so the QA reviewing membership will need to be adjusted accordingly.		
3	All resources for parents and CYP will enable empowerment by clearly reflecting the law and associated rights and responsibilities, local (lawful) practice in context i.e. you have a right to appeal to tribunal but also clearly outline all the options to be taken to promote engagement and encourage a culture of trust between parents/CYP and the professionals they will be required to engage with, before it gets to the point of making an appeal. Resources will be step by step, to enable those unfamiliar with SEN terminology and processes, to be able to understand, be fully informed and follow them with minimal support but will also highlighting how SENDIASS might be able to assist at each step.		
4	Back to basics training programme, including person centred planning, to be created for ALL SENDIASS staff. This programme must be developed externally of any existing, or past staff or associates of Birmingham SENDIASS and could be commissioned externally.		

2.2 D	To improve visibility of service including standalone website to include resources to support empowerment		
Action ref.	Suggested actions to take	By who	completed by
1	In the interim and asap, upload all CDC animations to SENDIASS page on LA website and/or LO. Add links to external sources of support e.g. IPSEA, ACE Education Advice and Training, SOSSEN, Coram Children's Legal Centre		
2	Carry out an immediate review of all wording on SENDIASS information currently available with relevant others i.e. those external to SENDIASS e.g. PCF, NCB etc. Covert to plain English, make all required corrections and update asap.		
3	Develop a range of new step-by-step guides for parents for a range of common themes e.g. getting the most out of a meeting, requesting a statutory assessment, annual reviews etc. These should be added to SENDIASS page on LA website as soon as they become available until the new website is ready. See 2.2 B2 above		
4	To develop standalone website (see MS 3.3) with ideally a dedicated section for CYP.		
5	Clear and distinct identifiable logo on all resources (MS 3.2), training e.g. Powerpoint slides. Materials and resources should also acknowledge original source where data is included from other sources.		
6	To implement social media e.g. FB especially to promote events or changes and is easy for parents to share and disseminate information.		

2.2 E	Effective staffing structure including an admin post, all appropriately trained		
Action ref.	Suggested actions to take	By who	completed by
1	Review staffing structure, hierarchy etc and introduce dedicated admin support post (with knowledge of Access or database) with a view to becoming main first point of contact i.e. operating helpline (included in JD and graded to reflect these anticipated additional responsibilities). Part of restructure should consider all roles within service and have relevant JDs and graded accordingly. This should be transparent so anyone outside of SENDIASS knows who they work for and their role		
2	Clear staffing structure included on website with photos e.g. "meet the team" Job titles for all SENDIASS staff should say the service and title in the first line to avoid confusion with other services e.g. SENDIASS Manager, SENDIASS support worker, SENDIASS caseworker depending on what titles are decided upon. SENDIASS Manager and staff do not have additional LA roles or responsibilities outside of SENDIASS to avoid conflict with confidentiality etc. All SENDIASS staff to conduct themselves according to their role and JD in SENDIASS and not to their previous, or future in case of students on placement, jobs i.e. they are not employed as social workers or teachers.		
3	To ensure all staff act professionally at all times including in all forms of communications and their engagement with others e.g. by understanding and respecting the boundaries of other services or individual professionals.		
4	Compulsory "back to basics" training to be developed for ALL staff, existing and new to reflect all new ways of working, including the role of carrying out casework, Person Centred Planning/Approaches and how this applies to all EHCP processes. Solution Focus training might also be useful.		
5	All staff to be provided with their own copy of the SEN Code of Practice and if possible extra copies to be available for volunteers or students to be able to have access to and how to access it electronically.		
6	Give careful consideration to deployment of student s/w and/or volunteers e.g. to be trained to support parents and CYP in writing their "report" for statutory assessment, to ensure all CYP receiving a casework service from SENDIASS have a One Page Profile, carry out level 2 casework only. Appendix RK 13 & RK 14		
7	Quarterly staff appraisals (careful consideration to be given regarding who should conduct these, initially at least). Objectives should reflect the changes of working practice within SENDIASS and be linked to service Development Plan.		

2.2 F	Have an effective management structure in place		
Action ref.	Suggested actions to take	By who	completed by
1	Line management for Service Manager to be clear and at an appropriate level within directorate		
2	Current steering group to be disbanded and start afresh. The balance of new membership must be given careful consideration to enable parents and young people to be effectively involved without being overwhelmed. Membership (MS 1.7) to include e.g. PCF, parents, young people, max 2 head or deputy head teachers (primary and secondary), SENCo, one special school, EP, SEN dept, Health, Social Care, 1 elected member (if necessary – not usual for them to be included) etc. Service manager's line manager should not be part of SG to distinguish be line management of employee from managing service direction to help fulfil armslength requirement. Appendix RK 15 sample Terms of Reference Its role will be to oversee service direction etc.– TOR, membership, minutes, routine agenda items e.g. going through service report including data, review development plan. SG meetings need to ordinarily be maximum of quarterly or minimum of termly.		

2.2 G	Compliance with remaining Minimum Standards not addressed in 2.2A to 2.2F above		
Action ref.	Suggested actions to take	By who	completed by
1	Joint Commissioning in accordance with MS 1.1 against a tight SLA pegged against the MS. Appendix RK 16 sample document. including reviewing, monitoring and reporting arrangements.		
2	Development plan (MS 1.8) to address all areas of minimum standards to either address non-compliance or ensure continued compliance. Improvement targets should be informed by data and there should be a "thread" to link why everything is happening. Appendix RK 17 sample document.		
3	Constructive strategic involvement (MS 2.3) once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.		
4	Establish partnership working and agreement with PCF (MS 2.3)		
5	Develop a training programme (MS 3.6) to include stakeholders, parents and CYP once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.		

2.2	Actions required by LA from issues arising during this review outside of SENDIASS		
Action ref.	Suggested actions to take	By who	completed by
1	Front Door – uncouple from SENDIASS with immediate effect and decide its purpose and where it “sits” i.e. in the LA or in Children’s Trust.		
2	Rename Parent Link e.g. SENAR Gateway and reconsider description as it is misleading as sounds like SENDIASS. Ensure when parents contact “Parent Link” they know who exactly they are speaking to and what their role is.		
3	Improve communication options in SENAR letters – add contact name and details e.g. email and phone number so parents can directly and easily contact to try and resolve issues.		
4	Improve content of EHCP letters – explain in letters that are sent with draft EHCP that Section “I” must be left blank so parents can request the school they want named, reassure them they can stay at their existing placement (it is known to worry parents when it is blank that their current placement might be under threat) be honest and explain current situation e.g. pressure on school places particularly special school and reassure LA is willing to work with parents to come up with an acceptable solution e.g. an interim arrangement if appropriate.		
5	Update parents/PCF/SENDIASS – share good news as things are being introduced or changing e.g. all SENAR staff training, recruitment etc.		

SENDIST data from 13/14 to 20/21

“£253 million wasted by LAs defending SENDIST Appeals” widely reported in December 2021 by Special Needs Jungle (SNJ) et al.

£253,000,000 = £6206.91 approx
40761

Official SENDIST appeals registered				Cost based on £6206.91 per appeal for B/ham
Date (academic year 1/9 to 31/8)	Official SENDIST appeals registered National	Per Calendar year	Birmingham	
14/15	3147	2015	144	£893,795.04
15/16	3712	2016	170	£1,055,174.70
16/17	4725	2017	237	£1,471,037.67
17/18	5679	2018	265	£1,644,831.15
18/19	7002	2019	295	£1,831,038.45
19/20	7917	2020	261	£1,620,003.51
20/21	8579	1.1.21-31.8.21	208	£1,291,037.28
totals	40761		1580	£9,806,917.80

*Appeals registered taken from monthly data from 1.1.21 to 31.12.21

Potentially this figure is over £10,000,000 as there is no data including for Birmingham for 1.9.2014 to 31.12.14. Birmingham had 138 appeals in calendar year 2014 – proportionally speaking this could equate to another 46 appeals =£285,517.86 bringing a grand total to **£10,092,435.70**

Annual Report 2014/15 stated the following

The new SEND Code of Practice introduces some changes in relation to disagreement resolution and appeals.

There is a requirement for SENDIASS to support “*children, young people and parents in managing mediation, appeals to the First-tier Tribunal (Special Educational Needs and Disability), exclusions and complaints on matters related to SEN and disability*” (CoP 2.19).

SENDIASS has a long tradition in supporting parents and carers through the appeal process with an emphasis on resolving appeals without the need for SENDIST Hearings

LAs and CCGs have a responsibility to establish an independent Disagreement Resolution Service (DRS) (CoP 11.6); to date there has been no information made available about this function.

In addition, for all SENDIST appeals (except those only relating to the placement named in an EHCP) there is a requirement to seek advice from independent Mediations Services. **Given the success of SENDIASS in resolving appeals the need for the independent DRS and any external mediation service in Birmingham is questionable.***

The number of appeals that SENDIASS has been involved with in the year covered by this Annual Report is 110.

* The law requires it regardless of SENDIASS and LA performance!

Annual Report 2015/16 stated the following

SENDIST register appeals on a **January to December basis***. In 2016 SENDIASS have been involved with **137 appeals****.

* SENDIST actually report appeals quarterly and then annually but for the academic year not calendar year

**this equates to SENDIASS being involved with 95% of all appeals

Annual Report 2016/17 stated the following

SENDIST register appeals on a January to December basis. In 2016 SENDIASS has been involved with 171 appeals* – a significant increase of 25% compared with the 137 received last year. SENAR estimate that SENDIASS is the named representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

* 171 is one more than all those registered according to the document NH provided “*Appeal Rates Birmingham & Hampshire comparator*” which she presented as calendar years. Perhaps they are in fact academic years and this would explain the discrepancy here.

Annual Report 2017/18 stated the following

SENDIST register appeals on a January to December basis. From January to September 2018* SENDIASS has been involved with 189 appeals; this shows an increase compared to the 2017 period (171). SENAR estimate that SENDIASS is the name representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

* This isn't a full year, only 9 months!

Annual Report 2018/19 stated the following

For this year we have identified the appeals (243) that were lodged and resolved within the year September 2018 to August 2019. Care should be taken when comparing this year's data with the previous year, though proportions would be comparable.

SENAR estimate that SENDIASS is the name representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

Annual Report 2019/20 stated the following

SENDIST register appeals on a January to December basis. From January to September 2019* SENDIASS was involved with 161(189) appeals.

SENAR estimate that SENDIASS is the named representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

* 9 month period again

Local Authority	2014			2015			2016			2017			2018			2019			SENDIASS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021	
	Appeals registered ⁵	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²							
Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%		Birmingham	450047	£240,000	5	0	£0.53
The rows below (in yellow) represent 6 LAs with largest populations																									
Lancashire	90	5,088	1.8%	67	5,350	1.3%	43	6,056	0.7%	73	6,837	1.1%	95	7,486	1.3%	138	7,539	1.8%		Lancashire	369944	£303,281	7	0	£0.83
Essex	155	7,796	2.0%	85	7,737	1.1%	108	8,449	1.3%	178	9,079	2.0%	211	9,797	2.2%	315	10,356	3.0%		Essex	436955	£344,356	6.7	0	£0.79
Hertfordshire	87	3,880	2.2%	98	4,647	2.1%	91	5,364	1.7%	126	6,079	2.1%	159	6,910	2.3%	160	7,654	2.1%		Hertfordshire	371328	£412,509	14.51	0	£1.11
Hampshire	166	5,242	3.2%	113	5,917	1.9%	188	6,991	2.7%	188	7,879	2.4%	224	8,749	2.6%	163	9,309	1.8%		Hampshire	395904	£247,196	7	5	£0.62
Kent	325	6,924	4.7%	160	7,339	2.2%	166	8,685	1.9%	242	10,294	2.4%	369	13,131	2.8%	513	14,599	3.5%		Kent	481475	?	?	?	
Surrey	196	5,855	3.3%	142	5,985	2.4%	188	7,623	2.5%	220	8,210	2.7%	213	9,293	2.3%	293	10,429	2.8%		Surrey	364541	£230,000	7	0	£0.63
England Tota	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%							

? = data not submitted by service

average £0.75 per head

Statistical neighbour rating	2014				2015				2016				2017				2018				2019				SENDIASS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021
	Local Authority	Appeals registered ⁵	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²											
	Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%		Birmingham	450047	£240,000	5	0	£0.53				
Very close	Luton	4	1,046	0.4%	7	1,284	0.5%	9	1,374	0.7%	11	1,485	0.7%	14	1,536	0.9%	9	1,764	0.5%	Very close	Luton	78711	?	?	?	?				
Close	Sandwell	31	1,438	2.2%	12	1,485	0.8%	15	1,698	0.9%	8	1,990	0.4%	12	2,190	0.5%	20	2,308	0.9%	Close	Sandwell	112830	£125,000	4	0	£1.11				
Close	Nottingham	18	671	2.7%	10	814	1.2%	18	941	1.9%	40	1,072	3.7%	20	1,122	1.8%	19	1,205	1.6%	Close	Nottingham	141372	?	?	?	?				
Close	Wolverhampton	5	1,358	0.4%	10	1,348	0.7%	3	1,405	0.2%	7	1,575	0.4%	6	1,789	0.3%	4	1,985	0.2%	Close	Wolverhampton	86806	?	?	?	?				
Close	Enfield	13	1,467	0.9%	8	1,494	0.5%	8	2,097	0.4%	5	2,313	0.2%	9	2,579	0.3%	14	3,201	0.4%	Close	Enfield	115631	?	?	?	?				
Somewhat close	Waltham Forest	18	1,506	1.2%	7	1,442	0.5%	8	1,479	0.5%	14	1,894	0.7%	14	1,911	0.7%	12	2,162	0.6%	Somewhat close	Waltham Forest	92544	£97,000	2.6	0	£1.05				
Somewhat close	Slough	2	882	0.2%	7	977	0.7%	4	1,425	0.3%	6	1,341	0.4%	10	1,387	0.7%	6	1,514	0.4%	Somewhat close	Slough	54928	£146,000	1.5	2	£2.66				
Somewhat close	Manchester	44	2,460	1.8%	44	2,753	1.6%	33	3,349	1.0%	42	3,807	1.1%	36	4,268	0.8%	49	4,800	1.0%	Somewhat close	Manchester	221584	?	?	?	?				
Somewhat close	Walsall	25	1,325	1.9%	12	1,616	0.7%	18	1,571	1.1%	17	1,816	0.9%	22	2,204	1.0%	26	2,205	1.2%	Somewhat close	Walsall	94282	£130,000	2.8	0	£1.38				
Somewhat close	Derby	46	1,133	4.1%	18	1,356	1.3%	23	1,604	1.4%	63	1,810	3.5%	60	2,013	3.0%	71	2,396	3.0%	Somewhat close	Derby	89259	£98,000	2.3	0	£1.10				
	England Total ⁴	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%											

? = data not submitted by service

not enough data provided to provide an accurate average

Local Authority	2014			2015			2016			2017			2018			2019			SEND/IAS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021 aged 0-25	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021	
	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²	Appeals registered ⁴	Total Appealable Decisions ¹	SEND Tribunal Appeal Rate ²							
Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%		Birmingham	450047	£240,000	5	0	£0.53
The rows below (in yellow) represent 6 LAs with largest populations																									
Lancashire	90	5,088	1.8%	67	5,350	1.3%	43	6,056	0.7%	73	6,837	1.1%	95	7,486	1.3%	138	7,539	1.8%		Lancashire	369944	£303,281	7	0	£0.83
Essex	155	7,796	2.0%	85	7,737	1.1%	108	8,449	1.3%	178	9,079	2.0%	211	9,797	2.2%	315	10,356	3.0%		Essex	436955	£344,356	6.7	0	£0.79
Hertfordshire	87	3,880	2.2%	98	4,647	2.1%	91	5,364	1.7%	126	6,079	2.1%	159	6,910	2.3%	160	7,654	2.1%		Hertfordshire	371328	£412,509	14.51	0	£1.11
Hampshire	166	5,242	3.2%	113	5,917	1.9%	188	6,991	2.7%	188	7,879	2.4%	224	8,749	2.6%	163	9,309	1.8%		Hampshire	395904	£247,196	7	5	£0.62
Kent	325	6,924	4.7%	160	7,339	2.2%	166	8,685	1.9%	242	10,294	2.4%	369	13,131	2.8%	513	14,599	3.5%		Kent	481475	?	?	?	
Surrey	196	5,855	3.3%	142	5,985	2.4%	188	7,623	2.5%	220	8,210	2.7%	213	9,293	2.3%	293	10,429	2.8%		Surrey	364541	£230,000	7	0	£0.63
The rows below (in grey) represent LAs with appealable decisions over 5000 in 2019 although the yellow rows above are over 7500																									
Lincolnshire	29	3,520	0.8%	35	3,532	1.0%	59	4,133	1.4%	50	4,761	1.1%	52	4,829	1.1%	49	5,268	0.9%		Lincolnshire	213294	£178,798	6.4	0	£0.84
Staffordshire	56	3,621	1.5%	63	3,936	1.6%	83	4,303	1.9%	97	4,838	2.0%	95	5,252	1.8%	78	5,564	1.4%		Staffordshire	247960	?	?	?	£1.05
Suffolk	54	3,265	1.7%	63	3,092	2.0%	58	3,558	1.6%	58	4,437	1.3%	73	5,153	1.4%	104	5,998	1.7%		Suffolk	215262	£259,478	6	0	£1.21
West Sussex	41	3,415	1.2%	22	4,015	0.5%	83	4,822	1.7%	85	5,279	1.6%	90	5,681	1.6%	114	6,059	1.9%		West Sussex	238340	£284,100	7.36	7	£1.19
Devon	26	3,699	0.7%	17	3,624	0.5%	37	3,902	0.9%	55	4,360	1.3%	54	5,437	1.0%	63	6,759	0.9%		Devon	216113	£298,000	6.3	15	£1.38
not relevant in any menaingful respect to prov																									
England Total	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%	? = data not submitted by service						

IASS additional funding via IASP (NCB) provided to Birmingham SENDIASS

Some of the things that have been funded should be clearly provable e.g. the existence of a website (minimum standards require it to be a standalone website so IASP funding would have been for that), training materials and evidence that training sessions were held etc.

2018-19	£32,000	<p>1. Conduct a detailed self-review of the IASS to establish its delivering on its responsibilities as required by the C&FA 2014 and SEN C of P</p> <p>2. Develop a 2 year service-led IASS operational plan to seek compliance and service improvements benchmarked against the new minimum standards</p> <p>3. Demonstrate a willingness to work closely with CDC and respect the disciplines of working close to Government policy on the IASP (this required the following:</p> <p style="padding-left: 40px;">Submit a statement to say:</p> <ul style="list-style-type: none"> • Your attendance and learning at IASS regional meetings during the year • Submission of 3 case studies to inform and help other services (ongoing) • Submission of data onto the IASSN national reporting hub (Nov 2018) • Engagement with IASSN annual customer survey (Jan 2019)
2019-20	£45,900	<p>1a. Support with staff costs / retention</p> <p>1b. Appointment of CYP Lead</p> <p>1c. Support work required to implement plans from 1 April 2019</p> <p>1d. Capacity built into current Head of Service role to define project plan for implementation including specific Project Lead</p> <p>2a. Joint commissioning arrangements with health and social care (this included:</p> <ul style="list-style-type: none"> • Links made at DMO level (SENDIASS is directly managed by the DCSO) • An SLA and funding model established with Health & Social Car <p>2b. Strengthening governance arrangements and management reporting (this included:</p> <ul style="list-style-type: none"> • Representation of Education, Health and Social Care on the SENDIASS Board (former Chair of Schools’ Forum has expressed an interest in Chairing the SENDIASS Board and this will bring a high level of strategic expertise) <p>3a. Strengthening tribunal support - Protocols established with the SEND Department to resolve disputes</p> <p>3b. Website development and promotional materials designed to link to the Local Offer - Website integral part of IASS offer & online helpline available</p> <p>4a. Setting up and implementing a volunteer development programme (including a training programme) to support CYP and parents (aim was 10 CYP Support Volunteers trained & 10 Parent/Carer Volunteers trained)</p> <p>4b. Creating better processes to receive regular feedback from service users which help refine and develop the service and the staff within it including:</p> <ul style="list-style-type: none"> • Accessible CYP feedback mechanism defined • Accessible parental feedback mechanism defined • Service User feedback on Website <p>5a. Strategic work with disadvantaged groups this included:</p> <ul style="list-style-type: none"> • Locality Based Groups set up to cover North/South/Central areas of city • Local communities needs defined including language and cultural issues <p>5b. Supporting strategic participation of parents, CYP - Links with the Strategy for SEND made</p>

UNFORSEEN COVID RESTRICTIONS IMPACTED ON DELIVERY FROM THIS POINT FORWARD

2020-21	£27,882	<ol style="list-style-type: none">1. To have an SLA and joint commissioning arrangement for IASS signed and agreed with health and social care as per minimum standards. (Purpose – for process to be embedded and improve services locally)2. To increase IASS reach and engagement with minority ethnic communities and hard to reach families across Birmingham to include: A communication and engagement action plan devised with ambitious targets and developed in partnership with YP and VCOs.3. To develop an IASS easy read guide to improve inclusive Practice in Mainstream Secondary settings this included: Establishing an Operational Board (with terms of reference in place) in partnership with ACAMHS and other relevant organisations that can contribute to the aim.4. Produce a service continuity and sustainability plan for the period April 2021 onwards
2021-22	£10,000	<ol style="list-style-type: none">1. Ensure CYP and families receive ongoing impartial IAS within the wider service offer in line with the duties outlined in the Minimum Standards for SENDIASS. This included: A YP's Participation Group (YPG) is established with a defined work programme and creation of a YP participation charter2. Ensure the IASS manager based solely within the IAS Service, continues to lead on strategic planning, delivery to ensure it has the capacity and resources to meet these Minimum Standards and local need - including a joint commissioning arrangement no later than March 2022, where such an arrangement is not yet in place. This included developing a training package and to provide training to Health and SC re role and work of SENDIASS3a. Due to the changing environment, to develop new IASS digital resources on matters relating to the service and SEND – which increases current service uptake and engagement with CYP and families This included: Compiling Zoom ready training materials that are specific to parents and for CYP. (4 sessions to be delivered on all aspects of IASS work and SEND processes.)3b. Due to the changing environment, to develop new IASS digital training resources aimed at external local education, health and social care professionals, CYP, families and volunteers - which increases knowledge of SEND law, guidance, local policy, issues and participation. This included: Compiling Zoom ready training materials that are specific to professionals across the disciplines and schools (4 sessions to be delivered).
Total	£115,792	

Take from Annual Reports – green highlighted text is my calculation and is not in the ARs

Note the initial reason for contacting the service across all reporting areas never changes.

“School meeting” says nothing about what the casework was about e.g. SEN Support, exclusion, behaviour etc

“Placement” sounds like it may mean naming school in EHCP but unlikely that starting or changing school hasn’t arisen outside of naming in an EHCP.

“Other “ should be broken down a bit more e.g. like 15/16 school transport was highlighted

14/15

There are presently over **7100 families and children known to SENDIASS***. Typically, at any one time around 400 families, children and young people will be receiving an in depth casework service**.

509 new referrals

At the initial point of referral a Case Objective type is given to each new case; these objectives include:

- EHC Needs Assessment
- Progress of EHCP
- Content of EHCP
- Placement
- School Meeting
- Annual Review Meeting
- Exclusion
- Attendance
- Other

However, it should be noted that many referrals are multi-faceted. Equally, it is not always clear at the point of referral what the case objectives are and these may only become apparent following a first more in depth assessment. Furthermore, objectives can change or be added throughout the progress of a case.

*Assume this is families on the database since the service began on 1.1.2000

** When SENDIASS were asked on 25.4.22 “How many for each of the national intervention levels (1-4) or certainly a split between helpline one-off calls and casework”. The response was “**All these are LEVEL 4 as the requirement was to only report on these.**” Therefore, the figures relating to in depth casework are all Level 4 intervention.

The box below is taken from the IASSN Funding, Casework and Staffing Data Report 2021. As you can see national average is 14% of all casework is Level 3 or 4 not just Level 4. (14% of 724 = 101).

To explore this, we asked services to submit their own helpline and casework numbers from three consecutive years. We found that on average:

- Helpline enquiries: up 48% since 2019- an average of 1291 enquiries being received per year per service
- Casework (non-helpline) up 52% since 2019- average 724 cases per year across the levels
- Tribunal numbers continue to rise. Services are supporting an average of 40 tribunal cases a year in some form, including attending and supporting a parent or young person directly with 4.

Complexity:

- 14% of cases reported to be level three or above by those that record levels, compared to 10% in 2019

15/16

There are presently over **7700** families and children known to SENDIASS. **(600 new families added)**

565 new cases. Same categories as bullet points for 2014/15.

[In the Summer of 2016 SENDIASS were contacted by over 50 parents – **and other professionals** – regarding decisions that had been made affecting children and young people's school transport. These are included in the 'Other' category]

16/17

There are presently over **8240** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and **workshop sessions***. **(540 new families added)**

During the year commencing 1 September 2016 SENDIASS delivered in depth casework intervention to 637 new cases.** Same categories as bullet points for 2014/15.

* These should not be added to database unless they receive individual support and numbers should be presented and reported separately including details of themes for the workshop

** This is clearer than in previous reports when just stated referrals but should also include separately number of one-off enquiries and their nature.

17/18

There are presently over **8745** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(505 new families added)**

During the year commencing 1 September 2017 SENDIASS delivered in depth casework intervention to 570 new cases. This is in addition to the continuing casework that is undertaken. Same categories as bullet points for 2014/15.

18/19

There are presently over **9500** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(755 new families added)**

During the year commencing 1 September 2018 SENDIASS delivered in depth casework intervention to **618** new cases. This is in addition to the continuing casework that is undertaken with the families that the service supports.

A particular feature of this year's work has been providing information, advice and support to CYP directly.* Same categories as bullet points for 2014/15.

* There is no reference in the stats to CYP vs parents re casework numbers or issues raised. According to table below there are 48 cases relating to YP = approx 23 16 & 17 yrs olds & 25 >18. unclear if this is parents of 16+ or YP directly contacting service and if parental consent was acquired. **On another occasion it was reported that direct work with CYP didn't commence to 1.9.21 i.e. more than 2 years later!**

19/20 (lockdown from March 2020)

There are presently over **10,200** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(700 new families added)**

During the year commencing 1 September 2019 SENDIASS delivered in depth casework intervention to **679** new cases. The six monthly split was **371/308**. As the March - August period covers the summer holiday, this may explain the difference, but there would be some effect from the lockdown. Same categories as bullet points for 2014/15.



Birmingham SEND Information, Advice & Support Service

Quality Assurance Form - Parent/Carer

We try to provide the information, advice and support that you need.

Please take a few minutes to answer some questions for us.

We really do value your feedback.

Getting in touch with us

1 How easy was it to get in touch with us?	Not at all easy	0	1	2	3	Very easy
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1b How quickly did we respond?	Very Slowly	0	1	2	3	Very quickly
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1c How well do you think we understood your questions or concerns?	Not at all well	0	1	2	3	Very well
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1d How did you hear about us? (Tick all that apply)

Leaflet about the service	<input type="checkbox"/>	Another parent or friend	<input type="checkbox"/>	The internet	<input type="checkbox"/>
The school, early years setting or college	<input type="checkbox"/>	The Local Offer	<input type="checkbox"/>	The Local Authority's SEND team	<input type="checkbox"/>
An educational psychologist or Advisory Teacher	<input type="checkbox"/>	A health professional	<input type="checkbox"/>	Social Services	<input type="checkbox"/>
None of these	<input type="checkbox"/>	(if so, please tell us how you found out about the service)			



The support we offered you

2	How helpful was the information, advice and support we gave you?	Not at all helpful					Very helpful
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

2b Did we:

	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>

3	How neutral, fair and unbiased do you think we were?	Not at all					Very
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

4a	What difference do you think our information, advice or support has made for you?	No difference at all					A great deal of difference
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	



4b

Can you tell us more about the difference(s) we made for you?

(Please tick any that apply)

I feel that my child's needs are better understood than they were

☐

I now have a better relationship with my child's school or setting

☐

I now have a better relationship with the Local Authority

☐

I feel more confident

☐

I have a greater understanding of the SEND Code of Practice and the arrangements that should be made for children and young people with SEN

☐

I feel more involved in decisions about my child's education

☐

I am happier/less worried about my child's future

☐

I feel my child has benefitted as a result of the service being involved

☐

Please tell us of any other differences that your contact with our service has made.

5 Overall how satisfied are you with the service we gave?

Very
Unsatisfied

Very
satisfied

0

1

2

3

4

☐☐☐☐☐

5b

Was there anything we could have done better?



The future

6 How likely is it that you would recommend the service to others?

Not at all
likely

Extremely
likely

0

1

2

3

4

☐☐☐☐☐

6b Do you have any other comments about our service?

Thank you for your help.

Service User Contact Details:

Name:

Tel:

Email:

Child/YP name:

Date of Birth:

Date Form Completed:

Office use only

Caseworker Name:

Role:

Comments re “User Satisfaction” taken from each Annual report

2014/15

It is worthy of note however, that the ‘customer orientated’ nature of our service frequently results in high levels of satisfaction being expressed by service users to their support officer in the natural course of an intervention.

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns. A large majority of our users rank the service as very good or excellent and during the year there have been no ranking below satisfactory. There have also been no issues of concern raised or any formal complaints from users regarding the service.

2015/16

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns.

There has been **no ranking below satisfactory** and there have been no issues of concern raised or any formal complaints from users regarding the service. This is in line with the ‘customer-orientated’ nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases.

2016/17

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the 3 years since the changes in legislation, the service has received **no ranking below satisfactory**; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the ‘customer-orientated’ approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.

2017/18

At the time when cases are 'closed' service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the 4 years since the changes in legislation, the service has received no ranking below satisfactory; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the 'customer-orientated' approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.

2018/19

At the time when cases are 'closed' service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the **4 years*** since the changes in legislation, the service has received no ranking below satisfactory; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the 'customer-orientated' approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.

Feedback is sought from each case based on the good practice Quality Assurance form that the CDC have produced. ** This seeks the experience of the service user from the outset of accessing the service through to the information, advice and support provided and the outcome achieved. This feedback is collated to ensure that the service remains accessible and responsive to the CYP and parents within the city. A significant issue that was identified by the service users had been that the 'telephone line is always busy'. The Duty system was changed to alleviate this by having two Duty Officers operating the helpline, one for the initial 'triage' of the incoming calls and the other to then undertake an initial assessment and complete the referral form.

* This should say 5 years but it has simply been cut and pasted from the previous year

** except it doesn't. It has changed Q2b completely(see below). The national one is carried out anonymously, Only if they wish are contact details added. and sent out at the end of all enquiries. The Birmingham one requests contact detail – doesn't indicate as optional. The forms are then added to case files. They are only sent out to Level 4 enquiries (according to NH 11.5.22). According to feedback from PCF no one currently involved with SENDIASS knew anything about a feedback form.

Nationally agreed and widely used evaluation form

2b Did the IASS:

	YES	NO
Return your calls/emails promptly?	<input type="checkbox"/>	<input type="checkbox"/>
Keep in touch?	<input type="checkbox"/>	<input type="checkbox"/>
Explain why decisions were made and what was happening?	<input type="checkbox"/>	<input type="checkbox"/>
Listen to your views?	<input type="checkbox"/>	<input type="checkbox"/>
Treat you with respect?	<input type="checkbox"/>	<input type="checkbox"/>
Explain who they were and what their role was?	<input type="checkbox"/>	<input type="checkbox"/>
Provide a confidential service?	<input type="checkbox"/>	<input type="checkbox"/>
Give you information and advice that met your needs?	<input type="checkbox"/>	<input type="checkbox"/>

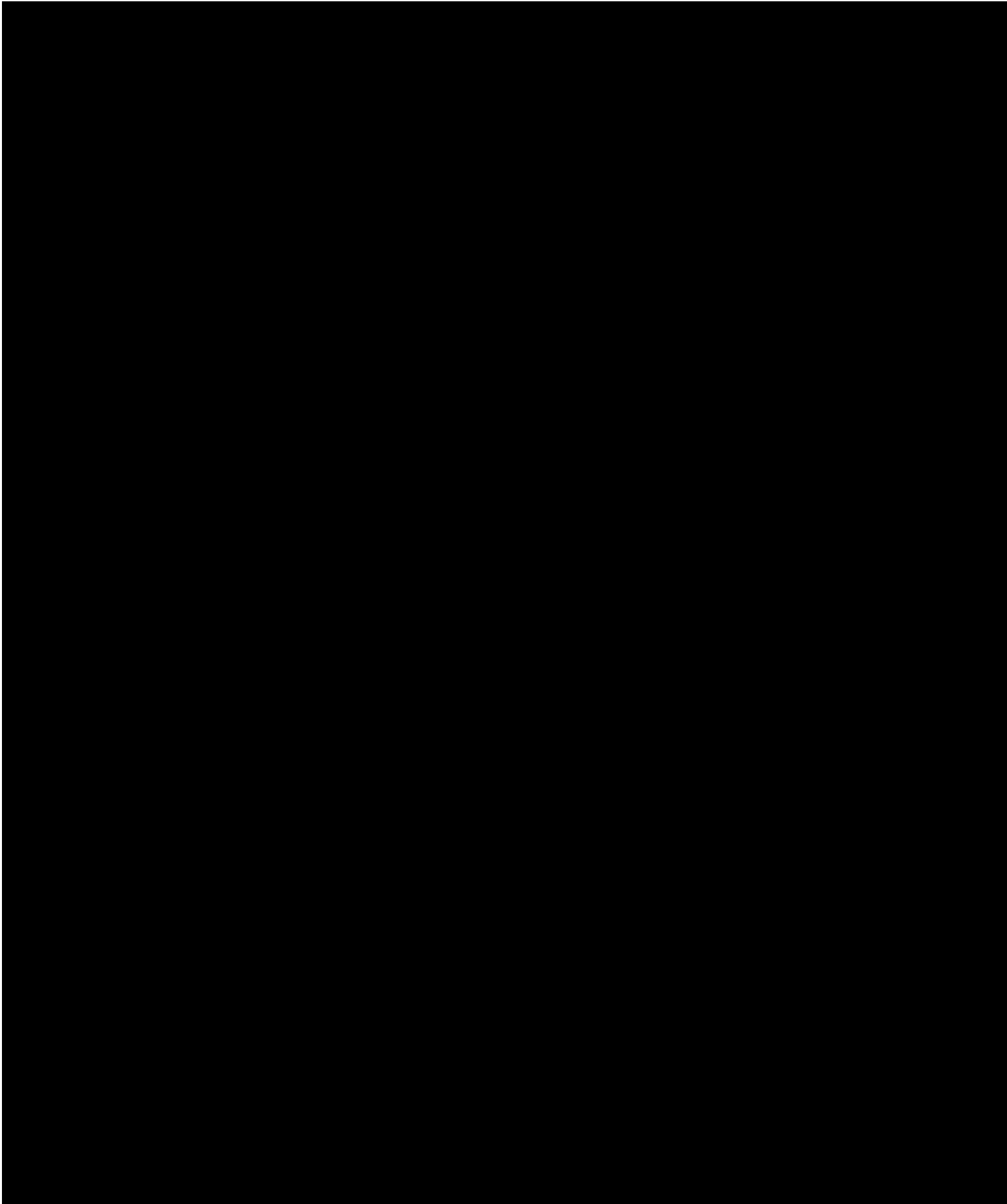
Birmingham's

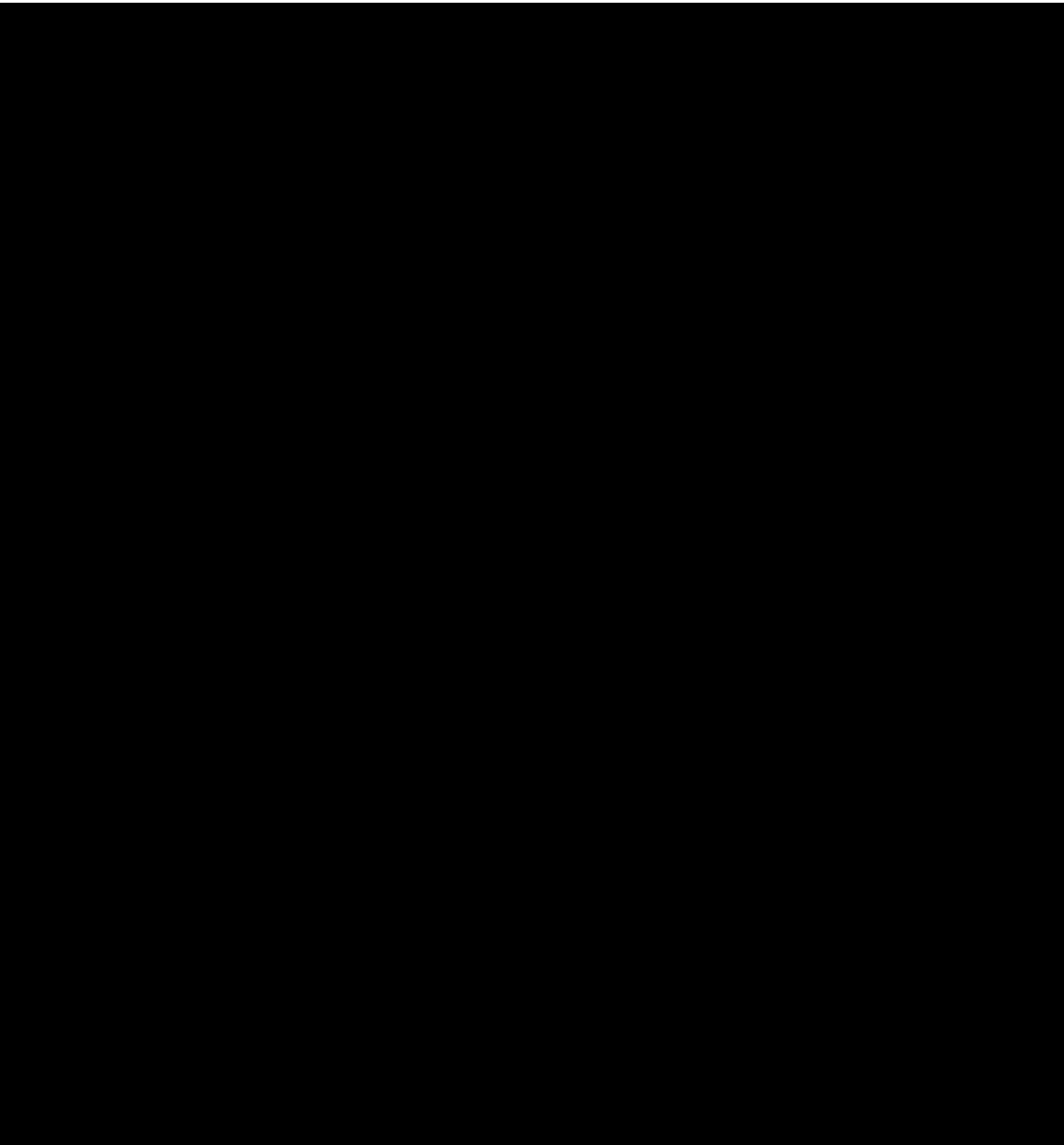
2b Did we:

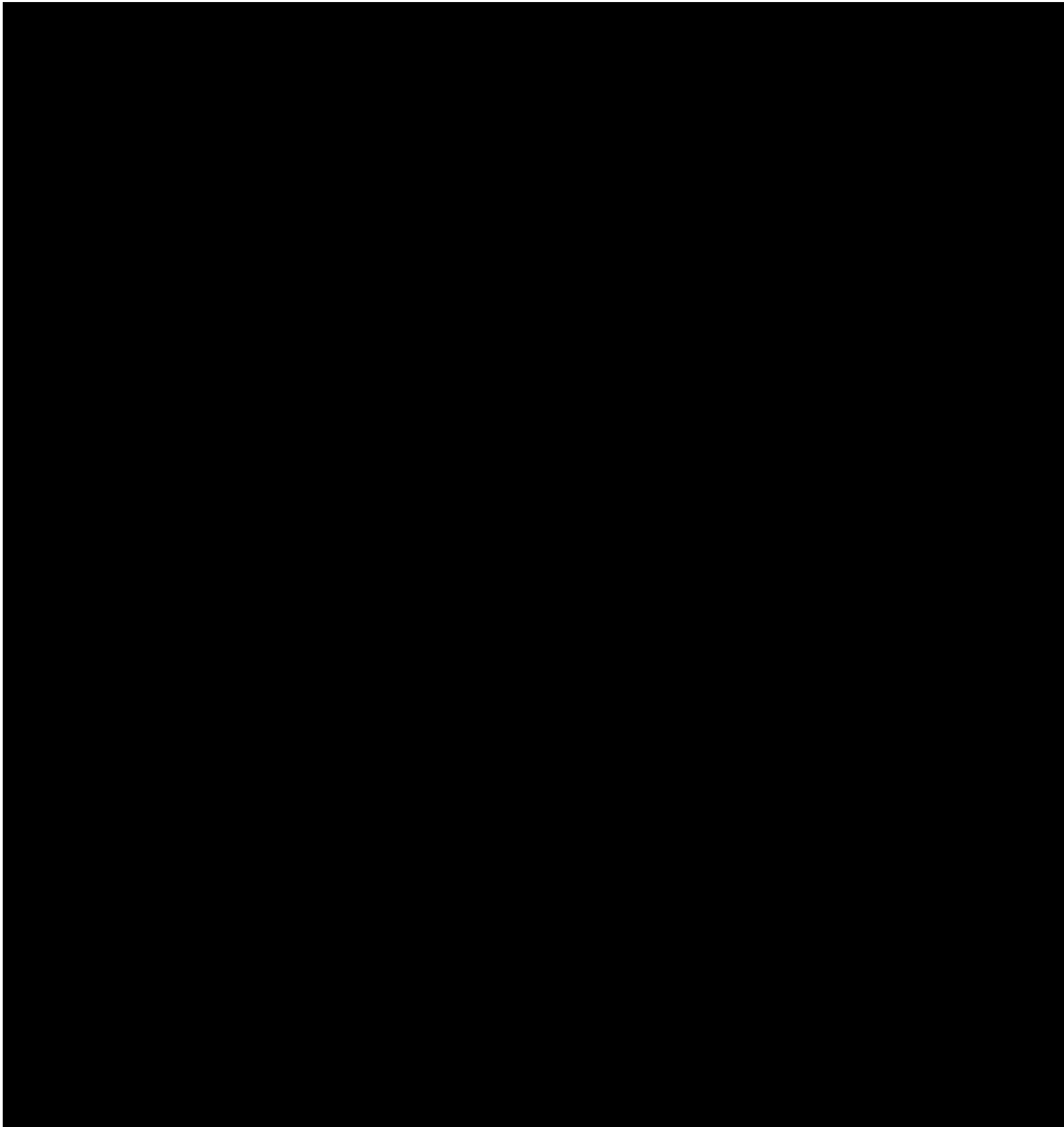
	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>

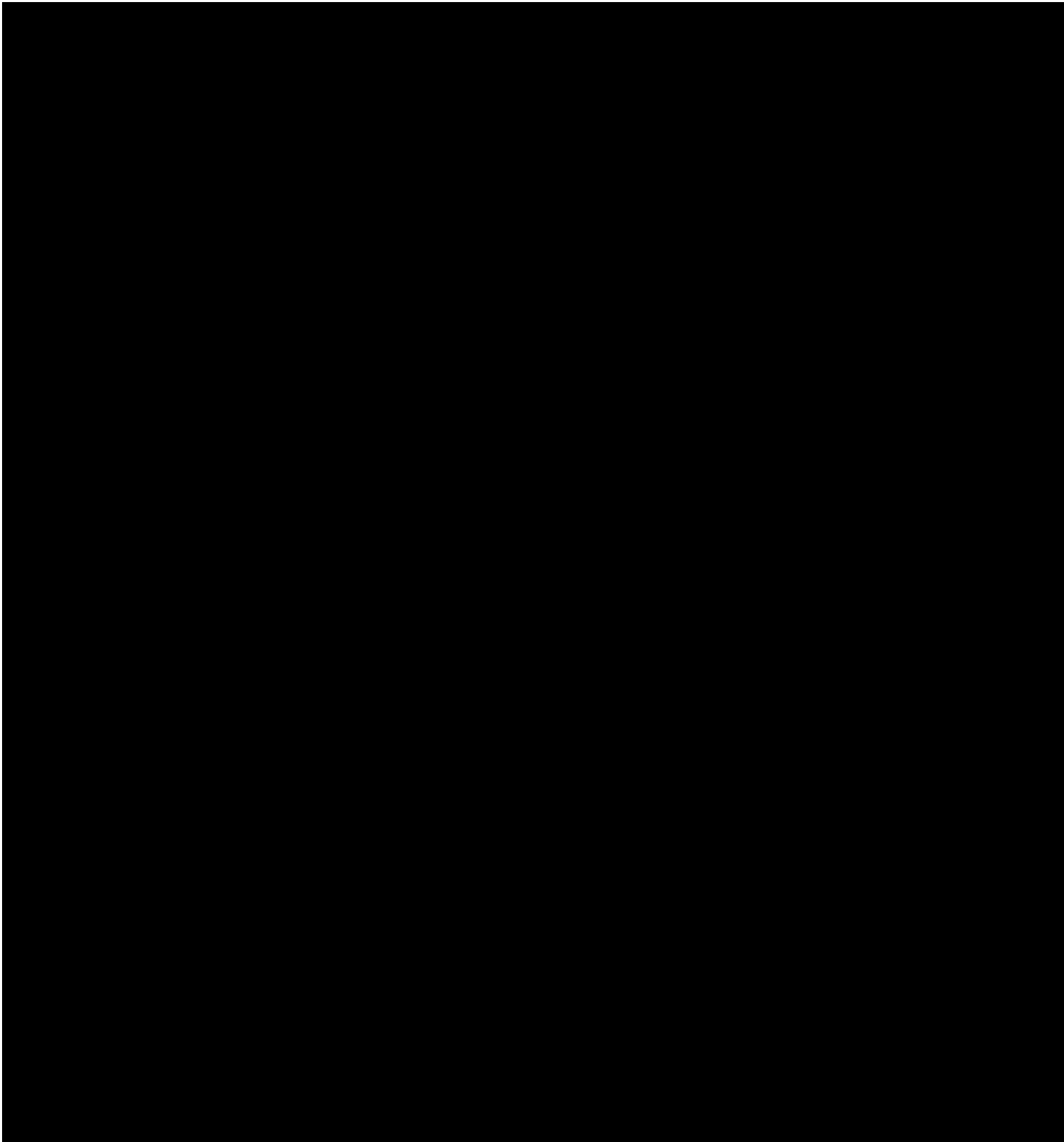
2019/20

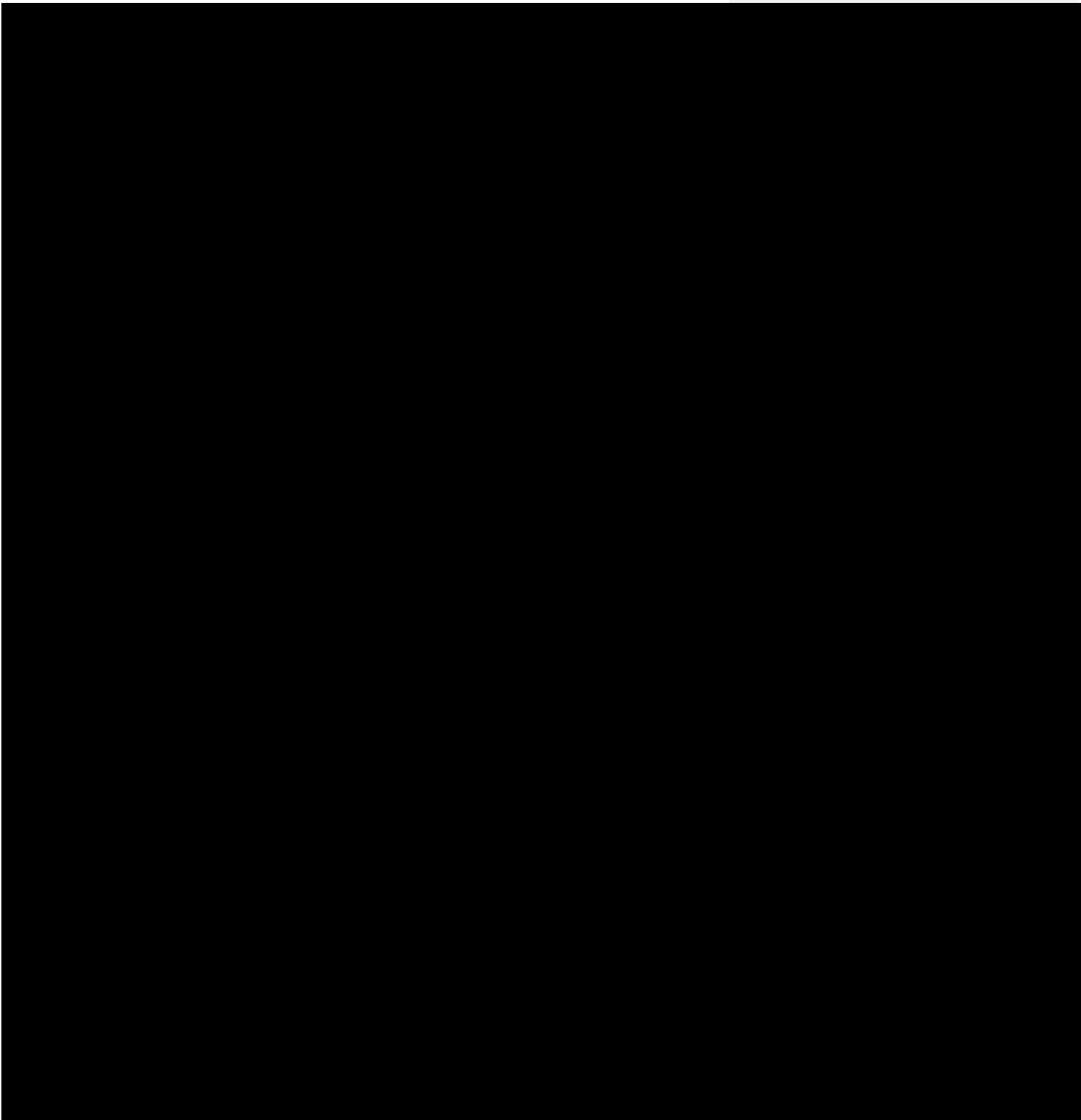
Identical to previous year

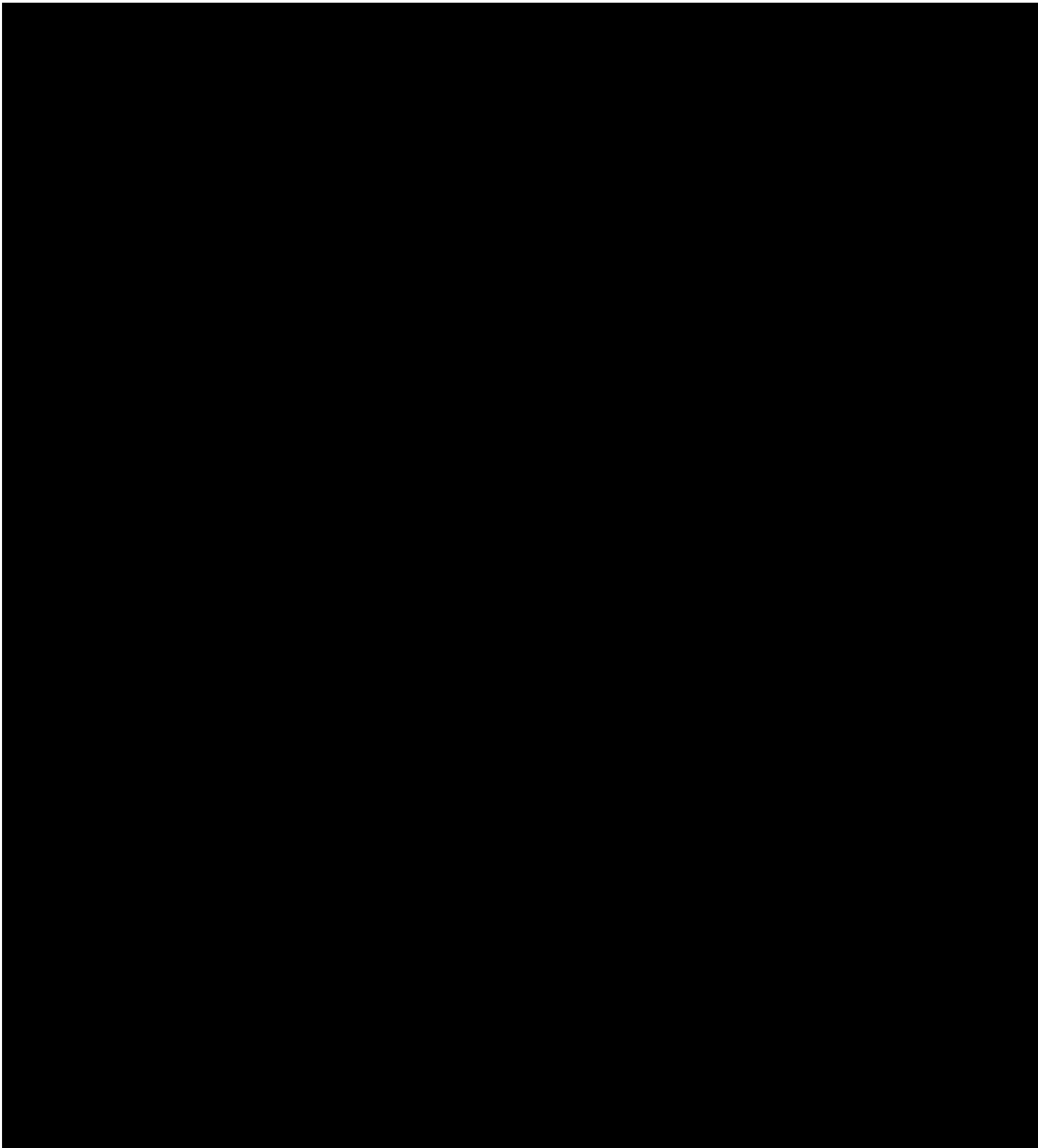


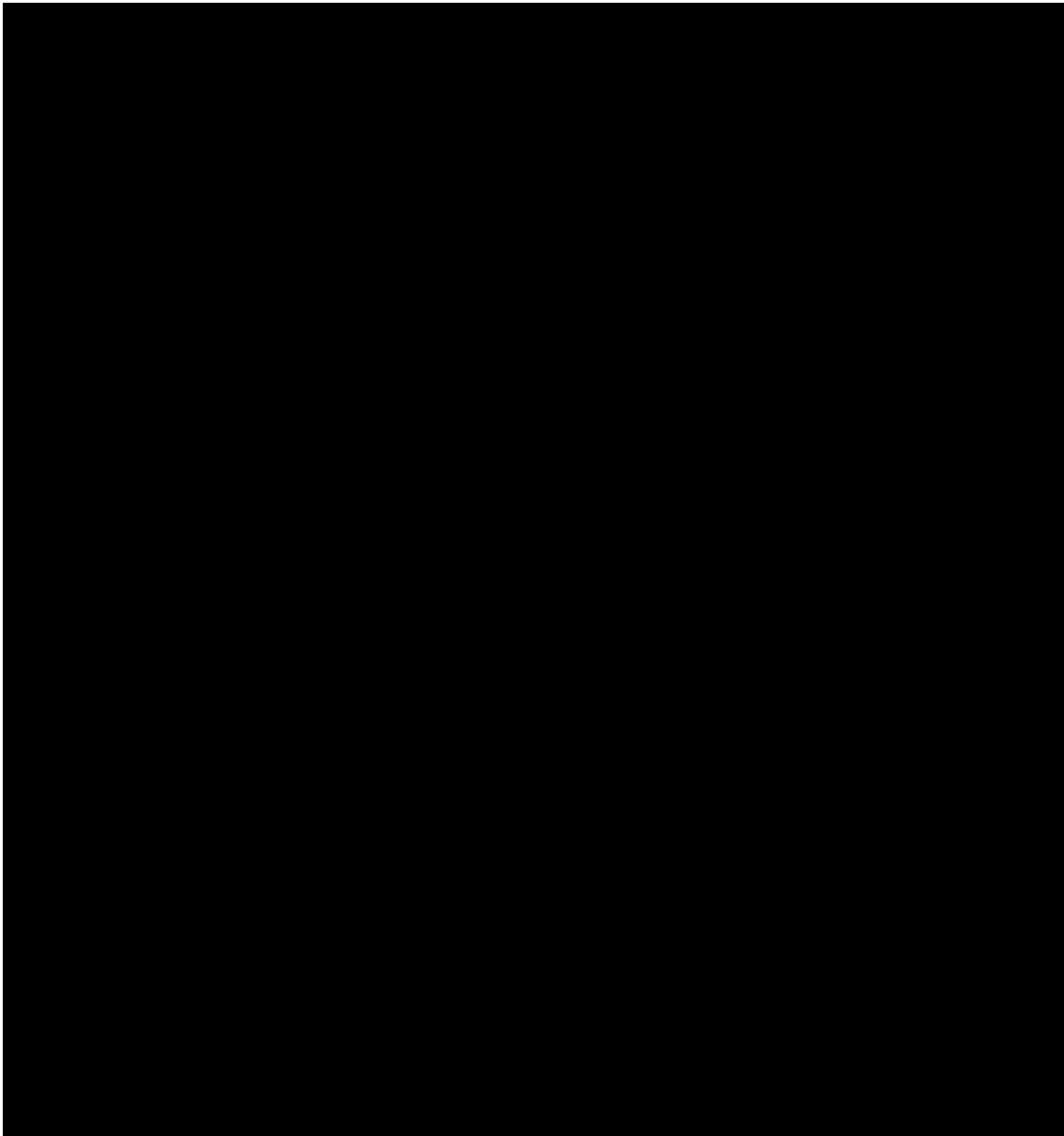












Summary of minimum standards according to evidence found or provided

[illegible]

1.6 LA and IASS ensure that potential service users, Head teachers, FE principals, SENCos, SEND Teams, children's and adult social care, health commissioners and providers are made aware of the IASS, its remit and who the service is for,			
1.7 The Governance arrangements outline a clear management structure, encompassing a strategic manager within the IASS and a steering group or advisory body which includes representatives from service user groups and key stakeholders from education, social care and health.			
1.8 The IASS has a development plan reviewed annually with the steering group/advisory body which includes specific actions and improvement targets.			

2. Strategic functions Standard	RK Based on evidence provided	
2.1 Each IASS has a manager based solely within the service, without additional LA/CCG or host body roles. They have responsibility for strategic planning, service management and delivery, and quality assurance.		
2.2 The IASS engages with regional and national strategic planning and training and demonstrates effective working with other IASSs – to inform service development.		
2.3 The IASS works with local partners, including local parent and young people forums to inform and influence policy and practice in the local area.		

3. Operational Functions Standard		RK
		Based on evidence provided
<p>3.1 The IASS provides; impartial information, advice and support (IAS) on the full range of education, health and social care as defined in the SEND Code of Practice to the following service users –</p> <ul style="list-style-type: none"> (a) children (b) young people, and ! parents <p>This support is offered in a range of ways which includes face to face, a telephone helpline, email, website and social media.</p>		
<p>3.2 IASS provides branded information and promotional materials in a range of accessible formats.</p>		
<p>3.3 The IASS has a stand-alone service website that is accessible to all service users. The website includes;</p> <ul style="list-style-type: none"> a. Contact details of the service b. Opening hours c. Response times 		

<p>d. Information on a range of SEND topics</p> <p>e. Signposting to other useful groups including parent groups and youth forums and national helplines</p> <p>f. Signpost to the Local Offer</p> <p>Key policies including a complaints procedure</p>			
<p>3.4 The IASS provides advocacy support for individual children, young people, and parents that empowers them to express their views and wishes and helps them to understand and exercise their rights in matters including exclusion, complaints, SEND processes, and SEND appeals.</p>			
<p>3.5 The IASS provides information, advice and support before, during and following a SEND Tribunal appeal <u>in a range of different ways, dependent on the needs of the parent or young person</u>. This will include representation during the hearing <u>if the parent or YP is unable to do so</u>.</p>			

3.6 The IASS offers training to local education, health and social care professionals, children, young people and parents to increase knowledge of SEND law, guidance, local policy, issues and participation.			
	NH	NH comments provided	RK
4. Professional development and training Standard			Based on evidence provided
4.1 All advice and support providing staff successfully complete all online IPSEA legal			

training levels within 12 months of joining the service. Volunteers who provide advice and support should complete IPSEAs Level 1 online training within 12 months.			
4.2 The service routinely requests feedback from service users and others, and <u>uses this to further develop the work and practices of the service.</u>			
4.3 All IASS staff and volunteers have ongoing supervision and continuous professional development.			
NB THE FOLLOWING ARE SUPPLEMENTARY QUESTIONS AND ARE NOT PART OF THE NATIONAL MINIMUM STANDARDS			
		RK	
5. Additional information for review purposes		Based on evidence provided	
5.1 What formalised Quality Assurance measures are in place re all external communication and information sharing e.g. training being delivered, service delivery processes, website, factsheets etc.			

5.2 Is there evidence on the service website and in the service delivery model that an engagement and participation approach is being promoted with service users?			
5.3 Service Deficit is recorded and reported to Steering Group and used to inform service development and funding bids			
5.4. Relationship/interface with PCF. Is there a formalised agreement? Is there information for parents and professionals to help make it clear the difference in the PCF and IASS roles?			
5.5. Use of Social Media Use of virtual platforms			

[Home](#) / [Document downloads](#) / [Schools and learning](#) / SENDIASS















Document downloads

Related information

News

SENDIASS downloads

Review of education health and care plan >

Health advice and information form -Review of EHC plan	DOCX	49.6 KB	
Social care advice and information form - Review of EHC plan	DOCX	49.13 KB	
Agenda for EHC Plan Review Meeting EHC Plan Review Meeting Guidance for Schools and Institutions	PDF	173.09 KB	
Checklist for the ehc plan review meeting - aug 15 1.0	PDF	209.74 KB	
Checklist for the EHC Plan Review Process	DOCX	49.02 KB	
Education advice and information - Review of EHC plan	DOCX	49.02 KB	
Review of ehc plan - v11 version 2 issued jan 2016	DOCX	373.14 KB	
Guidance for completing advice and information for review of ehc plan	DOC	143.5 KB	
Review process for ehc plan (pathway) 23072015 v1.0	PDF	335.78 KB	
Timeline on the Review Process for an Education, Health and Care Plan	PDF	240.15 KB	
Guidance notes on completing review of education health and plan form - feb 2016	DOC	107.5 KB	
Parentcarers views - Review of EHC plan	DOC	144 KB	
Child and young persons views - Review of EHC plan	DOC	146.5 KB	
Guidance on the Review Process for an Education, Health and Care Plan	PDF	190.62 KB	

Only sent out for level 4 interventions.

Nationally agreed and widely used evaluation form

2b Did the IASS:

	YES	NO
Return your calls/emails promptly?	<input type="checkbox"/>	<input type="checkbox"/>
Keep in touch?	<input type="checkbox"/>	<input type="checkbox"/>
Explain why decisions were made and what was happening?	<input type="checkbox"/>	<input type="checkbox"/>

Listen to your views?	<input type="checkbox"/>	<input type="checkbox"/>
Treat you with respect?	<input type="checkbox"/>	<input type="checkbox"/>
Explain who they were and what their role was?	<input type="checkbox"/>	<input type="checkbox"/>
Provide a confidential service?	<input type="checkbox"/>	<input type="checkbox"/>
Give you information and advice that met your needs?	<input type="checkbox"/>	<input type="checkbox"/>

Birmingham's

2b Did we:

	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>

[REDACTED]

[REDACTED]

1.5 Documents reviewed to inform this report

Document title & date	
IASP docs from NCB	
A	2018 Birmingham Task Order IASP.11072018
B	2018 Case Study - Assessment and provision of Need
C	2018 Case Study - Innovative Practice October 2018
D	2018 IASP self-review
E	2019 Birmingham IASP service operational plan docx
F	2019-20 Birmingham Task Order IASP TO SIGN
G	2019-21 operational plan
H	2020-21 Birmingham IASP contract variation SIGNED
I	2020-21 Birmingham IASP service operational plan
J	2021 B'ham Oct reporting
K	2021 Birmingham IASP service operational plan updated
L	2021 March report
M	2021-22 Birmingham IASP Task Order
N	2022 Bham contract check-in report form
From Parent Carer Forum	
O	bpcf-sendiass-partnership-agreement (1) (1)
From SENDIASS	
1	Appeal Rates Birmingham & Hampshire comparator Data included 2014-19
2	myth busters created 18.2.21
3	Staffing - SENDIASS Birmingham April 2022
4	1. Birmingham SENDIASS Board Remit Undated
5	4. SEND Statutory Process Training - PfA Team 16th Sept 2021
6	5. SEND Statutory Process Training - CAMHS ST 4.10.21
7	Agenda - Parents SENDIASS meeting dated 20.9.21
8	Birmingham SEND Multi-Agency Front Door dated 3.1.22
9	Birmingham SENDIASS Conference 30 Nov 2021
10	Flyer SENDIASS Professionals Meeting Nov 19.11.21
11	JD - SENDIASS Head of Service Created 3.3.19 last updated 29.9.21
12	Minimum Standards Self-assessment template with notes - SENDIASS Birmingham 23.4.22
13	Parent Partnership Group 2022
14	pg3(A) Allocation Sheet (EHC Needs Assessment)
15	pg3(B) Allocation Sheet (EHCP Progress)
16	pg3(C) Allocation Sheet (EHCP Content)
17	pg3(D) Allocation Sheet (Placement)
18	pg3(E) Allocation Sheet (School or Setting Meeting)
19	pg3(F) Allocation Sheet (Annual Review)
20	pg3(G) Allocation Sheet (Exclusion)
21	pg3(H) Allocation Sheet (Other)
22	pg4 Professionals involved
23	pg5 Family Targeted Assessment
24	pg6 Genogram
25	pg7 CYP Views & Details of Direct Work
26	pg8 Signs of Safety Form

27	pg9(i) Working with Parents & Carers
28	pg9(ii) Working with CYP
29	pg14(i) Quality Assurance Form Parent Carer
30	pg14(ii) Quality Assurance Form - Young Person
31	SEND Statutory Process Training - BCT Disabled Social Care Team 8.10.21
32	SENDIASS Board Agenda - Monday 17th January 2022
33	SENDIASS Board Minutes 17th January 2022
34	Young People's Participation Charter Undated see line 35
35	Young Peoples Participation Charter Created 2.12.21
xSENDIASS - Information Pack (not dated for creation, review or update)	
36	1. SENDIASS Information Pack Contents Page
37	Leaflet SENDIASS
38	SENDIASS - Annual Review Process
39	SENDIASS - Annual Review Timescale Chart
40	SENDIASS - Appeals
41	SENDIASS - Areas of SEND
42	SENDIASS - Assessment Process
43	SENDIASS - Assessment Timescale
44	SENDIASS - Confidentiality Policy
45	SENDIASS - Definition of Advocacy
46	SENDIASS - Disability Discrimination
47	SENDIASS - EHCP 'Cease to Maintain'
48	SENDIASS - Exclusions
49	SENDIASS - Home to School Transport
50	SENDIASS - Impartiality Policy
51	SENDIASS - Information for Young People
52	SENDIASS - Issuing an EHCP
53	SENDIASS - Mediation
54	SENDIASS - Naming a Placement
55	SENDIASS - Personal Budget
56	SENDIASS - SEND Support & School Funding
57	SENDIASS - Tribunal Hearings
58	SENDIASS - What are Special Needs
59	SENDIASS - What is an EHCP
60	SENDIASS - Young People with SEND
SENDIASS Annual Report (6) (from SENDIASS)	
61	SENDIASS Annual Report (1) 1.9.14-31.8.15
62	SENDIASS Annual Report (2) 1.9.15-31.8.16
63	SENDIASS Annual Report (3) 1.9.16-31.8.17
64	SENDIASS Annual Report (4) 1.9.17-31.8.18
65	SENDIASS Annual Report (5) 1.9.18-31.8.19
66	SENDIASS Annual Report (6) 1.9.19-31.8.20
Joint Commissioning – 2021 (from SENDIASS)	

67	Item 1 - Covering Note 12th January 2021
68	Item 2 - SENDIASS Joint Commissioning Paper 30th June 2020
69	Item 3 - Schedule A SLA Joint Commissioning Created 28.12.19
70	Item 4 - Schedule B Joint funding SENDIASS Created 27.6.20
71	Item 5 - Schedule C Financial Overview SENDIASS created 26.12.19
72	Item 6 - Schedule D data processing created 26.12.19
73	Item 7 - Schedule E Joint Funding SLA SENDIASS created 26.12.19
74	Item 8 - Minimum Standards with DfE DH sign off
75	Item 9 - Birmingham IASP contract variation 20-21 SIGNED 31.3.20
76	Item 10 - Cat 2 Restrictions. Action Plan Created 9.6.20
77	Item 11 - SENDIASS Operational Plan Created 27.6.20
78	Item 12 - <i>SENDIASS Leaflet</i>
79	Item 13 - The Role of SENDIASS in the Community Family Educational Recovery Programme (2020) Created 27.6.20
80	Item 14 - <i>Quality Assurance Form</i>

Birmingham SENDIASS Action Plan: as at April 2023

2.2 A	To establish reliable and sufficiently detailed data recording so it can be analysed effectively to inform strategic planning		
Action ref.	Actions to take	Action owner	Completion date (green indicates a complete action)
1	To have a purpose built SENDIASS database to accommodate the detail needed to support all aspects of service development and delivery which fully supports national benchmarking. This database will provide clear distinction between service users and level of service provided. It will be separate from Local Authority databases and used for SENDIASS work only. Service is working with the BCC web team and corporate communications on a new website and design.	Interim Head of Service for SENDIASS – In Progress	30/05/2023
2	To use the database to record appropriate personal details and key information relating the casework. Issues to be recorded in line with GDPR requirements only recording information pertinent to the individual and in line with the level of support required (1-4). We have service user details recorded in Access and a Folder containing all CYP documents and case/tribunal information in readiness to transfer to the New Database – Actions currently sit with BCC IT&D.	Interim Head of Service for SENDIASS – In Progress	30/05/2023
3	Service to adopt, apply and accurately record the nationally agreed 4 levels of intervention.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
4	To ensure staff ask, record and date parental permission to speak to others stating exactly who e.g. school staff, Educational Psychology, SEN case worker etc. and also to note anyone they refuse to give permission for (this may form part of a discussion). This needs to be routinely checked and updated. It is not to be assumed as an open-ended agreement.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023

5	Data should be routinely “pulled off”, ideally monthly but a maximum of termly, for analysis. All key data should be presented for a range of audiences including e.g. steering group, etc and be included in regular public reports e.g. termly or annual reports made available e.g. on website. See 2.2 B9 below Data Analysis done but not yet taken from the database as this is not in place yet.	Interim Head of Service for SENDIASS	31/03/2023 Ongoing
6	Database is exclusively accessed by SENDIASS employees and volunteers only. Ensure all staff within SENDIASS understand the recording requirements and establish system for database to be routinely and efficiently updated i.e. without unnecessary delay preferably by dedicated member of staff i.e. administrator post to reduce or avoid mishaps.	Interim Head of Service and Deputy Head of Service for SENDIASS	30/06/2023 (once database in situ)

2.2 B	All operational processes and procedures are formalised and policies are sufficiently detailed to be clear and watertight		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	To update confidentiality and impartiality policies to ensure they are watertight and improve transparency. To add dates re: created, amended and next review and make them widely available. Make sure all SENDIASS staff, including temporary or volunteers, are fully briefed and understand how they are applied operationally. Make sure all stakeholders have a clear understanding of them.	Interim Head of Service for SENDIASS	28/02/2023
2	To adopt an empowerment model of service delivery supported by improved information being available. See 2.2 B7 below Develop plain English step-by-step truly impartial resources to support parents/YP in understanding of what their rights are outlining all their options to implement them, promoting an engagement model and not a confrontational approach from the outset. Make available on website and everywhere else that is relevant. Can also be mailed out. (See 2.2 D3 below) If appeal made to tribunal ensure it takes a “supporting” role and can explain any exceptional circumstances that requires it to “represent” i.e. representation will be the exception not the norm. Routinely provide training sessions for parents/YP on common themes such as SEN Support and reviews, Draft EHCPs, Annual Reviews, including how to get the most out of meetings. (NB encourage parents to	Interim Head of Service and Deputy Head of Service for SENDIASS	31/03/2023

	identify who their natural supporter is i.e. within their family, friendship circle or community and invite them to training sessions with them.) offer via face to face or virtual and at different times to improve reach.		
3	For all staff to clearly understand and stick to the boundaries of their role and the SENDIASS remit which will be scaffolded through additional individual and group training and supervision. This includes when supporting parents in escalating a concern, it is done with respect, at the appropriate level, promotes and encourages partnership working. Only suitably trained and experienced staff should be dealing with level 4 interventions. Lesser inexperienced staff could joint work and shadow at meetings (with all party agreement) e.g. mediation to continue their professional development.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
4	Staff handbook to include step-by-step processes Retraining of all staff in IPSEA Legal training (levels 1-3) should be considered alongside the need to consolidate learning and application before taking next level. All casework should be underpinned by Section 19 Principles.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
5	The nationally agreed evaluations to be sent out at the end of each case. These should be sent out in the spirit that is intended, that is anonymously and kept separately i.e. not attached to case file. These should be fully recorded, analysed e.g. service practice might need to adjusted, and included in the Annual Report in full i.e. all questions. Numbers sent out and percentage return should also be recorded and included. Evaluation forms should also be adopted for capturing professional feedback e.g. those attending a meeting with SENDIASS and parents.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/03/2023
6	To consistently follow and apply at all times the impartiality policy. This includes being clear with all stakeholders that the service only accepts direct referrals from parents or CYP and only in exceptional circumstances will it deviate away from this principle. The service will not store or have access to reports without the consent of the parent/YP.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
7	Service development plan to address all areas of non-compliance. Consider involving permanent members of staff as each taking an area of responsibility e.g. website, resources, training, CYP, etc. to foster a collective ownership and pride in the service.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/01/2023
8	Introduce a formalised triage system (when to ensure cases are consistently prioritised according to set criteria. Service deficit recording to be introduced and reported See 2.2 B 2 above. NB this can only be piloted when range of step by step resources are available	Interim Head of Service for SENDIASS	31/01/2023

9	To have its own complaints procedure	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
10	<p>To produce an annual report based on termly/quarterly reports. These should be available publicly e.g. website, Local Offer, mailshot etc. It will include as a minimum:</p> <ul style="list-style-type: none"> I. Self-assessment e.g. RAG rating of Minimum Standards with examples of evidence if green and explanations or actions if amber or red II. Full stats broken down re casework, referral pathways etc and analysis including comparison to previous reporting period(s) III. Reporting on evaluations/feedback received and any changes this has brought about to service practice IV. Relevant national and local issues or changes impacting on families in relation to their reason for contacting SENDIASS V. Pressures on service e.g. increase in referrals, staff sickness, office relocation, funding e.g. cut, new source, etc VI. Overview of service activity including breakdown of training sessions provided, themes, audience (parents, YP professionals – stating who e.g. SENCo, SEN governors, YOT. VII. Updates to policies or website VIII. New initiatives e.g. a volunteer programme, monthly drop-ins, weekly evening help-line IX. Training attended by staff X. Steering Group – how many times it met, changes or vacancies 	Interim Head of Service for SENDIASS	31/07/2023

2.2 C	Establish stringent quality assurance processes across all aspects of service, with an external element (initially at least)		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	Agree key principles of quality assurance e.g. accuracy, plain English, accessibility, relevant to the intended audience (especially those new to the “system”), truthful and in context. It should also include	Interim Head of Service for SENDIASS	31/03/2023

	references/links to original source e.g. SEN Code of Practice, C&FA 2014, LA policy so they can be cross referenced by the reader if they wish to ensure transparency. They should also reflect PCP principles as the C&FA 2014 was built on these too.		
2	Establish quality assurance reviewing group (suitable for remote working). Members need to be selected for appropriateness for different aspects according to nature of materials. Ideally at least one member will not have any professional connection with SEN or education etc. for some of not all parent/YP targeted resources because if it makes sense to them it will likely make sense to others. For example training materials for professionals may need different input for sessions required for parents or CYP even if same topic e.g. Annual Reviews so the QA reviewing membership will need to be adjusted accordingly.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
3	All resources for parents and CYP will enable empowerment by clearly reflecting the law and associated rights and responsibilities, local (lawful) practice in context i.e. you have a right to appeal to tribunal but also clearly outline all the options to be taken to promote engagement and encourage a culture of trust between parents/CYP and the professionals they will be required to engage with, before it gets to the point of making an appeal. Resources will be step by step, to enable those unfamiliar with SEN terminology and processes, to be able to understand, be fully informed and follow them with minimal support but will also highlighting how SENDIASS might be able to assist at each step. - Team providing impartial advice, sharing SEN Jargon Buster as well as signposting to IPSEA information and advice. Still developing further resources.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/03/2023 Ongoing
4	Back to basics training programme, including person centred planning, to be created for ALL SENDIASS staff. This programme must be developed externally of any existing, or past staff or associates of Birmingham SENDIASS and could be commissioned externally. - All retained staff re-doing their IPSEA Levels 1-3. As well as ad hoc training sessions	Interim Head of Service and Deputy Head of Service for SENDIASS	31/03/2023 Ongoing

2.2 D	To improve visibility of service including standalone website to include resources to support empowerment		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	In the interim and asap, upload all CDC animations to SENDIASS page on LA website and/or LO. Add links to external sources of support e.g. IPSEA, ACE Education Advice and Training, SOSSEN, Coram Children's Legal Centre	Interim Deputy Head of Service for SENDIASS	15/03/2023

2	Carry out an immediate review of all wording on SENDIASS information currently available with relevant others i.e. those external to SENDIASS e.g. PCF, NCB etc. Covert to plain English, make all required corrections and update asap.	Interim Deputy Head of Service for SENDIASS	31/03/2023 Ongoing
3	Develop a range of new step-by-step guides for parents for a range of common themes e.g. getting the most out of a meeting, requesting a statutory assessment, annual reviews etc. These should be added to SENDIASS page on LA website as soon as they become available until the new website is ready. See 2.2 B2 above	Interim Head of Service and Deputy Head of Service for SENDIASS	30/06/2023
4	To develop standalone website (see MS 3.3) with ideally a dedicated section for CYP. As above	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
5	Clear and distinct identifiable logo on all resources (MS 3.2), training e.g. Powerpoint slides. Materials and resources should also acknowledge original source where data is included from other sources. Logo ideas sent to PCF for review and parent feedback	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
6	To implement social media e.g. facebook especially to promote events or changes and is easy for parents to share and disseminate information.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
2.2 E	Effective staffing structure including an admin post, all appropriately trained		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	In accordance with BCC policies and IASS minimum standards, put in place a staffing structure that is appropriate to the service.		28/06/2023
2	Clear staffing structure included on website with photos e.g. "meet the team" Job titles for all SENDIASS staff should say the service and title in the first line to avoid confusion with other services e.g. SENDIASS Manager, SENDIASS support worker, SENDIASS caseworker depending on what titles are decided upon. SENDIASS Manager and staff do not have additional LA roles or responsibilities outside of SENDIASS to avoid conflict with confidentiality etc. All SENDIASS staff to conduct themselves according to their role and JD in SENDIASS and not to their previous, or future in case of students on placement, jobs i.e. they are not employed as social workers or teachers.		31/09/2023

3	To ensure all staff act professionally at all times including in all forms of communications and their engagement with others e.g. by understanding and respecting the boundaries of other services or individual professionals.		28/02/2023
4	Compulsory “back to basics” training to be developed for ALL staff, existing and new to reflect all new ways of working, including the role of carrying out casework, Person Centred Planning/Approaches and how this applies to all EHCP processes. Solution Focus training might also be useful. - All Staff are redoing IPSEA Training		31/03/2023
5	All staff to be provided with their own copy of the SEN Code of Practice and if possible extra copies to be available for volunteers or students to be able to have access to and how to access it electronically.		31/01/2023
6	Ensure Volunteer SENDIASS Officers are IPSEA Level 1 trained and also receive guidance on collecting data for assessment, in particular gaining the child/young person’s views.		31/07/2023
7	Quarterly staff appraisals and supervision (careful consideration to be given regarding who should conduct these, initially at least). Objectives should reflect the changes of working practice within SENDIASS and be linked to service Development Plan.		31/03/2023 Ongoing

2.2 F	Have an effective management structure in place		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	Line management for Service Manager to be clear and at an appropriate level within directorate	Interim Head of Service and Deputy Head of Service for SENDIASS	13/03/2023
2	New proposed Steering group to consist of new terms of reference and a Quorum – Proposed representation from 2 parents, 2 Young people, Parent Carer Forum, EP, CCG/DCO, SENDIAS Co-ordinator, Head Teacher, SENDCO, Social/Family Worker.		30/05/2023

	Its role will be to oversee service direction etc.– TOR, membership, minutes, routine agenda items e.g. going through service report including data, review development plan. SG meetings need to ordinarily be maximum of quarterly or minimum of termly.		
--	--	--	--

2.2 G	Compliance with remaining Minimum Standards not addressed in 2.2A to 2.2F above		
Action ref.	Actions to take	By who	Completion date (green indicates a complete action)
1	Joint Commissioning in accordance with MS 1.1 against a tight SLA pegged against the MS. including reviewing, monitoring and reporting arrangements.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
2	Development plan (MS 1.8) to address all areas of minimum standards to either address non-compliance or ensure continued compliance. Improvement targets should be informed by data and there should be a “thread” to link why everything is happening.	Interim Head of Service and Deputy Head of Service for SENDIASS	28/02/2023
3	Constructive strategic involvement (MS 2.3) once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.	Interim Head of Service and Deputy Head of Service for SENDIASS	30/04/2023
4	Establish partnership working and agreement with PCF (MS 2.3) In progress. We are working collaboratively on SENDIASS infrastructure.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/05/2023
5	Develop a training programme (MS 3.6) to include stakeholders, parents and CYP once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.	Interim Head of Service and Deputy Head of Service for SENDIASS	31/06/2023

2.2	Actions required by LA from issues arising during this review outside of SENDIASS		
Action ref.	Actions to take	By who	Completion date (green indicates a

			complete action)
1	Front Door – uncouple from SENDIASS with immediate effect so that family support is delivered by Birmingham Children’s Trust.	Director - Strategy, Commissioning and Transformation	02/05/2023
2	Rename Parent Link e.g. SENAR Gateway and reconsider description as it is misleading as sounds like SENDIASS. Ensure when parents contact “Parent Link” they know who exactly they are speaking to and what their role is.	Director – SEND and Inclusion	01/09/2023
3	Improve communication options in SENAR letters – add contact name and details e.g. email and phone number so parents can directly and easily contact to try and resolve issues.	Completed by SENAR	
4	Improve content of EHCP letters – explain in letters that are sent with draft EHCP that Section “I” must be left blank so parents can request the school they want named, reassure them they can stay at their existing placement (it is known to worry parents when it is blank that their current placement might be under threat) be honest and explain current situation e.g. pressure on school places particularly special school and reassure LA is willing to work with parents to come up with an acceptable solution e.g. an interim arrangement if appropriate.	Director of SEND and Inclusion	01/09/2023
5	Update parents/PCF/SENDIASS – share good news as things are being introduced or changing e.g. all SENAR staff training, recruitment etc.	All (through existing newsletter and comms)	ongoing

Birmingham City Council

Report to Cabinet

Date: 16th May 2023



Subject: **SCHOOLS' CAPITAL PROGRAMME – SCHOOL
CONDITION ALLOCATION, BASIC NEED
ALLOCATION 2023-24+ FUTURE YEARS**

Report of: **Sue M Harrison, Director for Children & Families**

**Relevant Cabinet
Member** **Cllr Karen McCarthy- Children Young People and
Families**
Cllr Yvonne Mosquito - Finance & Resources

**Relevant O &S
Chair(s):** **Cllr Kerry Jenkins– Education & Children's Social
Care**
Cllr Akhlaq Ahmed- Resources

Report author: **Jaswinder Didially,**
Head of Education Infrastructure,
Telephone No: 0121 303 8847
Email: Jaswinder.didially@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011355/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 To update on progress of the Schools' Basic Need (BN) Capital Programme and Schools' Condition Allocation (SCA) Programme.
- 1.2 To seek approval for the Project Definition Document (PDD) for the Schools' Condition Programme 2023/24 plus 'Future Years'.
- 1.3 To seek approval for the Project Definition Document (PDD) for the Schools' Basic Need Programme 2023/24 plus 'Future Years'.
- 1.4 To reaffirm authorisation to increase the delegated authority level of the Service Director for School related projects from £200k to £500k, in order to prevent unnecessary school closures in emergency situations, and to seek authorisation that this increased delegation can be extended for projects to meet our statutory duty to provide additional pupil places.
- 1.5 To seek authorisation for Capital Project and Programme overspends to be approved by the relevant decision maker in line with resource thresholds outlined in the Birmingham City Council Constitution document.

2 Recommendations

That Cabinet; -

- 2.1 Notes the progress on the delivery of the Schools' Condition Programme and Schools' Basic Need Capital Programme, as outlined in this report.
- 2.2 Approves the PDD for the Schools' Condition (SCA) Programme (**Appendix 2**) and the anticipated allocation of £14.000m for the delivery of this programme.
- 2.3 Approves the PDD for the Schools' Basic Need (BN) Programme (**Appendix 3**) for the delivery of this programme.
- 2.4 Approves the procurement strategy for the Basic Need and Schools' Condition Allocation schemes above the procurement governance threshold of £177,897 to use Acivico Ltd's Constructing West Midlands 2 Framework Agreement and delegates the award of contract to the Cabinet Members for Children, Young People & Families and Finance & Resources in conjunction with the Director for Education & Skills.
- 2.5 Approves the allocation of £5.000m of Basic Need Grant for the development of Feasibility Studies to inform Full Business Cases (FBC) in order to deliver the Basic Need and High Needs Provision Programme.
- 2.6 Notes that in dual funded projects, approval will only be sought for the Council's contribution to the cost of the project.
- 2.7 Notes and reaffirms a decision made by Cabinet on 26th March 2019 increasing the delegated authority level for the Director for Education and Skills, from £200k to £500k for schools' emergency reactive maintenance

projects and approve the extension of this delegation for projects to meet our statutory duty to provide additional pupil places.

- 2.8 Authorises the City Solicitor and Monitoring Officer to negotiate, execute, seal and complete all necessary documents to give effect to the above recommendations.
- 2.9 To delegate the approval of Capital Project and Programme overspends to be approved by the relevant decision maker in line with resource thresholds outlined in the Birmingham City Council Constitution document.

3 Background

- 3.1 The Local Authority has a statutory duty to secure sufficient school places to meet the needs of the population in Birmingham.
- 3.2 It remains a challenge to predict with certainty where and when places will be needed. The current priority is to create sufficient secondary mainstream and special educational need places as the growing primary cohorts are now entering secondary school. The supply of school places continues to increase with new places provided by Free Schools, additional places provided by schools that are their own admissions authorities and additional places provided through the Local Authority's Basic Need programme.
- 3.3 Since 2009 over 23,200 additional mainstream school places have been created in Birmingham. These include permanent and temporary expansions as well as bulges to meet in-year growth and includes new schools. The last School Capacity (SCAP) return to the DfE was submitted at the end of July 2022 and is pending signoff. This return provides a clear indication of our requirements for 2022/23 to 2028/29, reflecting the requirement for additional secondary places to meet demand. The secondary place demand was outlined originally in the School Place Planning Requirements 2018/19 to 2024/25 document published in December 2018 as a result of higher primary cohorts, continued growth and new housing developments. However, since that publication, updated forecasts as a result of changes to planning areas, migration in the region and local housing developments has prioritised target areas for additional places in both the north of the city (Erdington and Sutton Coldfield), as well as southeast Birmingham (Hall Green and Selly Oak).
- 3.4 Since 2015 over 620 additional special educational needs (SEND) places across special schools, as well as additional places in both new and expanded resource bases, have been created. This coming summer 2023 will see the first SEND SCAP return to the DfE. Work is ongoing to meet current and forecast demand to meet the needs of our City.
- 3.5 Our strategy in Birmingham to meet Basic Need has 4 key strands:
 - Make optimum use of existing space, buildings and sites to provide sufficient, suitable, high quality additional places where needed
 - Work with all schools, academies and new schools to meet Basic Need through co-ordinated expansion plans

- Allocate annual Basic Need Capital investment effectively and efficiently to areas where basic need requirements can only be met through either re-modelling, refurbishment or new-build projects
 - Identify alternative funding sources and models to deliver requirements including S106, school contributions, bidding opportunities etc.
- 3.6 The Health and Safety at Work Act 1974 and School Standards and Framework Act 1998 Section 22 requires the Local Authority in its capacity as the employer to provide a safe place of work and to ensure that the maintained school estate is not subject to decay which could put the health and safety of pupils at risk.
- 3.7 Since the introduction of the Academies Act 2010, the education landscape has been changing as some schools choose to change their status from Local Authority maintained to Academy. While the Council's maintained schools' portfolio has been reduced as a result of the Academies programme, the Council remains the single largest Accountable Body and Landlord for education in Birmingham and receives an annual grant funding to fulfil its statutory duties in relation to the schools' estate.
- 3.8 The School Condition Programme, which sits within the Schools' Capital Programme 2023-24, addresses these issues through annual planned maintenance projects and reactive emergency repairs to LA maintained schools. The SCA grant that the Council receives is not sufficient to meet the substantial backlog maintenance requirements across our maintained schools' estate. Therefore, prioritisation of maintenance projects, based upon the risk resulting in school closure, is necessary, along with leveraging of joint funding with schools wherever possible. In 2022/23 we have so far delivered 47 planned maintenance, 32 approved dual funded projects and forecasting a spend of £0.640m on reactive maintenance as at 31st January 2023.
- 3.9 Priority School Building Programme (PSBP)
- This is a Department for Education (DfE) funded condition led capital programme. However, the Local Authority, as landowner, is expected to meet the costs with regard to ground contamination and for works outside the site boundary e.g. Section 278 highway works, which are unknown and unquantified at this stage. The Council also has the opportunity to provide additional funding to create additional places should there be a need in the area. These costs will have to be funded from either the School Condition or Basic Need allocations and will be confirmed at FBC / Chief Officer Delegation stage

4 Options considered and Recommended Proposal

- 4.1 The option of relaxing the Council's commitment to providing school places within recommended travel distances would reduce the risk of capital funding shortfalls but would increase the need for young people to travel further to attend school with the subsequent, documented risk of non-attendance and underachievement.

- 4.2 The option of reducing the maintenance programme to emergency repairs only would lead to increased risk of school closure from asset failure and would reduce the value for money that can be secured through effective planned maintenance.
- 4.3 It is therefore proposed that the PDD's for Schools' Condition Allocation, Basic Need Allocation and High Needs Provision Allocation are approved.

5 Consultation

Forecasts have been refreshed to update the latest information on births, cohort growth (including migration and cross-border movement) and housing developments. These were submitted to DfE during July 2022. They reflect notable changes in migration trends, particularly including the impact of pupil numbers arriving from resettlement schemes within the region. Information on the changes and implications to schools has been shared through Primary and Secondary School Forums, as well as via consortia or network meetings, meetings with schools, trusts and governing bodies. In some circumstances, schools have been targeted and consulted directly to consider additional places. Schools are reminded annually of their duty to notify the Council of and consult on any changes to their admission arrangements. Ongoing consultation will continue to take place as required with key external stakeholders in all projects within the Schools' Capital Programme.

6 Risk Management

- 6.1 Limiting any school condition spend to emergency repairs only will result in backlog maintenance issues escalating across the estate leading to serious health and safety risks for staff and pupils in school.
- 6.1.1 To mitigate this risk, we will prioritise projects that meet the following criteria (as set out in **Appendix 2**):
- Condition issues that are most likely to lead to school closure
 - Condition issues that pose Health and Safety risks
 - Condition issues that must be addressed in order to fulfil statutory compliance obligations
- 6.2 The risk of projects running over time and over budget will be mitigated by ensuring appropriate programme management of Contractor is place so that all parties are informed of progress against the 2023/24 programme. This will enable any concerns to be picked up at the earliest opportunity and resolved so that the programme stays on track. Where there is a risk, acceleration of projects may be introduced to ensure projects are delivered on time resulting in sufficient places for all children of Birmingham. Where costs are escalating, a value engineering exercise will be undertaken to ensure that the costs do not exceed the agreed amount or available budget.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

7.1.1 The Schools' Capital Programme is necessary for the Council to meet its statutory duty to secure sufficient early years, primary, secondary and special education places in safe and compliant school buildings and early years' settings. City-wide, the School Condition programmes will support the Council Priorities.

7.1.2 The spending priorities proposed are in accordance with the Schools' Capital Programme 2023-24 and the Council's Vision and Forward Plan priorities for Children, particularly 'A great place to grow up in by providing an environment where children have the best start in life and are able to realise their full potential through great education'. The provision of additional school places is also beneficial to the safeguarding of children.

7.1.3 Birmingham Business Charter for Social Responsibility

Compliance with the BBC4SR is a mandatory requirement that will form part of the conditions of any contract in accordance with the social value policy. Contracts in tier 1 (below the PCR 15 threshold) are encouraged to complete at least 1 project from the Match My Project portal for the duration of the contract. Any tier 2 contracts (above the PCR15 threshold) require the full consideration of social value and application of the BBC4SR including the delivery of at least 1 project which is relevant to the social value outcomes sought through the contract and where possible from the Match My Project portal, per year. Tenderers will be required to submit an action plan with their tender that will be evaluated in accordance with the CWM2 framework protocol and the action plan of the successful tenderer will be implemented and monitored during the contract period.

As a condition of any grant issued, each school will be required to be certified to the BBC4SR and produce an action plan with commitments relevant and proportionate to the payment:

7.2 Legal Implications

7.2.1 This report facilitates the discharge of the Local Authority's duties and overall responsibility for the capital strategy for schools, under section 14 of the Education Act 1996. The Local Authority has a general landlord duty for all buildings which it lets to academies, and a duty under section 22 of the School Standards and Framework Act 1998 to maintain its schools, this includes expenses relating to premises.

7.2.2 Under Section 1 of the Localism Act 2011, the Council has the power to enter into the arrangements set out in this report, which are within the remit and limits of the general power of competence Section 2 and 4 of the Localism Act 2011.

7.3 Financial Implications

- 7.3.1 The Schools' Capital programme is primarily funded from the Department for Education's School Condition Allocation (SCA), Basic Need (BN), High Needs Provision Capital Allocation (HNPCA) and other resources as indicated in **Appendix 1**.
- 7.3.2 In the event that capital resource availability for these purposes is changed, then the programme will be amended to reflect such changes through the existing quarterly review process with detailed approval to be sought through the appropriate governance procedures.
- 7.3.3 **Appendix 1** provides the summary of spend requirements profiled for 2023/24 + Future Years.
- 7.3.4 There is no request for any new resources, but approval to spend existing allocated resources as outlined in **Appendix 1**.

School Condition Resources	Projected Profile Spend
	2023/24 £m
School Condition	14.000
Totals	14.000

Additional Places Resources	Projected Profile Spend
	2023/24 £m
Basic Need	6.000
High Needs Provision	5.000
S106 Funding	1.000
Corporate Resources	8.500
Totals	20.500

7.4 Procurement Implications (if required)

- 7.4.1 The Council's primary procurement route for works of this nature is to use Acivico Ltd's Constructing West Midlands 2 Framework Agreement either undertaking a further competition exercise (this being the default route) or a direct award, subject to the complexities and timescales of each project in order to ensure that the Council's statutory duties are met. Where direct award is the route, value for money will be demonstrated by Acivico Ltd to the Council and reported in any award report
- 7.4.2 Where a grant is issued to a school for the works, the responsibility for the procurement and award of contract is with the school under their

governance arrangements. The Conditions of Grant Agreement will include the requirement to demonstrate to the Council value for money and compliance to any legislation including the Public Contracts Regulations 2015 from the issue of the payment.

7.5 Human Resources Implications (if required)

7.5.1 N/A

7.6 Public Sector Equality Duty

7.6.1 A Full Equality Analysis (EQA650) was reviewed and updated in March 2023 for the Schools' Capital Programme 2023–2024. Having considered the Public Sector Equality Duty in light of the recommendations in this report, it has been decided that another Full Equality Analysis is not required, and it thought that that the decisions taken in this report will support the Council's performance of the duty.

7.6.2 The outcomes from the Equality Analysis demonstrate that proposed capital developments support positive outcomes for children, young people, their families and carers. No negative impact on people with Protected Characteristics was identified. It was concluded that sufficiency of educational places and opportunities for all children and young people contributes to providing positive life chances and supports a positive approach to Safeguarding in Birmingham actively reducing the number of children and young people out of school helps to mitigate risk to their safety and wellbeing.

7.7 Environmental and Sustainability Implications

7.7.1 Not required - Financial reports with no sustainability/environmental implications

8 Appendices

8.1 List of Appendices accompanying this Report (if any):

1. Requirements and financial model
2. PDD SCA
3. PDD BN

9 Background Documents

9.1 None

Appendix 1:

School Condition Programme –School Condition and Basic Need Allocation - 2023 -24+ FUTURE YEARS

Requirements and Financial Model.**Contents**

- 1. Financial Modelling Approach**
- 2. School Condition Funding Allocations**
- 3. Basic Need Funding Allocation**
- 4. S106 Income**
- 5. School Condition Programme future Requirements**
- 6. Basic Need Programme future requirements**
- 7. Other Programme Updates**

1. Financial Modelling Approach

In order to deliver the Schools Capital Programme within available resource the following approach is taken:

Step 1: Requirements

Define future requirements for the schools' capital programme:

- i) priority maintenance requirements to prevent school closure for 2023– 24 +
- ii) additional places required in special and mainstream schools for 2023 – 24 + future years

Step 2: Resources available

Set out the confirmed funding for the delivery of the capital programme and identify how many of the requirements can be met from the available capital funding

Step 3: Affordability measures

Quantify the requirements that must be found either through:

- i) maximising use of existing space
- ii) identifying alternative funding sources (Section 106, school contributions, bidding opportunities, LCVAP, Community Infrastructure Levy, future Basic Need / School Condition Allocations, Capital Receipts, Free School Applications, Corporate Resources etc.)

The number of school places required may change during the development of options for the School Basic Need Capital programme as a result of Free Schools and Academy expansions and as a result of changes to net migration.

2. School Condition Funding Allocations

The School Condition funding allocations announced to date are:

Assumed School condition Allocations			
2021/22 £m	2022/23 £m	2023/ 24 £m	Total £m
3.167*	12.701**	12.457 ***	28.325

* Balance from 21/22 allocation

** Balance from 22/23 allocation

*** Dfe confirmed allocation 23/24

The sections below set out how we intend to deliver the requirements of each stage within the resource available. A degree of re-profiling of the funding available will need to be carried out as the development of preferred options clarifies the cost of each individual solution.

This is part of the annual update to Cabinet and covers: -

- i) Changes to requirements based on demographic analysis and updates regarding Academy and Free School expansions
- ii) Update on funding including any new funding streams or capital allocations
- iii) Modelling of requirements for the current and next stages of the capital programme
- iv) Update on solutions developed and any re-profiling of capital requirements within resources available
- v) Update on delivery against capital programme output

Basic Need Funding Allocation

The Basic Need funding allocations announced to date are:

Basic Need Allocations				
2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m	Total £m
24.173*	0.000	0.000	26.182**	50.355

*Balance of 2022/23 allocation

**Confirmed Dfe Allocation 2025/26

Corporate Resources

Our Annual SCAP return for 2020 resulted in a 'Nil' allocation for the year 2021/22, due to a change in the application of abatement. This decision by the Dfe meant that we could not meet the demand for 7

FE's for the year 2021/22 which equates to 1050 places. In order to meet this demand fully, the Directorate put in a successful bid for Corporate Resource for the value of £19.656m.

Corporate Resources	
2023 / 24 £m	Total £m
13.991	13.991

*Balance of Corporate Resources.

High Needs Provision Fund Allocations

The High Needs Provision allocations were announced by DfE in March 2021.

Confirmed High Needs Provision Fund Allocations		
2022/23 £m	2023/24 £m	TOTAL £m
13.563*	13.175	26.738

*Balance of 2022/23 allocation.

The High Needs Provision capital allocation is to support the creation of new High Needs places or the improvement of existing provision (for pupils with Special Educational Needs and Disabilities (SEND) or requiring Alternative Provision (AP)).

3. Section 106 Funding

The service currently holds a balance of £5.011m of Section 106 income which can be used for Capital works in accordance with the conditions attached. Where appropriate, we will require a deed of variation to fully utilise the funding.

4. School Condition Programme Future Requirements

School Condition Resources	Allocation announced to date £m	Projected Profile Spend		
		2023/24 £m	2024/25 £m	2025/26 £m
School Condition	28.325	14.000	14.325	
Totals	28.325	14.000	14.325	

5. Basic Need Programme Future Requirements

Additional Places Resources	Allocation announced to date £m	Projected Profile Spend		
		2023/24 £m	2024/25 £m	2025/26 £m
Basic Need	50.355	6.000	9.000	35.355
High Needs Provision	26.738	5.000	10.000	11.738
S106 Funding	5.011	1.000	2.200	1.811
Corporate Resources	13.991	8.500	5.491	
Totals	96.095	20.500	26.691	48.904

APPENDIX 2

PROJECT DEFINITION DOCUMENT (PDD)			
1. General Information			
Directorate	Children & Families	Portfolio / Committee	Education & Early Years
Project Title	School Condition Programme –School Condition Allocation 2023-24+ FUTURE YEARS	Project Code	LV0013
Project Description	<p>Department for Education (DfE) annual School Condition Allocation grant funding is awarded to the Local Authority (LA) for the purposes of addressing maintenance issues across the LA maintained school's estate only. Voluntary Aided schools receive their maintenance funding through a different grant funding scheme and Academies are funded directly by the Education Funding Agency (EFA).</p> <p>The Local Authority is expected receive an annual School Condition Allocation (SCA) of £12.457m from DfE for the year 2023/24. This grant is not ring fenced or time bound, however we are required to verify this funding has been spent on capital projects through the Section 151 officer's return.</p> <p>The School Condition Programme aims to address key priority condition items across all Local Authority Maintained schools by allocating the available School Condition grant funding to address highest priority condition need.</p> <p>This report sets out the proposed School Condition Grant spend for 2023-24. The key criterion for prioritisation of planned and unscheduled maintenance projects is to ensure continuity of education in a safe environment. This criterion also applies to projects considered under the dual funding initiative. In essence we will prioritise:</p> <ul style="list-style-type: none"> i) Condition issues that are most likely to lead to school closures ii) Condition issues that pose Health and Safety risks iii) Condition issues that must be addressed in order to fulfil statutory compliance obligations. <p>In addition to a direct School Condition Grant to the Local Authority, the EFA allocates individual devolved formula capital funds to every school. The Local Authority cannot control how this funding is spent.</p> <p>However, the dual funding initiative provides schools with the opportunity to apply for additional funding to address key building related priorities. Following the successful programme delivered between 2013 and 2022, it is proposed that the initiative is continued in 2023-24. This will encourage schools to direct the spending of their devolved formula capital to address condition priorities and will thereby increase the level of investment into the condition of our school buildings.</p> <p>There will also be a continued emphasis on maximising schools' contributions to planned and emergency capital maintenance works, particularly where schools are holding surplus balances or where the ongoing burden on the school of 'patch and repair' can be reduced by a jointly funded project to address the root cause of the condition issue.</p>		

	<p>The key work streams in the School Condition Programme, described in more detail in the project deliverables can be summarised as:</p> <ol style="list-style-type: none"> 1. Centrally Managed Planned School Condition Programme (condition issues most likely to lead to school closure) - £12.000m 2. Emergency unscheduled repairs to prevent school closures – £1.000m 3. Dual Funding initiative – £1.000m
Links to Service and Corporate Outcomes	<p>Projects have been developed and delivered to maximise alignment with local priorities, in particular to impact on developing skills, employment opportunities, public health and community cohesion. Works will contribute to the Council Business Plan and Budget 2023+, particularly 'A Prosperous City', by ensuring the provision of school places enabling children to benefit from education through investment at a neighbourhood school.</p> <p>Compliance with the Birmingham Business Charter for Social Responsibility (BBC4SR) is a mandatory requirement that will form part of the conditions of any contract in accordance with the social value policy. Contracts in tier 1 (below the PCR 15 threshold) are encouraged to complete at least 1 project from the Match My Project portal for the duration of the contract. Any tier 2 contracts (above the PCR15 threshold) require the full consideration of social value and application of the BBC4SR including the delivery of at least 1 project which is relevant to the social value outcomes sought through the contract and where possible from the Match My Project portal, per year. Tenderers will be required to submit an action plan with their tender that will be evaluated in accordance with the CWM2 framework protocol and the action plan of the successful tenderer will be implemented and monitored during the contract period.</p> <p>Where a grant is issued, the Conditions of Grant Aid will require the school to be certified to the BBC4SR and provide commitments relevant and proportionate to the value of any payment.</p>
Project Benefits	<p>The benefits of the programme will be: -</p> <ol style="list-style-type: none"> i) reduction in school closures linked to asset failure ii) minimal disruption to educational continuity by scheduling works during school holidays iii) increased amount of investment into the backlog maintenance and priority condition need by leveraging greater investment from schools in dual funded projects iv) fair and transparent allocation of maintenance funding according to need <p>The Programme will:</p> <ul style="list-style-type: none"> ▪ address backlog maintenance and condition issues across the Local Authority maintained school's estate. ▪ enable the Council to respond to unscheduled building emergencies to minimise health and safety risks and prevent school closures.

Project Deliverables	<p>Work stream 1: Centrally Managed Planned School Condition Programme – £12.000m (based on funds remaining after allocation to work streams 2 & 3). Elements leading to school closure such as boilers, windows and roof replacement will be prioritised.</p>
	<p>This will be a planned programme of maintenance projects addressing priority</p>

condition need centrally managed by EdI.

Priority condition need across the education estate outweighs the funding available to address the maintenance issues. Projects will therefore be prioritised where the condition need has the greatest risk of leading to school closure; this translates into projects which for the most part will address roofing, heating, electrical, windows and structural conditions. There will be an emphasis on influencing schools to allocate their devolved formula capital and school surplus budgets to support addressing priority condition need in order to meet the affordability gap on maintaining the schools' estate.

Works will be prioritised according to severity and likelihood of school closure / health and safety risk. This will be evaluated by the EdI team with technical support from Acivico Ltd.

As the majority of these works are below 0.200m the award of the contract will be approved under Head of Service or Chief Officer delegation in accordance with the Constitution and Procurement Governance Arrangements. Where necessary, projects will be developed to Full Business Case stage. We are currently aware of the following projects that will be higher than 0.200m in 2023/24.

School	Works	Forecasted spend 2023/24 £m
Gilbertstone JI	New Boilers	0.300
Raddlebarn JI	Roof Replacement	0.250
Worlds End JI	Heating Distribution System	1.200
Kings Heath JI	Roof Replacement	0.300
Kings Norton Boys	Roof Replacement	0.350
Rednal Hill Jnr	Roof & Structural	0.300
Anglesey JI	Full heating system replacement	0.865

Procurement:

The Council's primary procurement route for works under the Centrally Managed School Condition Programme is to use Acivico Ltd's Constructing West Midlands 2 Framework Agreement either undertaking a further competition exercise or direct award subject to the complexities and timescales of each project in order to ensure that the Council's statutory duties are met. Where direct award is the route, value for money will be demonstrated by Acivico Ltd to the Council and reported in any award report. Project implementation will be fully compliant with planning approval and building regulations as required. Officers from the EdI team and Acivico Ltd will oversee the delivery to ensure that schemes are programmed with minimum disruption to schools.

Programme:

Where possible, all major works are planned to be carried out during school holidays (half terms and end of terms). It is anticipated that projects identified for the 2022/23 programme will in large part be completed by March 2023. However, in some cases, works may be delayed every effort will be made for these to be completed as

soon as practically possible.

Work stream 2: Emergency Unscheduled Repairs – £1.000m (based on previous years' expenditure and projected forecast based on condition of the estate and inclement weather conditions)

Annually, the EdI Team responds to a significant number of incidents that are unscheduled emergency repairs, for example the extreme weather conditions leading to flooding, frozen pipes, boiler failure etc. leading to school closures due to major asset failure.

Due to extreme weather conditions in the recent years, it is becoming increasingly difficult to estimate the volume of unscheduled repairs that will be required. In case there are insufficient funds to cover the unscheduled repairs, the planned maintenance programme will be adjusted to cover the shortfall. Likewise, any emergency monies not allocated by March 2023 will be re-directed to priority condition need identified on a reserve list of condition projects to be carried out in 2023/24.

Work stream 3: Dual Funded Programme – £1.000m (based on applications received in previous years with additional sum for managing asbestos in schools – funding allocation on first come first served basis)

Dual Funded schemes can be BCC or School led. In case of School led, Schools that demonstrate experience and capacity in delivering their own capital schemes and agree to part fund the works will be able to submit a Dual Funding application. The available funding will be allocated on a priority basis ensuring elements such as safeguarding, compliance and health & Safety are prioritised for funding. In case of BCC led, the agreed level of school contribution will be charged out to the school.

The criteria for qualifying projects is aligned with centrally managed projects and will focus on issues which are likely to lead to school closure if not addressed. The dual funding programme will also consider projects which will address major health and safety, safeguarding or compliance related issues with a particular focus on managing asbestos in line with schools' Asbestos Management Plans (AMPs).

All projects will be further developed to Full Business Case stage. The decision maker will be dependent upon value. As the majority of these works are below £200k they will be approved under Head of Service or Chief Officer delegation.

Schools will be required to sign up Conditions of Grant Aid (CoGA).

Future Governance and reporting back

An annual report will be presented to Cabinet updating on progress / delivery / outcomes and to seek approval for future spend.

Key Project Milestones	Planned Delivery Dates
Cabinet Approval for the PDD	16 th May 2023
Spend Approvals	1 st June 2023 onwards
Project works order to be issued	1 st June 2023 onwards
Works to commence on site	From June 2023
Programme completion	Throughout 2023/24

Dependencies on other projects or activities	<ul style="list-style-type: none"> • Condition Surveys • Statutory compliance requirements • Emergency repairs identified by Acivico surveyors • Placing orders with contractors • Supply chain activities i.e. manufacture and ordering e.g. boilers, windows, etc., including batching of projects to achieve economies of scale. • School term time activities and the imperative to preserve educational continuity • Planning and Building Regulation approval, where applicable
Achievability	<ul style="list-style-type: none"> • Scope of programme is identified • Programme and costs have been developed where possible • Funding strategy is in place • Client liaison between EdI and Acivico is taking place weekly to ensure work is instructed, monitored and delivered to cost and on time • Project officers from the EdI team will oversee the delivery of the projects in consultation with key stakeholders i.e. Acivico, contractors, schools, surveyors and other property professionals. The team is extremely experienced in managing school based condition projects.
Project Manager	Zahid Mahmood, Capital Programme Manager 0121 464 9855, zahid.mahmood@birmimingham.gov.uk
Project Accountant	Jaspal Madahar, Finance & Resources Manager – Education Infrastructure 0121 303 3251, jaspal.madahar@birmingham.gov.uk
Project Sponsor	Jaswinder Didially, Head of Education Infrastructure 0121 675 0228, jaswinder.didially@birmingham.gov.uk
Proposed Project Board Members	Jaswinder Didially, Head of Education Infrastructure 0121 675 0228, jaswinder.didially@birmingham.gov.uk Zahid Mahmood, Capital Programme Manager 0121 464 9855, zahid.mahmood@birmimingham.gov.uk Clare Sandland, Finance Business Partner C&F 0121 675 3570, clare.sandland@birmingham.gov.uk

Finance Business Partner		Date of FBP Approval	
Other Mandatory Information			
• Has project budget been set up on Voyager?			Yes
• Issues and Risks updated (Please attach a copy to the PDD and on Voyager)			Yes

2. Options Appraisal Records

Option 1	Limiting any school condition spend to emergency repairs only and delivering no planned priority condition need maintenance programme
-----------------	---

Information Considered	<ul style="list-style-type: none"> • Condition surveys • Structural reports • Statutory compliance reports • Reported issues by schools • Asset Management and Capital Maintenance strategy • BCC and Children & Young People's directorate business and service priorities • Available budget - DfE allocation for funding, carry forward • Basic need requirements
Pros and Cons of Option	<p>What were the advantages / positive aspects of this option? It could be argued that only the very bare minimum should be spent on maintenance of school buildings in order to mitigate the risk of a future shortfall in funding.</p> <p>What are the Disadvantages / negative aspects of this option?</p> <ul style="list-style-type: none"> ▪ By limiting all repairs to emergencies only, the backlog maintenance issues would escalate across the estate. Not taking actions to address priority condition items has the potential of serious health and safety risks for staff and pupils in schools. ▪ There is an increasing gap between those schools that have received major capital investment (Building Schools for the future, the 2 major PFI programmes and the Priority School Building Programme) and those that are struggling with inadequate facilities and deteriorating buildings. ▪ Increasing sums are spent on relentless 'patch and repair' due to lack of funding to rectify condition issues and this does not deliver value for money from the public purse. ▪ Increasing numbers of young people are exposed to unsafe and unsuitable learning environments with the associated impact on their achievement and engagement in education. ▪ Adopting an approach based on emergency repairs only will mean that less value is achieved from the maintenance funds available and schools will continue to feel let down in addressing fundamental condition issues that they are encountering. ▪ There will be an increasing risk of school closure / health and safety issues resulting from asset failure. ▪ Many Local Authority Maintained Schools will face increasing challenges coping with inadequate buildings while endeavouring to deliver outstanding education outcomes for all young people. ▪ In the context of direct funding for Academies to address maintenance issues, there will be an increased incentive for schools to convert to Academy status to

	access funding for condition priorities.
People Consulted	Schools, surveyors and other property professionals / Acivico
Recommendation	REJECT
Principal Reason for Decision	An emergency repairs only strategy is inadequate for the Local Authority to fulfil its duty to maintain our schools and provide a safe learning environment for all our pupils and staff.
Option 2	Take action as set out in this report and its supporting project schedules
Information Considered	<p>What information was considered in making the decision:</p> <ul style="list-style-type: none"> • Condition surveys • Structural reports • Statutory compliance reports • Reported issues by schools • Asset Management and Capital Maintenance strategy • BCC and People's directorate business and service priorities • Available budget - DfE allocation for funding and carry forward
Pros and Cons of Option	<p>What were the advantages / positive aspects of this option?</p> <ul style="list-style-type: none"> • Meeting the councils statutory duty to maintain its schools • Keeping schools open • Reducing health and safety risks and potential injuries • Meeting statutory compliance requirements • Addressing key condition priorities i.e. essential building repair and maintenance • Provides a balanced approach to planned and emergency repairs • Reducing the number of unplanned / emergency repair requirements <p>What are the Disadvantages / negative aspects of this option?</p> <ul style="list-style-type: none"> • None identified
People Consulted	Schools, surveyors and other property professionals / Acivico
Recommendation	Proceed
Principal Reason for Decision	To maximise the impact of the Local Authority in delivering our statutory duty to maintain our schools and provide a safe learning environment for our pupils and staff

3. Summary of Options Appraisal – Price / Quality Matrix					
Ratings from 1 (lowest) – 10 (highest)	Options		Weighting	Weighted Score	
Criteria	1	2		1	2
Total Capital Cost	10	8	25%	250	200
Quality Evaluation Criteria					
1) Programme allows maximum use of school holidays to minimise disruption	1	10	20%	20	200
2) Effectiveness: allows the council to maintain its schools and address the highest priority conditions needs	1	9	25%	25	225
3) Functionality: it meets service delivery and user requirements	1	10	10%	10	100
4) Achievable: compliance with requirement to maintain schools and provide a safe learning environment	1	10	20%	20	200
Total				325	925

4. Option Recommended	<p>Which option, from those listed in the Options Appraisal Records above is recommended and the key reasons for this decision.</p> <p>Option 2 - this will enable the LA to maximise the impact of the School Condition Programme in improving outcomes for young people and through maintaining our schools and provide a safe learning environment for our pupils and staff.</p>
------------------------------	--

5. Capital Costs and Funding	Voyager Code	Financial Year 2023 / 24	Totals
<u>Expenditure:</u>		£m	£m
Planned Priority School Condition Projects (includes PSBP)		12.000	12.000
Unscheduled emergency repairs / school closure prevention		1.000	1.000
Dual Funding		1.000	1.000
Totals		14.000	14.000
<u>Funding:</u>			
Department for Education (DfE) School Condition Allocation		14.000	14.000
TOTAL		14.000	14.000

Revenue Consequences 1.1.1 All revenue costs will be met by schools via the formulaic Dedicated Schools Grant. 1.1.2 In the case of Academy's, any consequential revenue costs arising including additional staffing, utility costs and any on-going day to day repair and maintenance of the asset will be the responsibility of the Academy and funded from the Academy's General Annual Grant (received by the Academy from the EFA).			

6. Project Development Requirements / Information	
Products required to produce Full Business Case	The work includes: <ul style="list-style-type: none"> • Detailed surveys, some of which are intrusive; • Feasibility work in preparing and agreeing schemes with EdI and the school; • Scheme design and specification including where required submitting Planning and Building Regulations applications including payment of their fees; • Detailed design and specification; • Project and programme planning; and • Procurement to a stage where orders can be placed and the work carried out.
Estimated time to complete project development	Up to 6 weeks to obtain target costs for schemes. Approval will be dependent upon value. As the majority of these works are below £200k they will be approved under Head of Service or Chief Officer delegation.
Estimated cost to complete project development	Any Individual project development costs are contained within the overall indicative capital allocations.
Funding of development costs	DfE School Condition Allocation

Appendix 3

PROJECT DEFINITION DOCUMENT (PDD)			
1. General Information			
Directorate	<i>Children & Families</i>	Portfolio/Committee	<i>Education and Early Years</i>
Project Title	Additional Places Programme – Basic Need Allocation 2023-24+ Future Years	Project Code	LV0010 & LV002D
Project Description	<p>Department for Education (DfE) Basic Need (BN) grant and High Need Provision Funding Allocation (HNPA) is awarded to the Local Authority (LA) for the purposes of providing additional mainstream and special school places respectively. These funds are allocated to enable the Council to meet its statutory obligation to provide sufficient school places for our children. The capital projects range from remodelling of existing accommodation, new build extensions to whole new build schools. The “2023-24+ Future Years” programme will address the additional places requirements for September 2020 onwards. The last School Capacity (SCAP) return to the DfE was submitted at the end of July 2022 and is pending signoff. This return provides a clear indication of our requirements for 2022/23 to 2028/29, reflecting the requirement for additional secondary places to meet demand. The secondary place demand was outlined originally in the School Place Planning Requirements 2018/19 to 2024/25 document published in December 2018 (as a result of higher primary cohorts, continued growth and new housing developments. However, since that publication, updated forecasts as a result of changes to planning areas, migration in the region and local housing developments has prioritised target areas for additional places in both the north of the city (Erdington and Sutton Coldfield), as well as South East Birmingham (Hall Green and Selly Oak).</p> <p><u>Additional Primary Places</u></p> <p>The Additional Primary Places programme started in September 2010 in Birmingham. Over 23,200 additional places had been provided to date across primary and secondary schools.</p> <p>Reception numbers are now showing a forecast of decline as a result of falling birth rates and reduced net migration. This means that there may be a significant number of surplus places in some areas of the city in the coming years which will need to be carefully managed.</p> <p>Going forwards the emphasis in primary will be to adjust supply to meet future fluctuations in demand, particularly in light of political changes. The process of removing places declared as ‘surplus to requirement’ will need to take place in some areas. This approach is called “decommissioning”. When deciding whether places are surplus we will need to:</p> <ul style="list-style-type: none"> • Target areas where places are not expected to be required in the future; bearing in mind fluctuating in-year demand (“cohort growth”) and increased housing demands. We may end up decommissioning places in one area and commissioning places in another area of the city. • Determine which schools are undersubscribed and how many places are surplus to requirements. The impact on a school’s future financial viability is considered alongside the quality of provision and the impact of removal of a parental choice. 		

- **Decide** whether places will be decommissioned on a temporary or permanent basis, and how the surplus space will be managed. This could mean the removal of poorer quality assets or reconfiguration of space to provide specialist or SEND (special educational needs or disability) provision.

Approximate Number of Reception places to be decommissioned

No.	2023	Total 2023 - 2024
FE	32.5	32.5
Places	975	975

¹ SCAP 2018 as published in School Place Planning Requirements 2018/19 to 2024/25

Further moderation is ongoing to look at latest updates as a result of changes to school provision, births and migration. We are working in transitional times due to Covid-19 impacting on enrolment, as well as the impact of political changes on migration rates.

Additional Secondary Places

The Additional Secondary Places programme started in September 2014 in Birmingham, although some schools had commenced expansion and new schools had opened prior to then.

Year 7 numbers are now showing a significant forecast increase as the increased primary cohorts move through to the secondary phase. This means that additional places have been required across the city since 2018 and will be until at least 2024. The plan is to increase capacity through bulge classes in the first instance to meet immediate need, and this approach has taken place to secure places for 2019/20, 2020/21 and 2021/22. Further temporary and permanent expansions will be planned to meet need in future years.

Our strategy in Birmingham to meet Basic Need is set out in the School Place Planning Requirements 2018/19 to 2024/25: School Place Planning Requirements (Appendix 4 page 39) document and has 4 key strands:

1. Make optimum use of existing space, buildings and sites to provide sufficient, suitable, high quality additional places where needed.
2. Work with all schools, academies and new schools to meet Basic Need through co-ordinated expansion plans.
3. Allocate annual Basic Need Capital investment effectively and efficiently to areas where basic need requirements can only be met through either re-modelling, refurbishment or new-build projects, ensuring that the needs of our most vulnerable young people are prioritised and capital projects make best use of existing resources.
4. Identify alternative funding sources and models to deliver requirements including S106, school contributions, bidding opportunities, Local Co-ordinated Voluntary Aided Programme (LCVAP), Community Infrastructure Levy, future Basic Need allocations, diversion of other capital funding.

The impact on a school's financial viability is considered alongside the quality of provision and the impact of expansion on parental choice and diversity of provision.

Number of additional Year 7 places required

Year 7	No.	2023	2024	2025	2026	2027	Total
SCAP 2019	FE	8	7	6	3	4	28
	Places	240	210	180	90	120	840

	<p><u>Additional Special School Places</u></p> <p>Since 2015 over 620 additional special educational needs (SEND) places across special schools as well as additional places in both new and expanded resource bases. This coming Summer 2023 will see the first SEND SCAP return to the DfE. Work is ongoing to meet current and forecast demand to meet the needs of our City.</p> <p><u>Commissioning of places</u></p> <p>Identification of schools to expand will be either through an Expression of Interest process where schools come forward to offer additional places or through a targeted approach where LA officers will identify schools in the right locality. In either case the only the schools meeting the following criteria will be considered for expansion:</p> <ol style="list-style-type: none"> 1. Location in relation to Basic Need 2. School leadership and governance – it is expected that schools that expand will be Outstanding or Good and have a strong governance practice in place. 3. The capacity of the school to provide suitable accommodation on the site – this could be within existing space internally or externally and within planning / buildability constraints. 4. Popularity of the school – whilst this is not a driver for expansion it is important that we recognise parental preference. 5. Potential of the expansion to create overprovision or reduce diversity of provision in an area – this would be unwelcomed. <p>It may be necessary to carry out early feasibilities and enabling works, including temporary classrooms, prior to developing a scheme to a Full Business Case approval.</p> <p>Once existing schools have been fully utilised it is likely that the Council will need to establish new schools through the Free School presumption route to meet any gaps in provision for both mainstream and special provision.</p> <p><u>Future Governance and reporting back</u></p> <p>Projects will be subject to approval through the Council's gateway processes, utilising a programme approach where appropriate.</p> <p>A regular update for projects and programme over £20m will be presented to the Capital Board and an annual Cabinet report updating Cabinet on progress on delivery and outcomes as well as to seek approval for future funding.</p>
<p>Links to Corporate and Service Outcomes</p>	<p>Projects have been developed and delivered to maximise alignment with local priorities, in particular to impact on developing skills, employment opportunities, public health and community cohesion. Works will contribute to the Council Business Plan and Budget 2023+, particularly 'A Prosperous City', by ensuring the provision of school places enabling children to benefit from education through investment at a neighbourhood school.</p>

Project Benefits	The benefit of expanding these schools will enable Birmingham City Council to meet its statutory obligation under the Education
-------------------------	---

	Act 1996 to provide special, primary and secondary pupil places to all of its school-age resident children. The consequences of the City Council not meeting this duty are serious and would involve considerable financial and reputational costs. This project will ensure that quality places will be available for local children thus contributing to the safeguarding agenda.										
Project Deliverables	Provision of additional special and secondary pupil places across various districts.										
<table> <tr> <th>Key Project Milestones</th><th>Planned Delivery Dates</th></tr> <tr> <td>PDD approval by Cabinet</td><td>16th May 2023</td></tr> <tr> <td>FBC/Contract Awards approval by Cabinet</td><td>1st June 2023 onwards</td></tr> <tr> <td>Planned programme of works commences</td><td>1st June 2023 onwards</td></tr> <tr> <td>Post Implementation review</td><td>Throughout 2023/24</td></tr> </table>		Key Project Milestones	Planned Delivery Dates	PDD approval by Cabinet	16 th May 2023	FBC/Contract Awards approval by Cabinet	1 st June 2023 onwards	Planned programme of works commences	1 st June 2023 onwards	Post Implementation review	Throughout 2023/24
Key Project Milestones	Planned Delivery Dates										
PDD approval by Cabinet	16 th May 2023										
FBC/Contract Awards approval by Cabinet	1 st June 2023 onwards										
Planned programme of works commences	1 st June 2023 onwards										
Post Implementation review	Throughout 2023/24										

Dependencies on other projects or activities	<ul style="list-style-type: none"> • Planning permission may be required. • If schools have listed status consultation with English Heritage and BCC's Conservation team may be required. • Placing orders with contractor/s from June 2023 onwards • Completion of statutory consultation to increase capacity • Confirmation of appropriate schools across various districts • Scope of work identified
Achievability	<ul style="list-style-type: none"> • Schools in scope for expansion are identified • Programme and costs have been developed where possible • Funding strategy is in place • Client liaison between EdI and Acivico is taking place weekly to ensure work is instructed, monitored and delivered on time • Project officers from the EdI team will oversee the delivery of the projects in consultation with key stakeholders i.e. Acivico, contractors, schools, surveyors and other property professionals. • The team is extremely experienced in managing expansion project

Project Manager	Zahid Mahmood, Capital Programme Manager 0121 464 9855, zahid.mahmood@birmingham.gov.uk
Project Accountant	Jaspal Madahar, Finance & Resources Manager – Education Infrastructure 0121 303 3251, jaspal.madahar@birmingham.gov.uk
Project Sponsor	Jaswinder Didiyally, Head of Education Infrastructure 0121 675 0228, jaswinder.didiyally@birmingham.gov.uk
Proposed Project Board Members	Jaswinder Didiyally, Head of Education Infrastructure 0121 675 0228, jaswinder.didiyally@birmingham.gov.uk Zahid Mahmood, Capital Programme Manager 0121 464 9855, zahid.mahmood@birmingham.gov.uk Clare Sandland, Finance Business Partner C&F 0121 675 3570, clare.sandland@birmingham.gov.uk

Finance Business Partner		Date of FBP Approval	
<i>Other Mandatory Information</i>			
• Has project budget been set up on Voyager?			Yes
• Issues and Risks updated <i>(Please attach a copy to the PDD and on Voyager)</i>			Yes

2. Options Appraisal Records

Option 1	Create additional places in temporary accommodation
Information Considered	<p>What information was considered in making the decision</p> <ul style="list-style-type: none"> • Best use of DfE non ring-fenced Basic Need and School Condition grants in investing in quality spaces • Planning Guidance • Ofsted safeguarding principles • Delivery of quality places
Pros and Cons of Option	<p>What were the advantages/positive aspects of this option?</p> <ul style="list-style-type: none"> • Less cost to BCC • Easier to deliver than permanent build • Faster to deliver • Meets BCC statutory obligation to provide places • Can be removed once demand reduces <p>What are the disadvantages/negative aspects of this option?</p> <ul style="list-style-type: none"> • Safeguarding risks increase as temporary buildings tend to be standalone away from the main building • Governing body/parental resistance to temporary accommodation • Planning approval will not be given for more than 3 years following which units would need to be removed • Isolation from main school • Does not improve the school environment
People Consulted	Head Teachers, School Governors, DfE, Acivico consultants, contractor partners
Recommendation	Proceed or Abandon this Option? <i>Proceed in certain circumstances where provision is required for short period</i>
Principal Reason for Decision	Suitable where short term solution is required.

Option 2	To increase class sizes
Information Considered	<p>What information was considered in making the decision?</p> <ul style="list-style-type: none"> • Class size legislation • Best use of DfE un-ring-fenced Basic Need Funding • Ofsted safeguarding principles • Teacher/HT/Governor associations • Delivery of quality places
Pros and Cons of Option	<p>What were the advantages/positive aspects of this option?</p> <ul style="list-style-type: none"> • Less cost to BCC • Faster to implement <p>What are the disadvantages/negative aspects of this</p>

	<p>option?</p> <ul style="list-style-type: none"> • Does not guarantee to meet BCC statutory obligation for provision of places • Not best use of DfE un-ring-fenced Basic Need • Infant class size legislation requires no more than 30 pupils to be taught by one teacher in Key Stage 1 classes. • Admissions authority would have to employ additional teachers at significant cost. • Safeguarding risks increase • Governing body/parental/Teaching Associations resistance to increased class sizes • Increased Health & Safety issues due to potential overcrowding • Negative impact on standards • Negative impact on applications for places
People Consulted	Head Teachers, School Governors, DfE, Acivico consultants, contractor partners
Recommendation	Proceed or Abandon this Option? <i>Abandon</i>
Principal Reason for Decision	Class size legislation, Trade Union/Professional Association and parental concerns will lead to negative impact on school and reduction in applications

Option 3	To provide permanent new build and remodelled accommodation
Information Considered	<p>What information was considered in making the decision</p> <ul style="list-style-type: none"> • Best use of DfE un-ring-fenced Basic Need funding • Planning Guidance • Ofsted safeguarding principles • Delivery of high quality places
Pros and Cons of Option	<p>What were the advantages/positive aspects of this option?</p> <ul style="list-style-type: none"> • Best use of DfE Basic Need funding • School and community (parental and wider) buy in • Delivers quality places • Will meet timescale using CWM Framework • Complies with safeguarding principles <p>What are the disadvantages/negative aspects of this option?</p> <ul style="list-style-type: none"> • Funding requirement • Possible disruption to school and community while build takes place
People Consulted	Head Teachers, School Governors, DfE, Acivico consultants, contractor partners
Recommendation	Proceed or Abandon this Option? <i>Proceed where provision is required in the long term</i>
Principal Reason for Decision	Best use of DfE Basic Need funding where long term solution is required.

3. Summary of Options Appraisal – Price/Quality Matrix			
Ratings from	Options	Weighting	Weighted Score

1 (lowest) - 10 (highest)							
Criteria	1	2	3		1	2	3
Total Capital Cost	5	10	3	25	125	250	75
Full Year Revenue Consequences	1	5	10	5	5	25	50
Quality Evaluation Criteria							
1) Programme allows occupation by Sep 2022-23	10	10	10	20	200	200	200
2) Effectiveness: allows delivery of quality education	1	3	10	20	20	60	200
3) Functionality : meets service delivery and service user requirements and delivers quality places	1	2	10	20	20	40	200
4) Achievable : will meet statutory responsibility on school places	10	2	10	10	100	20	100
Total				100%	470	595	825

4. Option Recommended	<p>Which option, from those listed in the Options Appraisal Records above, is recommended and the key reasons for this decision.</p> <p>Option 3 to build new and remodel existing accommodation in order to expand existing school sites to meet BCC basic need of additional special, primary and secondary places.</p> <p>Reasons:</p> <ul style="list-style-type: none"> • Best use of Government Grant available • Will allow schools to meet requirements for additional places • Can be delivered within time scales using CWM Framework • Will meet BCC statutory obligations and provide a local place for local children.
------------------------------	---

5. Capital Costs & Funding		Financial Year 2023/24 £m	Financial Year 2024/25 £m	Financial Year 2025/26 £m	Totals £m
<u>Expenditure</u>					
Development Funding to proceed to Full Business Case (BN & HNP)		5.000			5.000
Implementation Cost Basic Need		10.500	16.691	37.166	64.357
Implementation Cost High Needs		5.000	10.000	11.738	26.738
Totals		20.500	26.691	48.904	96.095
<u>Funding</u>					
Basic Need Grant		6.000	9.000	35.355	50.355
Corporate Resources		8.500	5.491		13.991
S106 Funding		1.000	2.200	1.811	5.011
High Needs Provision		5.000	10.000	11.738	26.738
Totals		20.500	26.691	48.904	96.095

6. Project Development Requirements/Information

Products required to produce Full Business Case	<p>The work includes:</p> <ul style="list-style-type: none"> • Selection of school • A range of detailed surveys, many of which are intrusive • Extensive feasibility work in preparing and agreeing schemes with the Client and each school end user • Scheme design and specification by all disciplines to a stage where Planning and Building Regulations applications can be submitted including payment of their fees • Detailed design • Specification, • Project planning
--	--

	<ul style="list-style-type: none"> Procurement to a stage where contracts can be entered into and the scheme built. 		
Estimated time to complete project development	Up to 3 months to complete all programmes to stage D design and obtain target costs for schemes. FBC's will then be provided for final programme.		
Estimated cost to complete project development	Development of proposals to FBC/Contract Award stage by Edl and Acivico are estimated at £5.000m. These costs will be incurred in progressing each scheme to stage D, development of design and cost plan, after which contracts can be entered into and construction can begin.		
Funding of development costs	DfE Basic Need Grant		
Planned FBC date	May 2023 onwards	Planned date for Technical Completion	Throughout 2023/24

Birmingham City Council
Report to Cabinet/Cabinet Committee
16th May 2023



Subject:	Digital Strategy Year One - Update and Review	
Report of:	Dr Peter Bishop, Director, Digital & Customer Services	
Relevant Cabinet Member:	Councillor Jayne Francis, Cabinet Member for Digital Culture, Heritage & Tourism	
Relevant O&S Chair(s):	Councillor Mohammed Akhlaq – Resources	
Report author:	James Gregory – Head of DTS Programmes	
<p>Are specific wards affected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – All wards affected</p> <p>If yes, name(s) of ward(s):</p>		
<p>Is this a key decision? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If relevant, add Forward Plan Reference: 011205/2023</p>		
<p>Is the decision eligible for call-in? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Does the report contain confidential or exempt information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:</p>		

1 Executive Summary

- 1.1 The digital strategy (published March 2022) is about creating a truly digital Council to serve our citizens and businesses better. It sets out how we will take a consistent digital approach across the Council to how we re-imagine, design, deliver and operate our services to achieve greatest value and impact where it is needed most in support of the Council's [Corporate Plan 2022-26](#) which sets out our bold ambitions for a prosperous, inclusive, safe, healthy and green city.
- 1.2 This report sets out the good progress has been made in first year of the delivery of the Council's Digital Strategy 2022-25 across all five themes and the learnings that have come from this.
- 1.3 Year 1 has been about laying the foundations in our drive to offer more and better digital services. We will continue to focus on the things that matter the most and will prioritise /

de-prioritise as required so that we don't just react to demand. Full details of what has been delivered can be found in Appendix A.

- 1.4 Year 2 will be about embedding and enabling the digital approach. We will continue to align to the Council's existing programmes (e.g. Customer Service Programme, Data Programme, Early Intervention & Prevention, Housing, Children and Families Improvement Programme & Digital City, as well as mainstream Council activities to maximise value and impact and embed a user centred design approach). The delivery plan is about embedding the "how" of our digital ways of working and the Council's transformation programme details the "what" in terms of our priorities.

2 Recommendations

That Cabinet:

- 2.1 Acknowledges the progress that has been made in delivery of the digital strategy in its first year along with key results and learnings (Appendix A). This is providing a clear direction of travel to enable digital transformation of the Council's services and systems; it is representative of the journey that we are on to drive continuous improvement, share and learn from others to create a truly digital Council.
- 2.2 Notes the key priorities and focus for Year 2 (Appendix B), which sets out the milestones together with the metrics for measuring performance and success.
- 2.3 Notes the reprofiling of the underspent Capital amounts in Section 9.3 (£1.229m) and continues to provide delegated authority to the Director of Digital and Customer Services to procure services and award contracts as required
- 2.4 Notes that there are a number of technology enablers that are required to support the year 2 delivery plan for the priority themes of: "Give our Council teams the right digital tools to do their jobs" and "Build the best technology to support Council services". This includes for example refresh of devices; case management and collaboration tools including better engagement for offline workers and network / connectivity improvements. This will form the basis of a more detailed business case which will follow in due course to capital board for funding consideration.

3 Background and context

- 3.1 In March 2022 we published the Council's new [Digital Strategy 2022-2025](#). The digital strategy is about creating a truly digital Council to serve our citizens and businesses better. It sets out how we will take a consistent digital approach across the Council to how we re-imagine, design, deliver and operate our services to achieve greatest value and impact where it is needed most in support of the Council's priority outcomes, set out in our [Corporate Plan 2022-26](#) which sets out our bold ambitions for a prosperous, inclusive, safe, healthy and green city.
- 3.2 The Digital Strategy aligns with the key design principles within the Council's Corporate Plan, improving outcomes for citizens whilst reducing cost, designing outcomes to move from crisis to prevention. The Digital strategy delivery plan is about embedding the "how" of our digital ways of working and the Council's transformation programme details the "what" in terms of our priorities.

- 3.3 It is about serving our citizens and businesses better and provides a framework for designing, delivering and enabling more effective services for citizens, businesses and staff by:
- designing services around users
 - being data driven
 - working in multi-disciplinary teams
 - working closely with our partners.
- 3.4 Digital transformation of the Council's services and internal systems that is being driven by the digital strategy, is an imperative. Our policies and services need to be designed and developed from a user centred approach that prioritises simple, clear and transparent interaction and fast results in order to meet current and future needs of our citizens.
- 3.5 Five overarching priorities were identified through extensive research, testing and validation with citizens, businesses and staff and further validation by an external Advisory Board. Together these priorities will:
- A. Create online services that are easy to use
 - B. Improve our data and evidence-based decision making
 - C. Give our Council teams the right digital tools to do their jobs
 - D. Build the Council's digital and data skills
 - E. Build the best technology to support Council services
- 3.6 The strategy was supported by a detailed Delivery Year 1 Plan that set out clear milestones with metrics to prioritise what we do and measure our performance and success. The progress report on our achievement against these priorities for year are detailed in Appendix A and summarised below in Section 4.

4 Progress against our priorities for year 1

- 4.1 Each of the five priority areas of the strategy are focused on delivering outcomes that will bring benefits for the residents, communities and businesses of Birmingham, as well as the Council and its employees.
- 4.2 The actions to deliver against these priorities are reviewed on an on-going basis and continue to evolve based on what we find out from research with citizens, businesses and our council colleagues. We have prioritised the work on areas that will have the most positive impact - either directly or indirectly by helping the Council run and improve.
- 4.3 Year 1 has been about laying the foundations in our drive to offer more and better digital services. We will continue to focus on the things that matter the most and will prioritise / de-prioritise as required so that we don't just react to demand.
- 4.4 The progress against these priority areas, key deliverables and outcomes are summarised briefly below:
- **Creating online services that are easy to use:**
 - Aim of this is to design and deliver online services so good that people prefer to use them when they can. Services will be designed around the user, making them seamless, accessible and easy to use across a range of

devices. All services that can be will be made available online with support through other channels for those that need more help.

- Outcome of this will be an improved customer experience and satisfaction with simplified access to information, advice, guidance and transactional services. A result of success in this area will also be delivering efficiencies and cost savings, though this is not the primary focus of the strategy. The strategy is centred on improving user experience and creating high quality digital services and is informed by, and supports, the customer strategy and Programme principles.
- Key results and progress
 - We recognise that our online service offer is not as good as it could be and that there a lot of basic things that we need to get right to make sure that we improve the user experience. The focus for year 1 has been about making a start on fixing the basics and doing this in an agile user centred design approach.
 - To address this, we are actively improving the content and accessibility on high usage areas on the Council's web site. To date over 900 pages of the council's website have now been reviewed/ updated to ensure they are clear, factually accurate and accessible; improving critical service content on the website. This has included completing improvement plans for waste and bereavement services.
 - A prioritised content improvement roadmap for 50+ services (e.g. waste – missed bin, housing repairs, bereavement services and highways) based on volume of customer interactions, customer satisfaction, contact centre and complaints data has been produced.
 - Following on from this, we have, for example, digitised many of our previously downloadable forms (e.g. bereavement services), which is providing a more joined up and simplified service for customers.
 - Developed our financial Information, Advice and Guidance (IAG) offer working with Early Intervention & Prevention focused on debt advice and help in short term crisis.
 - We have greater understanding of user needs and pain points across high usage services, which has included enhancements to improve end to end journeys for example of housing tenants; landlord's portal and benefits online and both went live with housing repairs portal due to go live April.
 - Automated payment functionality is now live across Highways Licencing, skips licencing and dropped kerbs. This has been done reusing the same platform, as opposed to designing/buying something for each service.
 - We have established a customer panel that is starting to give us a more diverse representation to support in the design of our services and challenge when we get things wrong.

- Key learnings
 - There is still further work to embed a habit for designing services around the needs of users and preventing new digital services from launching that have not been tested with users.
 - There is more learning and development to fully embed agile delivery methods and integrating deeper with council service teams to enable us to make the changes needed and move at pace.
 - We must get better at prioritising demand and working with the service areas to do this more effectively and stopping those activities that don't deliver value.
- **Improving our data and evidence-based decision making:**
 - Aim of this is to make data front and centre, trusted, accessible and fit for purpose. This will enable data sharing between all areas of the Council breaking down silos, speeding up our work leading to more proactive service provision and, with that better outcomes for citizens and businesses.
 - Outcome of this will be joined up Council data that is readily accessible and where decisions are routinely made based on data and evidence. There will be greater transparency in how we work and operate so it is clear to citizens how we have made important decisions.
 - Key results and progress 2022
 - The data infrastructure technical foundations and capabilities are now in place to expand its use and maturity of analysis for 2023, which has been informed through the delivery of several use cases.
 - We are starting to prioritise and bring together data e.g. school absence data, worklessness, housing tenant data, financial exclusion, mental and physical health data in a consistent and useable format onto the data platform at scale. This will enable us to identify those families at greatest risk of escalating problems and provide them with more timely information and support based on their needs. Providing an integrated view of data across service areas to support better insights and decision making is core to our Early Intervention and Prevention (EIP) programme.
 - Established a new insight policy and strategy team that will oversee the organisational and culture change required to improve how we manage and maximise the use of data to inform policy decisions and solve key challenges to deliver better services. We have built the foundations of an approach for both Data Governance and Data Ethics within the Council.
 - A new City Observatory open data platform was launched in November 2022 for publishing and sharing data with citizens to support wider data engagement with citizens and businesses. This has had 5000 unique visitors and over 30,000 views from its launch.

- Key learnings
 - We recognise that there is not enough data on the platform and not of good enough quality to solve the big problems like EIP and Corporate Performance. This will be a priority for 2023 now that we have the data infrastructure in place.
 - We need to make visible channels for discussion of data ethics beyond current information and governance processes. The new insight policy and strategy team are addressing this through the work that they are doing to increase our data maturity, skills and use of insight tools such as dashboards. Data working groups have been established across services so that we start to incorporate data ethical considerations into our decision making process.
- **Giving our Council teams the right digital tools to do their jobs:**
 - Aim of this is to set up staff with the tools, skills, learning and providing prompt responses to their queries so that they can serve their customers in the most efficient and effective way. Staff will have fit for purpose technology which facilitates rather than constrains their work as well as access to cloud collaboration technologies to engage and safely share and store information.
 - Outcome of this will be staff who have the best tools and knowledge available to them so they can focus more less time on admin and more on their customers.
 - Key results and progress 2022
 - Undertaken a review of our intranet to test its fitness for purpose and to learn more about how people use it. We need to define options for improving the experience of the intranet and secure funding to make changes as this is a priority to improve the employee experience of working at the Council.
 - Birmingham Guardian App, a single platform for field workers, went live with housing/rents officers achieving savings of over an hour per day per officer. It has been nominated for a Public Sector Smarter Working Award as well as receiving funding from MHCLG to support its development, which offers the opportunity to scale and be adopted by other local authority teams. Birmingham Guardian will be rolled out to new service areas and we are continuing to expand access to learning, development and knowledge of this digital tool.
 - Greater targeted campaigns on significant topics with colleagues across the Council has helped for example increase cyber security awareness from 53% in 2021 to 64% in 2022.
 - Our IT support to colleagues across the council has been strengthened through the new Digital Hub, providing self-serve access to a greater range of learning and knowledge resources (20,000 plus views of M365 supported learning content). This has significantly supported adoption of Office 365 tools with new guidance, training videos and information. A new 'Digital Kitchen' Yammer group and Digital Bulletin Board is providing alternative

ways for staff to access and share learning and knowledge. We are in working in partnership with Microsoft to increase delivery of ICT essentials learning with over 800 staff attending one or more of the 16 sessions.

- Started to undertake more user research with our service teams (e.g. in City Operations) to understand their pain points and user experience to support their digital skills development as well as through feedback from our annual survey to staff (92% overall satisfaction with IT support).

- Key learnings

- Staff still have trouble adopting new technologies and tools, evidenced through the level of support given through the drop in physical hub. More targeted learning and enablement support is required through our virtual digital hub to ensure better staff experiences.

- **Building the Council's digital and data skills:**

- Aim of this is to grow the digital and data skills of everyone in the Council so that there is a better understanding of the role and impact of digital to transform and deliver excellent services. Our leaders need to know what digital can do for their services and how to get the most from it.

- Outcome of this will be senior leaders, Members, staff and partners confident in their application of appropriate digital approaches and solutions to design and deliver services that are citizen and business focused to support better outcomes.

- Key results and progress 2022

- We have started to lay the foundations for embedding digital age culture and practices across the Council that have included:
 - A digital community of practice (currently 60+ members).
 - "All things digital" public blog to share learnings and knowledge.
 - Digital leadership in person events with our senior leaders
 - Running service design workshops with directorate teams (e.g. Children & Families and Adults).
 - Participation in local government roadshows to share knowledge and learning more widely and explore options to adopt and re-use common platforms and new technologies proven to be successful elsewhere.
 - Digital Playbook (handbook) beta version published that will set out our shared practices and standards towards the delivery of best in class user centred services for citizens. This will ensure a consistent digital approach to how we design and deliver better services and outcomes for citizens

to achieve greatest value and impact where it is needed most based on what the data is telling us.

- Ran specific Cabinet member briefing to show the art of the possible in their portfolios and building their confidence in what can be done when we talk “digital”.
 - We have completed one of the largest IT service transformations in UK local gov sector with investment in new digital roles / capabilities (e.g. user researcher, content designer, product manager, interaction designer) that have not existed previously. These are important to enable us to successfully embed a digital user centred design approach across the Council and drive wider digital transformation.
 - A governance / prioritisation process has been established through a Digital Doorway to manage and respond to the demand for delivery of digital and technology services from directorate areas. This is helping better prioritise what gets delivered and how. It will be further strengthened through a new business partnering approach, whereby digital and technology strategic product leads will work closely with the service teams to help shape roadmaps and strategic opportunities.
- Key learnings
 - Sharing what we are doing and working in the open is supporting greater collaboration and inclusion and enabling us to grow our influence.
 - We need to baseline our starting position with a skills framework of digital capabilities for progression.
 - We need to change how we partner with directorates to design and deliver services. This means shifting from a technology solution focused approach and trust in 3rd party solutions and do more of designing services around users and their needs and how to most easily help them.
- **Building the best technology to support Council services:**
 - Aim of this is to ensure that technology is a key enabler to supporting directorates’ service ambitions and the smooth operations of the council.
 - Outcome of this will be a technology and digital infrastructure that is innovative, responsive, secure and adaptive to meet the changing needs of our citizens and businesses. New products will be delivered quickly and iteratively on in house platforms and emerging technologies will be actively trialled so that the Council can take advantage of the potential benefits and efficiencies these offer.
 - Key results and progress

- Built a detailed technology roadmap with building blocks and governance that is now in delivery.
 - Rapidly improved our security posture in the face of more sophisticated cyber-attacks, especially ransomware which has grown into a lucrative multibillion-dollar global industry. We have established a managed Security Operations Centre (SOC) and Supported Commonwealth Games.
 - Adopted a platform+agile approach to increase reuse, agility and our pace of change delivery. We are moving away from the approach which saw each application and system as a unique, one-off event to one where each application inherits as much as possible of the standard and common functionality of the platforms we have invested in.
 - Established a governance framework with a single Technical Design Authority. In line with the platform+agile approach the TDA considers the cross-organisational impacts of a solution, ensuring that new solutions do not break existing service provision or duplicate functionality without good reason.
 - Enhanced Microsoft 365 licensing to meet planned demand. This enables the replacement of the Council corporate telephony solution, and the implementation of the Cyber Security, New Ways of Working programmes alongside providing improved compliance management.
 - Established ownership and governance of the digital city roadmap through the Digital Birmingham Partnership with progress covering projects on data, net zero, community innovation that has included launch of 5G open access agreement to facilitate wider 5G mobile coverage with 2 host organisations secured.
- Key learnings
- We are not reusing enough of our technology platform investments; this is a hang-up from previous approaches and ways of working based on a service provider rather than a trusted partner model. Working still needs to be done to ensure DTS and business alignment, which leads to business areas providing user requirements rather than specific applications or solutions for implementation.
 - We need to embed multi-disciplinary teams and increase collaboration to create better solutions for the Council, the cyber security programme has been a good example of what is possible when you bring an outcome focused team with different skills and experiences together.
 - We are still struggling under the weight of maintaining our ageing legacy applications that are not fit for purpose. This means the bulk of our resources are used on operational duties such as having to meet and maintain compliance standards, addressing cyber security

issues and managing day to day processes, rather than innovation and business enablement. This also means we may sometimes be unable to leverage new advances in technology.

5 Key Priorities for 2023 (Year 2)

- 5.1 Year 2 will be about embedding and enabling the digital approach. We will continue to align to the Council's existing programmes (e.g. Customer Service Programme, Data Programme, Early Intervention & Prevention, Housing, Children and Families Improvement Programme & Digital City, as well as mainstream Council activities to maximise value and impact and embed a user centred design approach).
- 5.2 Key priorities and some of the areas for focus underpinning them are highlighted in the table below:

Priority Theme	Focus / Outcome
Creating online services that are easy to use	<p>Continue to fix the basics and improve end to end services to ensure they are simple, seamless designed around user needs so that citizens get the help they need first time.</p> <p>Improve & increase channels for customer contact. Harness the power of automation e.g. voice automation to improve services to the customer and reduce administrative burden.</p> <p>Grow the customer panel to strengthen customer input to service improvement.</p> <p>Improve Information, Advice and Guidance as part of Early Intervention Programme through integrated end to end online support that will provide better signposting and enable citizens to access the right help when needed in a timely manner.</p>
Improving our data and evidence-based decision making	<p>Create a data centre of excellence (CoE) that will provide access to quality assured data sets and easy to use tools to enable service teams across the Council to self serve on insights.</p> <p>Comprehensively populate the data platform with key data sets, prioritising this against evolving and complex business needs e.g. Early Intervention programme to enable integrated insights across services providing a single (or relevant) view of customers to more effectively and efficiently meet citizens' needs and serve them better.</p> <p>Continue to share and publish open data through the City Observatory with partners; a citywide co-created data charter will outline a set of principles, which the Council will commit to.</p> <p>Establish communities of practice across the council to develop our capabilities around insight generation and data ethics.</p> <p>Improve corporate published performance data and dashboards so that there is greater transparency about the performance of our main services for citizens and businesses.</p>

<p>Giving council teams the right tools to do their jobs</p>	<p>Focus on robotic process automation (RPA) to automate mundane processes, improve accuracy, increase speed, and save officer time. We have identified 18 service areas that include city housing & support, neighbourhoods and regulation & enforcement, where there is potential to automate a number of processes. This will be confirmed through discoveries in each of the areas and then the processes automated and implemented where those opportunities arise.</p> <p>Improve the experience and means for staff engagement and digital learning, which includes options for development of the current intranet and potential quick wins through use of Microsoft in-built intranet functionality.</p> <p>Understand more about the way staff learn and engage with technology to provide more targeted support where it is needed.</p> <p>Continue uptake and development of the Birmingham Guardian App, a single platform for field workers and expand its use in City Operation and other directorates.</p> <p>Continue stabilisation and adoption of our new cloud based enterprise resource platform (ERP) to become more agile and adaptive in the management of our business processes and operational challenges.</p> <p>Deploy our DIY digital teams to transfer new technical skills to staff in the use of for example power apps that can automate some of our manual paper based processes and help create new applications to speed up and improve how we do things.</p>
<p>Building the Council's digital and data skills</p>	<p>Introduce digital leadership coaching programme & wider BCC digital foundations course that will embed an agile, user centred approach in the Council to how we design and deliver better services that meets the needs of our users focused on achieving practical results quickly.</p> <p>Further development of the digital playbook (handbook) to provide guidance on standards and practices for staff to achieve improved consistency in how we deliver great digital services.</p> <p>Create a sustainable apprenticeship scheme for digital and IT roles working with universities and other partners to establish a pipeline of potential apprentices.</p> <p>Use our new product roles / capabilities in areas of user researcher, content designer, interaction designer, service designer and product manager to expand our collaborative working in multidisciplinary teams across council services to design and run better services that our citizens want to use.</p> <p>Grow our digital and data communities of practice to support staff to share knowledge as well as address some of the challenges around for example data quality.</p>
<p>Building the best technology to</p>	<p>Strengthen digital and technology support to council directorate teams through a business partnering approach. This will facilitate the development of collaborative product and technology roadmaps that are focused on delivering service outcomes, priorities and user</p>

support Council services	<p>needs at pace. Governance and prioritisation of the work will be managed through the new digital doorway so that we can define and deliver value incrementally and drive continuous improvement in our services to citizens.</p> <p>Prioritise and sequence implementation of business enabling technology platforms and leverage use of our existing and future platforms that will enable us to adapt to changing business and user needs and deliver secure solutions at pace e.g. Guardian App, a single platform for our 3000 plus field workers is being expanded and used across many service areas that include housing, social care workers and environmental health. This has been done reusing the same platform as opposed to designing / buying something for each service.</p> <p>Use our strategic business partners, like Microsoft to support continuous learning and grow in house capabilities so that we can take advantage and keep abreast of technology innovations.</p> <p>Improve network and connectivity to avoid disruption to services.</p>
--------------------------	---

5.3

6 Options considered and Recommended Proposal

- 6.1 The option of relying on standalone programmes to deliver the strategy priorities without an overarching delivery plan was considered and discounted. It would leave the Council without a strategic and collaborative focus on its use of digital, data and technology, resulting in the potential for confusion, unnecessary spend on conflicting or duplicating projects and potential reputational damage as a result of failing to meet users' expectations.
- 6.2 The digital strategy delivery plan (year 1 and year 2 priorities) is continuing to focus and provide visibility of the Council's efforts to improve citizens and businesses access to services more easily, introducing new channels, using service and user centred design to change our processes and systems and using data to better understand what people need that will make the Council services and user experiences significantly better as well as more cost effective to run.

7 Consultation

- 7.1 The Cabinet Member for Digital Culture, Heritage and Tourism, Cabinet Member for Finance and Resources, and Chair of Resources Overview & Scrutiny Committee have been formally consulted on the progress of year 1 delivery plan and priorities for year 2.
- 7.2 The Corporate Leadership Team and Directorate Management Teams have been involved in reviewing the progress and shaping priorities of work as part of regular updates.
- 7.3 The [Birmingham 'All things digital' blog](#) has been used share more openly and widely the work on the strategy as well as our other digital endeavours.

8 Risk Management

- 8.1 High level risks are summarised in Table 1 below. The ongoing risks associated with the specific actions detailed in the delivery plan will be managed as part of the associated RAID log updated and reported as part of the linked programmes in flight or if outside of this as part of the digital strategy delivery quarterly review meetings.

Table 1: High level risks

No.	Description	Impact	Mitigation
R04	There is a risk of not achieving buy-in and engagement across the organisation to adopt and enable change effectively.	Medium	<ul style="list-style-type: none">• Council wide commitment from senior leaders ensured• Continued close worked, regular touchpoints and shared deliverables with integrally linked programmes of work (Customer Services Programme, Digital City, Data Phase 3) and with the Council's wider transformation programme.• Embed where possible as part of business as usual activities
R06	No effective mechanism to manage prioritisation of activities meaning everything is a high priority and it is difficult to move forward at pace.	High	<ul style="list-style-type: none">• Digital doorway and governance in place• Clear processes and criteria for prioritisation of work agreed.
R05	No or insufficient funding is made available to support delivery plan for year 2	Medium	<ul style="list-style-type: none">• Leverage existing investment already comitted that are aligned to existing programmes of work or business as usual activity• Align to technology roadmap with business case to request capital funding• Regular monthly meetings held with the Finance Business Partner updating on spend to date and forecast for the programme lifespan.

9 Compliance Issues:

- 9.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?
- The recommended decisions are consistent with the Council's priorities, plans and strategies, supporting the Council's stated mission and commitments to ensure we are a truly customer centric organisation. The activities being prioritised work alongside other programmes of change to maximise the opportunities to embed digital and innovation to support the Council's outcomes, addressing inequalities and striving for continuous improvement that will accelerate our ambition to be the best digital Council.

9.2 Legal Implications

- The Council is under a duty under Section 3 of the Local Government Act 1999 to make arrangements to secure continuous improvement in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.
- The City Council will carry out this work under the General Powers of Competence Section 1 of the Localism Act 2011.

9.3 Financial Implications

- Cabinet approved a significant investment when the original ICT & Digital Strategy was approved in 2016. Through careful budgeting we have managed to meet those commitments and there is an underspend. Some of the strategy commitments are already funded (such as the Customer Programme). In addition, other elements of the strategy are delivered through business as usual work with the Capability & Culture and Governance and Colleague Experience Teams in Digital & Customer Services Directorate and the Insight and City Observatory team in Strategy, Equality and Partnerships Directorate.
- The next phase of the data programme – critical to the success of the Early Intervention and Prevention programme – requires the re-profiling of existing funding. Specifically:
 - £580k from the Digital Strategy budget (funded by Flexible Use of Cap Receipts)
 - £419k will be vired from the Digital Strategy Technology Enablement Programme (funded by Prudential Borrowing)
 - £230K carried forward underspend from phase 2 Data Programme.

This re-profiling was approved by Capital Board on 6th April 2023 subject to Cabinet sign off for the full amount.

- Additional funding will be requested to support delivery of a number of technology enablers of the year 2 delivery plan for the priority themes of: “give our Council teams the right digital tools to do their jobs” and “build the best technology to support Council services”. This includes for example refresh of devices; case management and collaboration tools including better engagement for offline workers and network / connectivity improvements. A business case will follow in due course and be provided to the capital board for funding consideration.

9.4 Procurement Implications

- The procurement for the data programme work will proceed through an existing and compliant framework which was approved by Cabinet on 7th June 2022
- Any other procurement required will be undertaken adhering to Birmingham City Council's policies and procedures.

9.5 Human Resources Implications

- A re-design of the digital & technology division has been completed and is one of the key enablers of delivering the priorities within the delivery plan for year 2. Priority is being given to run a high quality, inclusive recruitment campaign to fill vacant posts as well as work with other partners to support apprenticeships. All new roles will be recruited to in accordance with Birmingham City Council's commitment to mitigate against compulsory

redundancy where possible, any new roles will be prioritised to employees at risk of redundancy.

9.6 Public Sector Equality Duty

- An equalities impact assessment was completed for the Digital Strategy Cabinet report (March 2022) and has been reviewed with no changes. It is attached to this report as Appendix C.

10 Appendices

10.1 These are as follows:

- Appendix A: Delivery Plan progress reports 2022-23
- Appendix B: Delivery Plan 2023-24
- Appendix C: Equalities Impact Assessment (March 2022)
- Appendix D: Environmental Impact Assessment

11 Background Documents

- Report to Cabinet of March 2022: Digital Strategy 2022 – 2025
- Report to Cabinet 18th October 2016 - Birmingham City Council Information & Communications Technology & Digital Strategy (2016 - 2021)
- Report to Cabinet 18th October 2016 - Birmingham City Council Strategic ICT & Digital Investment Programme (2016 - 2021) ICT and Digital Strategy (2016 – 2021)
- Report to Cabinet of 27th June 2017 - Delivery of Savings against Service Birmingham ICT Contract
- Report to Cabinet of 14th November 2017 - Budget savings proposals, ending the Joint Venture (JV) with Capita for Service Birmingham and proposing new contractual arrangements up to 2020 / 2021
- Report to Cabinet of 27th March 2018 - Outcome of final stage negotiations between BCC and Capita - proposed IT and Digital Service Transition Roadmap to 2020/21, with associated investments and benefits (appendix 2 gives a summary of performance against the strategy)
- Report to Cabinet of 16th April 2019 - Capita ICT Service Transition update
- Report to Cabinet of 14th May 2019 - Update on the delivery of the Birmingham City Council Information and Communications Technology and Digital Strategy (2016-2021)
- Report to Cabinet on 21st July 2020 - Update on the delivery of the Birmingham City Council Information and Communications Technology and Digital Strategy (2016-2021)
- Report to Cabinet on 18th May 2021 - Update on the delivery of the Birmingham City Council Information and Communications Technology and Digital Strategy (2016-2021)
- Council Plan – report to full council
- Report to cabinet in October on MS licensing

APPENDIX A
Period Report
DIGITAL STRATEGY DELIVERY PLAN 2022

Dec 2022

Priority A: Creating online services that are easy to use			
Aim: To develop online services based on what our citizens and businesses need			
Priority no.	Priority description	Achievements to date (Jul – Dec 2022)	Next Steps (Jan – Mar 2023)
A1	<p>Priority: Take a citizen centred approach in the delivery of all our digital services; we will not assume that our current solutions are the best and will be open to changing them</p> <p>Action: Establish and embed approach to delivering human centred design making services easy to use and accessible</p> <p>Action: Review of our online digital services and content to ensure they are fully accessible</p>	<p><i>Programme continues to follow an agile delivery approach, adopting a user centred approach to inform service design end2end:</i></p> <ul style="list-style-type: none"> • 2,749 staff attended Customer Standard Workshop Sept-Nov22 'putting customers first every time, all the time'. • Discoveries completed for Housing end2end tenant journey and Child Employment applications • Report submitted for Dec-22 Cabinet for Customer Service Phase 2 • 	<p><i>Continued demonstration of the value and benefits of an agile user centred approach</i></p> <ul style="list-style-type: none"> • Discovery - user research prevention workshop with Adults & Social Care to understand how and where people look for IAG on adult social care
A2	<p>Priority: Make our solutions simple and easy to use, enabling citizens to access Council services on the device of their choice at a time of their choosing</p> <p>Action: Review and create a prioritised list of end to end online services for improvement and start delivery</p>	<p><i>To deliver a best-in-class relationship with customers offering an improved, consistent and cost effective end2end experience when accessing Council services:</i></p> <ul style="list-style-type: none"> • Digitisation of Bereavement forms • Content improvement roadmap for Top50 services • Housing end2end Tenant Journey discovery completed • Child Employment discovery completed (storyboards, personas, empathy maps, 'as is' and 'to be' process maps. • Consolidation of contact routes – tool developed to analyse, score and prioritise services to move into the Contact Centre • Missed bins alpha completed, No-Go decision, dependency on KIT (Crew in cab technology) • Landlord Portal live with a single landlord; 97% landlords onboarded in stage 2 • Highways Advanced payments, solution built and awaiting UAT • Benefits online live • 	<p><i>Continue automation of services where user need identified and delivery of recommended Service improvement opportunities:</i></p> <ul style="list-style-type: none"> • Alpha phase for housing voids • Agree scope for Early Intervention & Prevention IAG • Alpha phase for Child Employment • Housing Repairs portal target go-live Mar23
A3	<p>Priority: Ensure citizens and businesses are kept up to date and actively engaged and supported in the delivery of services</p> <p>Action: Automate progress updates to citizens and businesses once they have placed a request</p> <p>Action: Identify service users that require additional digital support</p>	<p><i>Consistency of approach and engagement regardless of channel e.g., telephony, face2face as well as online:</i></p> <ul style="list-style-type: none"> • Customer Panel reflective of City diverse demographic launched 05-Sept, date of next meeting 19-Dec where the panel will review options explored for Mystery Shopper. • Monthly Show & Tells conducted • Monthly Customer Service updates .gov.uk • Regular Weeknotes published on All Things Digital blog • Continued engagement with Robotic Process Automation programmes. • Alignment to Early Intervention and Prevention • Adults & Social Care Prevention – IAG offer 	<p><i>Continued delivery of Customer Service Strategy commitments during the first year of 'Fixing the Basics':</i></p> <ul style="list-style-type: none"> • Over 2,000 customer responses received via GovDelivery to participate in the design and delivery of services • Customer panel to take an active role in shaping the Mystery Shopper deliverable • Customer Service Programme email inbox established

Priority B: Improving our data and evidence-based decision making Aim: To use and share data and evidence to provide the best possible services for citizens and businesses			
Priority no.	Priority description Key actions	Achievements to date (Jul – Dec 2022)	Next steps (Jan– Mar 2023)
B1	<p>Priority: Leverage the power of the data we have in a secure, ethical way to make evidence-based decisions for the good of Birmingham citizens and businesses</p> <p>Action: Establish the building blocks and technical capabilities, to effectively join up data on Council services and make it readily accessible for decision makers through delivery of use cases</p> <p>Action: Establish the governance to embed data ethics and standards within the organisation</p>	<p><i>Progress has been made in developing the council's data platform that has enabled a number of high profile data use cases. The infrastructure is now in place to expand the use of the platform and maturity of analysis in 2023:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • 5 architecture patterns designed and ready to deploy when the need arises • Ward Profile analysis and presentation delivered to support the local elections in 2022 • EDI use case delivered to support EBEB focus within directorates • Early Intervention and Prevention programme supported with data analysis y based on need 	<p><i>2023 will see the expansion of the data platform as we identify key data sets to cleanse and migrate to the data lake – to support wider democratisation of data across the council and to support the work of the City Observatory:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Data Programme Ph3 will have 2 key areas of focus: <ul style="list-style-type: none"> • Expansion of the data platform to include key data sets, appropriately quality assured • Development of the culture, education and capability around data across the council to ensure we can maximise the use of data to solve key problems.
B2	<p>Priority: Work with partners to share and publish data and build data skills in Birmingham</p> <p>Action: Work with existing external data forums and groups to define and develop approach</p>	<p><i>A new City Observatory was launched in November 2022:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Launch of the City Observatory in November 2022 – a platform for publishing and sharing data with citizens • Renewal of the relationship with BCU to provide expert Data Science capability to augment capability and capacity within the council • Work to develop a data charter for Birmingham. The data charter will outline a set of principles which we are committed to when sharing 	<p><i>The City Observatory provides a platform for BC and partners to publish data and insight:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Need something from Richard/Pye here
B3	<p>Priority: Actively seek input from citizens and businesses and ensure we have the right mechanisms in place to listen and act upon what we are hearing</p> <p>Action: Embed a quantitative and qualitative research approach that is a core part of all digital project delivery</p>	<p><i>New teams have been recruited and they have become operational in the 2022, as a result analytical capability is being strength ended across BCC.</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • The Strategy, Equality and Partnerships Directorate has established an Insight. Policy Strategy team and a Public Participation team. • The public participation team are undertaking work to assess the ways that we currently gather and analyse citizen perspectives. The team area also planning a 	<p><i>The Strategy, Equality and Partnerships Directorate has established an Insight. Policy Strategy team and a Public Participation team:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • The Insight, Policy & Strategy team will increase the scope and scale of work with Directorates to embed insight into decision making in priority areas.

		<p>resident survey in 2023 to gather information to help priority setting and inform service delivery.</p> <p>The Insight, Policy and Strategy team has begun work across BCC to work with Directorates to embed data and insight in decision making.</p> <p>-</p>	<p>- Plans for a resident survey will be developed in early 2023. The survey will be conducted in summer 2023.</p>
B4	<p>Priority: Openly communicate the decisions we have made and the evidence we have based on them</p> <p>Action: Develop approach to communicate as to how we have made important decisions</p>	<p><i>The City Observatory will be used to communicate a 'single version of the truth':</i></p> <p>Key points:</p> <ul style="list-style-type: none"> - The City Observatory provides a range of data and dashboards aligned to key strategies and policies that Birmingham City Council delivers and also those which we deliver in collaboration with our partners 	<p><i>The City Observatory will publish performance and outcome data</i></p> <p>Key points:</p> <ul style="list-style-type: none"> - Between January and March 2023, the City Observatory will develop plans to publish service performance information for Birmingham City Council (linking our service delivery with citizen outcomes where possible).

Priority C: Giving our Council teams the right digital tools to do their job

Aim: To set up our staff with the tools and skills so that they can serve their communities in the most efficient and effective way

Priority no.	Priority description Key Actions	Achievements to date (Jul – Dec 2022)	Next Steps (Jan– Mar 2023)
C1	<p>Priority: Create a self-serve culture where staff are empowered and confident to adopt new technology</p> <p>Action: Automate where possible staff requests such as password resets starting with the highest impact requests</p> <p>Action: Introduce new service desk software and processes to respond more quickly to staff requests with better updates and self-service support</p>	<p><i>IT service support has been strengthened through the Digital Hub facilitating greater access to learning and knowledge resources:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> ITSM toolset replacement under review and further plans will be in place by Q1 2023, therefore no plan changes to ServiceNow. Piloting Digital Hub App on the Teams navigation bar. Redesigned Digital Hub in line with corporate branding and easy navigation to new knowledge store M365 learning resources and bespoke sessions delivered by Microsoft Easier Digital Hub access via ICT Portal home page Working with enterprise architect and applications leads to identify business applications that will integrate with Azure Active Directory to introduce single sign-on. 	<p><i>Further work on enabling self service learning and enhancing telephony services:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Launch of Microsoft Teams Voice providing more scalable, secure and flexible support Enabling effective self-service learning enablement using Oracle Guided Learning functionality – OGL Launch new look Digital Hub - desktop icon, access via Teams, access via ICT Portal, new learning resources Single sign-on implemented and business applications identified/agreed
C2	<p>Priority: Enhance the customer experience by using human centred design to continually improve what we do</p> <p>Action: Engage staff in the delivery of improvement to tools and staff services</p>	<p><i>Greater emphasis on user research, data and information to shape and improve the customer experience:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Annual ITD Survey 732 respondents, 92% overall satisfaction rate (service desk 97%, end user computing 95%, application support 93%). Liaised with User Research lead to develop a set of qualitative questions that will support further engagement and analysis of the customer experience and to identify any additional support required for developing their digital skills to improve their daily working practices (38 respondents requested further discussion). Working collaboratively with directorates to develop training videos on using Oracle and Field Worker app. 	<p><i>Focus on continual improvement to inform and shape service improvement plan:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Annual ITD Survey – interviews to take place to obtain more qualitative data from the 38 respondents Based on quantitative and qualitative survey results a service improvement plan will be put in place and communicated across the council

C3	<p>Priority: Support staff with a range of tools, devices and learning options to enable effective and efficient adoption of new ways of working</p> <p>Action: Provide tailored support and training based on user needs and learning styles that will encourage a self-service culture</p> <p>Action: Explore options and demand for new tools to support better working, collaboration, engagement, prototyping, design etc</p>	<p><i>Increased visibility and accessibility to learning and training resources to adoption of new digital ways of working:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Increase in Cyber security awareness confidence by 11% as reported in the ITD Annual Survey 2022, largely due to the success of the cyber security awareness campaign. (Cyber Security level of awareness – 53% in 2021 and 64% in 2022). • Learning enablement team introduced Digital Kitchen Yammer (90 participants current signed up) – offering a wide range of easy to access Microsoft learning resources to suite different learning styles and needs along with a Digital Bulletin board of Top Tips. https://web.yammer.com/main/org/birminghamcitycouncil.onmicrosoft.com/groups/eyJfdHlwZSI6lkdyb3VwliwiaWQiOiIxMTYwMDQxNzU4NzliQ • In partnership with Microsoft, we are delivering BCC specific training designed around staff feedback on M365 applications they most wanted to learn about: https://birminghamcitycouncil.sharepoint.com/sites/ModernWorkplaceHub/SitePages/Bespoke.aspx • Feedback from staff who attended ICT essentials and learning enablement sessions earlier on in the year helped to prioritise the topics to be covered for future learning. Working in partnership with Microsoft – they delivered at least 50% of sessions to BCC staff, with nearly 800 staff attending one or more of the 16 sessions that have been scheduled and delivered within this period. 	<p><i>Focus is on increasing digital participation and engagement and learning pathways to support more effective and efficient ways of working:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Microsoft Learning Pathway to be reviewed. • Continue to increase cyber security level of awareness. • Aim to increase digital participation.
----	---	--	---

Priority D: Building the Council's digital and data skills Aim: To grow the digital skills of everyone in the Council to deliver services that are citizen and business focused and to support better outcomes			
Priority no.	Priority description Key actions 2022	Achievements to date (Jul – Dec 2022)	Next steps (Jan– Mar 2023)
D1	<p>Priority: Support senior leaders and elected members to build their digital knowledge, confidence and leadership</p> <p>Action: Delivery of a programme of events for senior leaders and elected members to expand digital knowledge and learning</p>	<p><i>Introduced digital age culture & capabilities across BCC through tailored sessions as well as embedding this within IT&D:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Ran digital leadership workshops (Children & Young Families on user centred service design) (Dec) • DMT sessions run with 5 service areas • Hosted local government digital conference (Oct) • Digital playbook (or handbook) beta version published 	<p><i>Focus will be on embedding foundations of digital leadership and service design:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Start Delivery of digital leaders coaching programme • Regular attendance at ECLT - next workshop Jan on user centred service design) • DMT engagement across services • Promotion and content development of Playbook
D2	<p>Priority: Build a strong delivery capability comprised of a core team of digital professionals with a clear career path; assisted by a network of digitally motivated supporters and collaborators</p> <p>Action: Re-design of ITD to bring in key digital roles and upskilling of staff that will underpin the delivery of the Digital Strategy</p>	<p><i>The new targeting operating model and structure for IT&D has been agreed and most staff have been successfully slotted in / assimilated into their new roles. The new model will underpin delivery of Digital Strategy:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Business case signed off October • Final structure published on x November • Consultation closed 6 December • Light touch expressions of interest enabled staff to be slotted into their preferred roles very quickly based on their skillset and current work • 93% staff (14 Dec) slotted in / assimilated into their new roles • Established relationships with training & apprenticeship providers, including those locally 	<p><i>Focus will be on transition and embedding new centres of excellence and developing a framework and approach to support high quality recruitment and retention:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Launch new structure (1st Mar) and creation of centres of excellence • Develop new universal induction framework across IT&D (Jan) • Run inclusivity workshop with extended IT&D management team • Establish a sustainable apprenticeship scheme for digital and IT roles with provider(s) signed up • Create a framework for high quality inclusive and diverse recruitment

D3	<p>Priority: Expand knowledge and support for digital by working hard to solve real business problems in multi-disciplinary teams.</p> <p>Action: Delivery of service design demonstrators cross directorates to validate approach to agile user centred design and practice and accelerate adoption</p> <p>Action: Strengthen relationship between Digital & Customer Services and directorates to support them in their digital development and innovation</p> <p>Action: Co-opt directorate staff into key agile / digital roles for short secondments associated with service delivery activities</p>	<p><i>There is further development of the digital community and sharing of knowledge and learning:</i></p> <p>Key points</p> <ul style="list-style-type: none"> • Further development of the digital community of practice fortnightly meet ups with 60+ members • Workshops with directorates in service design (Children and Families; Adults) 	<p><i>Digital skills training will start to be rolled out supported through ongoing knowledge sharing resources:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Digital foundations course completed by 25% of IT&D staff • Expanding communities of Practice • Roll out DIY Digital
D4	<p>Priority: Openly share what we are doing across the sector, the Council and with citizen</p> <p>Action: Talking, writing and showing what we are doing</p>	<p><i>Open and transparent approach to sharing work, our progress and learning:</i></p> <ul style="list-style-type: none"> • Head of Function (Culture & Capabilities) elected chair of local government digital members organisation • Established public blog sharing 40 posts • CIO (AD IT&D) blog • Show & Tells (all Council staff)- e.g. Fieldworkers; Customer Programme, Data Programme, Digital Strategy • Attendance at conferences • Weeknotes 	<p><i>Continue to raise the profile and benefits of digital through shared learning:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> • Blogging • CoP • Local Gov Digital - BCC lead role to support • Weeknotes

Priority E: Building the best technology to support Council services Aim: To ensure our technology and digital infrastructure is responsive, secure and adaptive to meet the changing needs of our citizens, businesses and staff			
Priority no.	Priority description	Achievements to date	Next steps (Jan - Mar)
E1	<p>Priority: Modernise our existing technology estate so that we get the most out of our technology that is still useful; better manage and decommission our legacy technology to reduce our technical debt; continue to improve our cyber security capability.</p> <p>Action: Review, define and put in place the capabilities, resources, principles and governance required to deliver work along with technology roadmap</p>	<p><i>New platform+ agile approach adopted that will enable the delivery of the right products to better support to our citizens, businesses and staff while minimising spend on legacy technology and support costs:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Platform plus agile approach approved by Cabinet Approved Microsoft 365 E5 (enabling security / teams telephony) Completed successful proof of concept for corporate telephony Engaged partner to support power platform that will improve Starters, Leavers, Movers (SLAM) process Successfully supported the CWG 2022 (resilience and security) 	<p><i>Implementation and iterating delivery of key technical components that will support a more adaptive, responsive and secure service:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Finalise technology roadmap Full implementation of corporate telephony platform Complete initial phase of SLAM process Prepare for implementation of E5 security product
E2	<p>Priority: Invest in our innovation by trialling new technologies; make use of new platforms to deliver new products quickly and adopt a cloud first approach</p> <p>Action: Further delivery commitments will be made against these following completion of Priority E1</p>	<p><i>Good progress made in delivering the city digital roadmap and establish the Birmingham Digital Partnership to provide oversight of programme and respond to emerging city challenges</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Initiated a proof of concept for customer facing low code environment use cases Launch of the 5G open access agreement to facilitate wider 5G mobile coverage Established a digital cities roadmap covering themes which is made up of 25+ projects covering: connectivity; data; net zero; community innovation; urban food systems to accelerate innovation opportunities across the city 	<p><i>Initiating a significant programme of activity that will put in place the underlying infrastructure as well as support trialling of innovation:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Deliver other proof of concept use cases for low code platform Establish IoT city as a platform development with partners Developing a digital twin for the Tyseley Energy Enterprise Park subject to funding Developing an internet exchange Initiate procurement for full fibre delivery capability Creating a data charter to establish data sharing capabilities Automated responses to telephone requests for service (use of bots)
E3	<p>Priority: Continually review and evaluate where we are and where we need to be by building breaks in our schedule to learn from others, communicate and collaborate</p> <p>Action: Further delivery commitments will be made against these following completion of Priority E1</p>	<p><i>We are establishing strategic partnerships to enable us to collaborate, learn from others and validate and test our thinking:</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Established a strategic partnership with Microsoft and running sessions to enhance practices and process Working with the South London Partnership to understand their use of IoT Set up Birmingham Digital Partnership 	<p><i>We will continue to develop our external / strategic partnerships to add value to our technology and smart roadmaps</i></p> <p>Key points:</p> <ul style="list-style-type: none"> Embed strategic partnership with Microsoft Embed a culture of openness and sharing taking leadership across the public sector

APPENDIX A

Quarterly Report

DIGITAL STRATEGY DELIVERY PLAN 2022

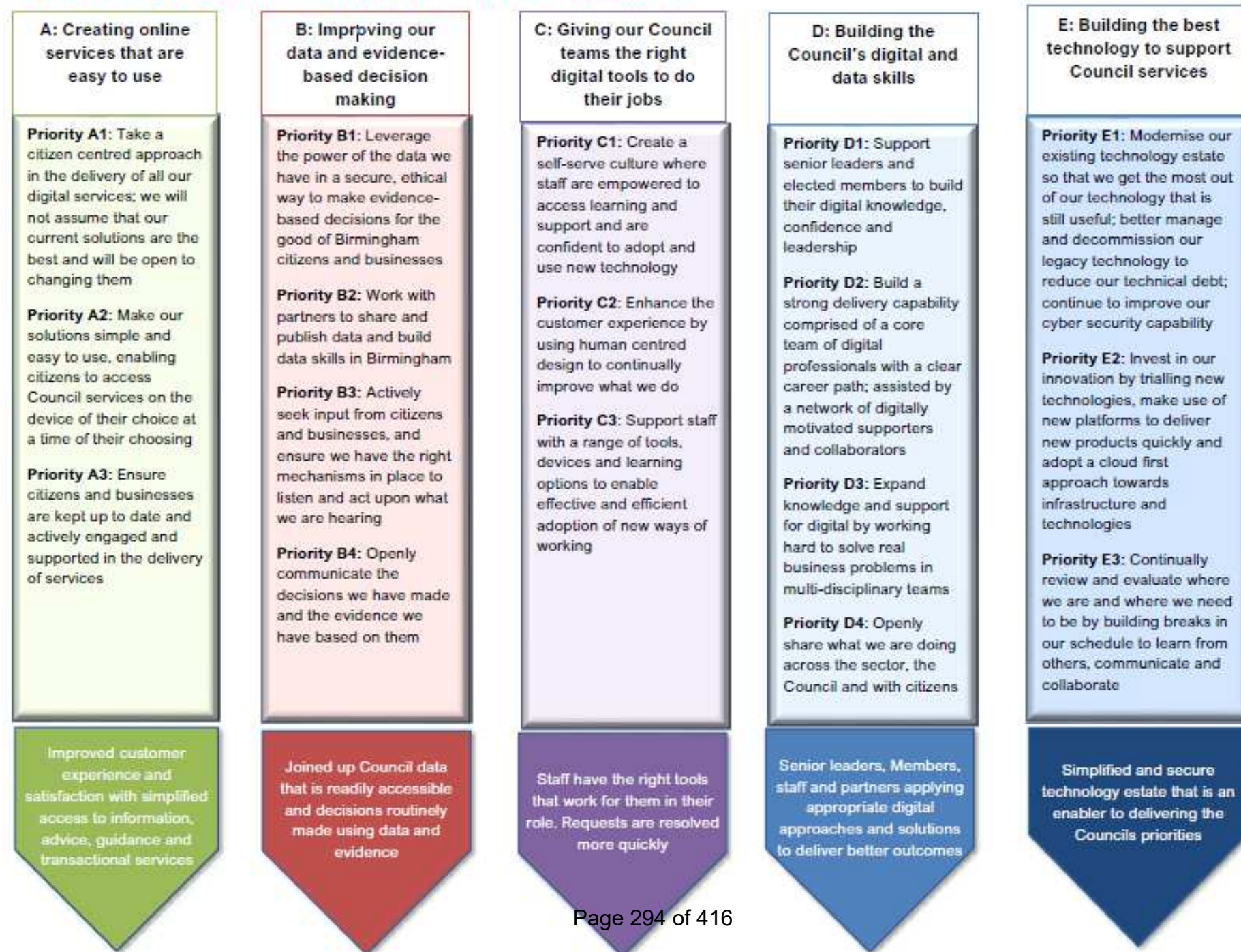
June 2022



BE BOLD BE BIRMINGHAM



Digital Strategy: Overview of key priorities and outcomes



Priority A: Creating online services that are easy to use			
Aim: To develop online services based on what our citizens and businesses need			
Priority no.	Priority description	Achievements to date	Next Steps (Jul – Sept)
A1	Priority: Take a citizen centred approach in the delivery of all our digital services; we will not assume that our current solutions are the best and will be open to changing them	<i>We already have a number of programmes following an agile delivery approach, adopting the principles of human centred design to inform service development and delivery</i> , i.e. research, data, empathy, iteration, and end to end: <ul style="list-style-type: none"> Customer Programme - User Research (UR) conducted informed the development of the Gold Standard Customer Experience. Field Worker – constant UR and in-field testing to ensure the product is fit for purpose Data Programme – User-centred approach to use cases 	<i>We have more activity planned that leads by example:</i> <ul style="list-style-type: none"> User Research Masterclass (05-Jul) Involve IT&D in Housing and EI&P programmes Bereavement Services: To provide clear, accessible guidance (end to end) to help people understand how to lay a loved one to rest in Birmingham Customer Contacts/Channels Contact; Review of Rules/Regs; potential Online booking system; customer satisfaction & survey review Priorities and next steps agreed with Highways
		<i>We are working hard to ensure customers can access the right information at the right time and that content is accurate and up-to-date:</i> <ul style="list-style-type: none"> Web content audits conducted and reviews underway for Waste, Housing, Highways and Bereavement Services Content governance – principles and guidelines drafted Content Strategy proposal drafted 166 pdf forms removed from the website and digitised Accessibility standard 2.1 compliance across .gov.uk 	<i>We will move into actively improving content on high usage web pages:</i> <ul style="list-style-type: none"> Preparation for release of new accessibility standard in September Establish “pair writing” with service content leads and conduct content reviews across Bereavement Services, Waste, Highways and Housing Communicate new strategy guidance and update appropriate channels
A2	Priority: Make our solutions simple and easy to use, enabling citizens to access Council services on the device of their choice at a time of their choosing	<i>We now understand key areas we need to improve:</i> <ul style="list-style-type: none"> Identified top 50 services from existing data (based on volume of customer interactions): Web, customer satisfaction, Contact Centre and Complaints data User research conducted to develop our understanding of user needs and pain points across services prioritised from the Top 50: i.e. Waste (missed bins), Housing Repairs, Bereavement Services and Highways 	<i>We have picked one key service (Housing) to focus further effort on developing user-centred pathways:</i> <ul style="list-style-type: none"> To develop a common understanding of the current end to end journey of a housing tenant To feed in user needs, pain points and user stories to the housing repairs module in Northgate to deliver enhancements to the customer journey for thousands of housing tenants
A3	Priority: Ensure citizens and businesses are kept up to date and actively engaged and supported in the delivery of services	<i>We are successfully encouraging significant customer participation in the design of their services:</i> <ul style="list-style-type: none"> Over 2,000 customer responses received via GovDelivery to participate in the design and delivery of services Customer panel chair appointed - the panel aims to enable customers to take an active role in shaping the services we deliver to make sure we continually meet customer's needs Alignment and engagement with Robotic Process Automation and Field Worker programmes. Alignment and engagement with Early Intervention and Prevention Programme 	<i>Next step is to engage people in real panels and discussions; and to push ahead with some practical ways to communicate better with customers:</i> <ul style="list-style-type: none"> Define Customer panel profile and recruit members and agree Terms of Reference of the panel Waste: To maximise Slab In The Cab opportunities <ul style="list-style-type: none"> To enable proactive digital communication between the waste service and residential customers To explore how we can effectively communicate when bins have been missed, and why

Priority B: Improving our data and evidence-based decision making Aim: To use and share data and evidence to provide the best possible services for citizens and businesses			
Priority no.	Priority description Key actions	Achievements to date	Next steps (Jul – Sept)
B1 and B2	<p>Priority: Leverage the power of the data we have in a secure, ethical way to make evidence-based decisions for the good of Birmingham citizens and businesses</p> <p>Priority: Work with partners to share and publish data and build data skills in Birmingham</p>	<p><i>Our Data Programme has delivered a number of high profile and value-adding data products:</i></p> <ul style="list-style-type: none"> • Homelessness dashboard to give visibility to operations teams • Commonwealth Games – Creation of a new workflow for ingesting / publishing geo data, services and applications • Single view of debt – user research and dashboard design completed to be able to report on debt across the council • Organisational health dashboard for CLT produced to monitor key performance metrics and underpin performance improvement • Design for a Placement Portal for children's placements, based on sharing data between Children's Trust and the West Mids Alliance <p><i>...And CLT have approved the creation of a Research and Ethics Board, chaired by a member of CLT.</i></p>	<p><i>More work on important use cases will happen next qtr:</i></p> <ul style="list-style-type: none"> • Commonwealth Games - Automation of workflow, which will be productised and rolled out to all BCC • Single view of debt: Building dashboards followed by usability testing and then move into production for day to day use • JSNA: interaction design and workshops <p><i>We will be working with City Observatory colleagues to migrate the Data Programme into a collaborative BAU capability</i></p> <p><i>And we will develop the Ethics Governance and Stewardship Board ToR. appoint Board members, develop training, recruit resources to support the Board in the delivery.</i></p>
B3	<p>Priority: Actively seek input from citizens and businesses and ensure we have the right mechanisms in place to listen and act upon what we are hearing</p>	Work not yet started	<p><i>The creation of the City Observatory to include a research capability will start to address this priority</i></p>
B4	<p>Priority: Openly communicate the decisions we have made and the evidence we have based on them</p>	<p><i>We have been running a rolling programme of show and tells to keep BCC employees up to date with the work we are doing and how our data products are being used</i></p> <p>Work not yet started with outside BCC – the dashboard developed to date have been instrumental in raising awareness and providing further information to inform decisions but has not yet led to service re-design</p>	<p><i>The creation of the City Observatory will further this priority</i></p>

Priority C: Giving our Council teams the right digital tools to do their job Aim: To set up our staff with the tools and skills so that they can serve their communities in the most efficient and effective way			
Priority no.	Priority description Key Actions	Achievements to date	Next Steps (Jul - Sept)
C1	Priority: Create a self-serve culture where staff are empowered and confident to adopt new technology	<p><i>We have made some ground in a number of areas from increasing knowledge and adoption of Office 365 tools:</i></p> <ul style="list-style-type: none"> We are actively encouraging the adoption of a self-service culture through the Digital Hub (SharePoint) site, which provides the key central online resource for staff to access guidance, training videos and information on new and existing Office365 tools and functionality, as well as information on the major IT enabled projects and programmes. 	<p><i>We have ambitious plans to build on the gains already made:</i></p> <ul style="list-style-type: none"> The incoming Service Management tool (which will be started later in the year) will incorporate automated processes with the intent of increasing access to self-service support and knowledge. Review of alternate self-serve options outside of ServiceNow that include use of Teams; Chatbots (Sept) Ongoing updates to the self-service content on the Digital Hub (SharePoint site). Assess the volume of requests & password resets to identify opportunities to automate and reduce processing / completion time. Planned enablement of Self Service Password Reset for some passwords
C2	Priority: Enhance the customer experience by using human centred design to continually improve what we do	<p><i>We are taking a more active role in engaging with staff to understand their needs for technology:</i></p> <ul style="list-style-type: none"> Reviewed and established engagement with staff as part of the Modern Workplace Advocates Forum to support the early adoption of M365 platform changes and to align to the New Ways of Working (NWOW) and Workforce Development strategy User research undertaken with City Ops to understand pain points and user journey to support digital skills development 	<p><i>We plan to increase our traction and ability to support our users through gaining even deeper insights into their needs:</i></p> <ul style="list-style-type: none"> Analysis on service desk requests / trend analysis using data & evidence Annual ICT survey - people's confidence on use of technology Working with directorates (City Ops) – collaborative, user-centred approach involving IT&D delivery & engagement leads, training and business change, working with People Services.
C3	Priority: Support staff with a range of tools, devices and learning options to enable effective and efficient adoption of new ways of working	<p><i>We have developed a new smartphone app for field workers as well as a lot of support and guidance for users of our technologies:</i></p> <ul style="list-style-type: none"> Council-wide roll out of How to set up and use Multi Factor Authentication (MFA) Council-wide roll out of a room booking tool - How to use Microsoft Outlook for booking meeting rooms User led prioritised bespoke training: Collaboration with Microsoft delivered by Microsoft's Champions Team (with self-service to recorded learning events) New Members induction – user needs-led, hands on IT&D support, with new kit and collaboration tools New online (self-serve) content on how and when to use collaboration and productivity tools Our in-house built Field Worker app has been developed and will be rolled out to caretakers in the next quarter 	<p><i>The Field Worker Platform will be rolled out to new service areas and we will continue to expand access to learning, development and knowledge of our digital tools:</i></p> <ul style="list-style-type: none"> Ongoing collaboration with HR/OD, to further explore <ul style="list-style-type: none"> Re-launch of advocates; Microsoft Change Agent programme; Digital Eagles model; Microsoft Learning Pathways app New Summer schedule of Office 365 learning sessions and linked to paper-light initiative - Live and recorded learning events Initiative for open Outlook calendars as default for all staff New SharePoint site for Adult Social Care Eclipse users Fieldworker platform with further iterations for additional field worker services

Priority D: Building the Council's digital and data skills Aim: To grow the digital skills of everyone in the Council to deliver services that are citizen and business focused and to support better outcomes			
Priority no.	Priority description Key actions 2022	Achievements to date	Next steps (Jul – Sept)
D1	Priority: Support senior leaders and elected members to build their digital knowledge, confidence and leadership	<p><i>IT&D have already taken a lead in developing knowledge of digital leadership and practices. Much of this is important groundwork, the benefits of which will be felt in the delivery of projects and programmes:</i></p> <ul style="list-style-type: none"> • Introductory ECLT Digital Leadership workshop delivered to strategic leaders (May 2022) • Established ECLT 'Digital Excellence' Teams channel to share resources and learning (May 2022) • Set up Digital Community of Practice (CoP) open to all Council staff (Jan 2022) to share learning and knowledge with fortnightly meet-ups • Digital Playbook design sprint delivered Feb 2022; initial development focused on user research and delivery content 	<p><i>We are planning additional activity to keep digital leadership front of mind:</i></p> <ul style="list-style-type: none"> • User testing of the Digital Playbook planned for June with first release July – will be a key resource for anyone in BCC keen to learn about digital practices • Promote practical use of playbook and feedback; • Further iterations of Playbook content (Sept - Dec 2022) • 1:1 support session for identified 'digital leaders' from ECLT committed to drive this forward within their directorate (July onwards) • Further digital leadership sessions with directorate management teams and with Members July onwards
D2	Priority: Build a strong delivery capability comprised of a core team of digital professionals with a clear career path; assisted by a network of digitally motivated supporters and collaborators	<p><i>IT&D are investing in upskilling existing staff and putting them into roles where they will learn digital techniques and thinking by doing the job. We are, in parallel, developing an operating model that will put digital to the fore:</i></p> <ul style="list-style-type: none"> • Shaping the Future target operating model completed (May 2022) • Phase 1 consultation completed (May 2022) Lead roles filled (Sept 2022) • Delivery of key projects such as the Data Programme, Customer Programme and Field Worker are providing learning opportunities for staff within and outside IT&D • Digital recruitment campaign initiated (June 2022) for new agile roles 	<p><i>Our re-structure will take shape. We will embed the role of Head of Culture and Capability who will help us to progress digital practices and skills in and outside of IT&D:</i></p> <ul style="list-style-type: none"> • Complete Phase 1 recruitment for senior leadership roles June 2022 • Complete Phase 2 consultation for all staff Sept 2022 • More people will be assigned to digital projects to get experience, and the level of external support will reduce as we grow our own capability
D3	Priority: Expand knowledge and support for digital by working hard to solve real business problems in multi-disciplinary teams.	<p><i>We are demonstrating the power of digital by doing it in a number of our projects and programmes; and in how we organise ourselves in IT&D:</i></p> <ul style="list-style-type: none"> • Agreed ways of working for agile delivery starting with Digital & Customer Services (January ongoing) • Service design demonstrators delivered as part of the Customer programme against priorities A1, A2, A3 (Feb 2022) • Roles; responsibilities and function for business engagement defined as part of the Shaping the Future redesign to strengthen directorate engagement (Apr 2022) • Agile delivery of Customer, Fieldworker and Data programmes with Product Owner role assigned from business with multi-disciplinary sprint teams (Feb 2022) 	<p><i>We will continue delivery of our flagship digital projects, as well as introducing more:</i></p> <ul style="list-style-type: none"> • Continue agile delivery of the Customer Programme, Field Worker and Data programme • Completion of the Phase 2 redesign with new business engagement roles in place (Sept 2022) • Work with Housing and EI&P programmes to establish digital thinking and working
D4	Priority: Openly share what we are doing across the sector, the Council and with citizens	<p><i>In 2022 we have started shouting about what we do!</i></p> <ul style="list-style-type: none"> • Regular week notes; show and tells • 'All things digital' Birmingham blog to share updates on digital activities (March 2022) 	<p><i>We will continue to do this by encouraging all our projects to work openly:</i></p> <ul style="list-style-type: none"> • Continue show and tells; weeknotes and blog posts

Priority E: Building the best technology to support Council services Aim: To ensure our technology and digital infrastructure is responsive, secure and adaptive to meet the changing needs of our citizens, businesses and staff			
Priority no.	Priority description	Achievements to date	Next steps (Jul – Sept)
E1	Priority: Modernise our existing technology estate so that we get the most out of our technology that is still useful; better manage and decommission our legacy technology to reduce our technical debt; continue to improve our cyber security capability.	<p><i>We have made a start in rationalising our technology estate, with a statement of intent to move towards a 'Platform' approach with building blocks or 'patterns' that can be re-used for many purposes:</i></p> <ul style="list-style-type: none"> Target operating model for technology defined as part of the Shaping the Future to identify resources and capabilities required Focus on putting in place the right platforms and as part of work on rationalisation and consolidation <ul style="list-style-type: none"> Requirements gathered for internal low code platform Proof of Concept for SLAM process on Power Apps Soft Market Test issued to market for low code external facing apps Introduction of immutable back up technologies to improve cybersecurity Exit of legacy capita data centres completed (March 2022) Migration of council web site to hosted provision, which increases council security and scalability 	<p><i>We are at the start of this journey – the next several months will shape further activity:</i></p> <ul style="list-style-type: none"> Continue work on building technology roadmap Corporate and contact centre telephony soft market tests to inform decision on more integrated platform for internal and external customers Refresh of point of presence network sites to support NWoW programme Undertake low code Proof of Concept on SLAM process Complete soft market test for low code external facing apps Business value analysis with briefing paper and recommendations based on E3 (current) vs E5 Microsoft 365 license with added business intelligence & security features
E2	Priority: Invest in our innovation by trialling new technologies; make use of new platforms to deliver new products quickly and adopt a cloud first approach	<p><i>It is early days in our rationalisation of the estate and delivery of innovation but we have already made some progress:</i></p> <ul style="list-style-type: none"> Secured a high street data model to get insights in high street usage and footfall and understand impact of interventions (Digital City) 	<p><i>There are lots of initiatives upcoming that will give us an opportunity to demonstrate progress in the coming months:</i></p> <ul style="list-style-type: none"> Obtain spend and footfall city centre data to understand impact of interventions Explore use of digital twin platforms for city modelling (TEED and East Birmingham) – ongoing Birmingham Digital partnership board established to oversee delivery of digital city programme Continuing introduction and building on existing low code platforms to be more reactive for internal and external customers
E3	Priority: Continually review and evaluate where we are and where we need to be by building breaks in our schedule to learn from others, communicate and collaborate	Work not yet started	Yet to be defined

Title of proposed EIA *	<div>Digital Strategy 2022-2025</div> <div>Please provide the title of your policy or service area.</div>
Reference No	<div>EQUA839</div> <div>Please do not amend. A reference number will automatically be applied once the form is saved.</div>
EA is in support of *	<div>New Strategy</div>
Review Frequency *	<div>No preference</div> <div>Please select how regularly you plan to review the assessment.</div>
Date of first review *	<div>31/10/2022</div> <div>Based on the review frequency, please enter the date when your first review will take place.</div>
Directorate *	<div>Digital and Customer Services</div>
Division	<div>ITD</div>
Service Area	<div></div> <div>Please add if applicable</div>
Responsible Officer(s) *	<div>Nicola Bryant</div> <div>This is the person responsible for completing, submitting and reviewing the assessment. If you get the message 'The user does not exist or is not unique'. Please enter the full email address.</div>
Quality Control Officer(s) *	<div>James E Gregory</div> <div>This is the person responsible for checking the quality of the assessment. If you get the message 'The user does not exist or is not unique'. Please enter their full email address.</div>
Accountable Officer(s) *	<div>Peter Bishop</div> <div>This is the person responsible for making the final decision on the EIA and the policy, plan, procedure etc. If you get the message 'The user does not exist or is not unique'. Please enter their full email address.</div>
Purpose of proposal *	<div>Refresh of the ICT and Digital Strategy 2016-2021. The new digital s</div>
Data sources	<div><div><div><input checked="" type="checkbox"/> Survey(s)</div><div><input checked="" type="checkbox"/> Consultation Results</div><div><input checked="" type="checkbox"/> Interviews</div><div><input checked="" type="checkbox"/> relevant reports/strategies</div><div><input type="checkbox"/> Statistical Database (please specify)</div><div><input checked="" type="checkbox"/> relevant research</div><div><input type="checkbox"/> Other (please specify)</div></div><div>What sources of data have been used to produce the screening of this policy/proposal? (Please tick all that apply)</div></div>
Please include any other sources of data	<div></div>
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	<div></div>
Protected characteristic: Age *	<div><div><div><input type="checkbox"/> Service Users / Stakeholders</div><div><input type="checkbox"/> Employees</div><div><input type="checkbox"/> Wider Community</div><div><input checked="" type="checkbox"/> Not Applicable</div></div><div>Please select those directly impacted or affected.</div></div>
Age details:	<div></div>

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristic: Disability *

- ☒ Service Users / Stakeholders
- ☒ Employees
- ☒ Wider Community
- ☐ Not Applicable

Please select those directly impacted or affected.

Disability details:

The emphasis is on making sure that services are desinged around the user to ensure that they are seamless, accessible and easy to use. All services that can be will be made available online with support through other channels for those that need more help. This will have a positive impact for citizens, businesses, employees and wider communities.The outcome of this will be an improved customer experience and satisfaction with simplified access to information, advice, guidance and transactional services. It directly supports the Customer Service programme.

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristic: Sex *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Gender details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Gender Reassignment *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Gender reassignment details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Marriage and Civil Partnership *

- ☐ Service Users/ Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Marriage and civil partnership details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated.

Protected characteristics: Pregnancy and Maternity *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Pregnancy and maternity details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Race *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Race details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Religion or Beliefs *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Religion or beliefs details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Sexual Orientation *

- ☐ Service Users / Stakeholders
- ☐ Employees
- ☐ Wider Community
- ☒ Not Applicable

Please select those directly impacted or affected.

Sexual orientation details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Socio-economic impacts

The strategy is about creating a truly digital Council to service our citizens and businesses better. It sets out how the Council will take a consistent digital approach across the Council to how we re-imagine, design, deliver and operate our services to achieve greatest value and impact where it is needed most in support of the Council's priority outcomes, addressing inequalities and striving for continuous improvement. The priority areas of the strategy are focused on delivering outcomes that will bring benefits for the residents, communities and businesses of Birmingham as well as the Council and its employees. Success in implementation of the strategy and digital transformation of the Council will acheive efficiencies and savings as well as improving user experience and creating high quality digital services. Adoption of the strategy is helping our citizens and businesses access services more easily, introducing new channels, using service and user centred design to change our processes and systems and using data to better understmd what people need that will make the Council services significantly better as well as more cost effective to run

Please indicate any actions arising from completing this screening exercise.

Please indicate whether a full impact assessment is recommended

NO ▾

If yes, please continue to complete the remaining questions. If no, please go to the quality control section below.

What data has been collected to facilitate the assessment of this policy/proposal?

What are the main findings from the analysis of the data?

Consultation analysis

Who was consulted, what are the results of the consultation exercise?

Adverse impact on any people with protected characteristics.

Based on the analysis of the data does the policy/proposal have any adverse impact?

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

Can the policy/proposal be modified to reduce or eliminate any adverse impact? on any particular group(s)?

How will the effect(s) of this policy/proposal on equality be monitored?

What data is required in the future?

Please describe the data needed to ensure effective monitoring of this policy/proposal?

Are there any adverse impacts on any particular group(s)

☐

If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal

Please give details on any initial assessment carried out. For a full assessment please complete the rest of the form. AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX.

Consulted People or Groups

AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX

Informed People or Groups

AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX

Summary and evidence of findings from your EIA *

Not required

Please add any documents including any consultation or engagement findings. Attach any source data using the attachment button above. Please include how you will mitigate against any negative impacts.

QUALITY CONTORL SECTION

Submit to the Quality Control Officer for reviewing?

☐

Please tick this box and 'Save' the document once you have finished. Your nominated Quality Control Officer will by notified to review the assessment and decide whether it can proceed for approval or reject it.

Quality Control Officer comments

Approved for quality

Please untick 'Submit to quality control officer box' before saving.

Decision by Quality Control Officer

Proceed for final approval

IMPORTANT: Quality Control Officer - Please untick the above box 'Submit to the Quality Control Officer for reviewing?' before provide your decision.

Submit draft to Accountable Officer?

☒

Quality Control Officers only - Please tick the box when you are happy for the assessment to be submitted for approval.

Decision by Accountable Officer

Approve

IMPORTANT: Accountable Officer - Please untick the above box 'Submit draft to Accountable Officer' before providing your final decision.

Date approved / rejected by the Accountable Officer

23/02/2022



Reasons for approval or rejection

Approved for Cabinet

Please print and save a PDF copy for your records

☒

Version: 51.0

Created at 21/01/2022 04:49 PM by Nicola Bryant

Last modified at 23/02/2022 10:47 AM by Workflow on behalf of Nicola Bryant

Save

Cancel

Environment and Sustainability Assessment

Birmingham City Council is required to assess any positive or negative impacts that any policy/strategy/ decision/development proposal is likely to have on the environment. This assessment must be completed for CLT and Cabinet reports where appropriate. It is the responsibility of the Service Director signing off the report to ensure that the assessment is complete.

To complete the assessment, you should consider whether the proposal will have a positive or a negative impact on each of the key themes by placing a (√) for positive, (x) for negative and (?) for unclear impact, and (N/A) for non-applicable impact. Further guidance on the completion of the template is available on page 3 below.

Project Title:	Digital Strategy 2022-2025 and Delivery Plan 2023			
Directorate:	Team: Digital & Customer Services		Person Responsible for assessment: Nicola Bryant	
Date of assessment:	Is it a new or existing proposal? New			
Brief description of the proposal: The strategy provides a framework and sets of key priorities and delivery for how we create a truly digital Council to serve our citizens and businesses better. It sets out how we will take a consistent digital approach across the Council to how we re-imagine, design, deliver and operate our services to achieve greatest value and impact where it is needed most in support of the Council's priority outcomes, addressing inequalities and striving for continuous improvement that will accelerate our ambition to be the best digital Council.				
Potential impacts of the policy/development/ decision on:	Positive Impact	Negative Impact	No Specific Impact	What will the impact be? If the impact is negative, how can it be mitigated, what action will be taken?
Natural Resources - including water, soil, air	√			A positive impact on the environment through a reduction in the use of paper and associated services like postage through the shift to more effective, easy to use and seamless online digital services for citizens, business and staff
Energy use and CO ₂ emissions	√			Joined up sharing of data and access to this across the

				<p>council will support better evidence-based decisions by managers that will include aspects of environmental impact. The technology roadmap and the platform agile + approach is taking into account requirements to simplify our technology estate, reduce carbon footprint and help make the council more sustainable. The re-use of technology platforms instead of procuring new systems is reducing reliance on costly proprietary solutions</p> <p>It supports more agile working providing for example technology platforms that will enable field based staff to work more effectively and efficiently and helping to reduce admin time and unnecessary travel into the office to access systems. Robotic automation of manual processes is reducing burden on staff time and improving operational efficiency</p>
Quality of environment			N/A	<p>No direct impact. However, the strategy is grounded in taking a user centred approach to the design and operation of all Council services making sure that the customer is at the heart of what we do and is focused on delivering the Council priorities to achieve better outcomes as set out in the corporate plan - the digital strategy builds on that plan</p>
Impact on local green and open spaces and biodiversity			N/A	<p>No direct impact. However, the strategy is grounded in taking a user centred approach to the design and operation of all Council services making sure that the customer is at the heart of what we do. It is focused on delivering the Council priorities to achieve better outcomes as set out in the corporate plan - the digital strategy builds on that plan</p>
Use of sustainable products and equipment	√			<p>We will make use of cloud collaboration technologies to collaborate, safely share and store information to support more efficient and effective working anytime, anywhere. Where possible platforms and systems will be re-used rather than duplicate systems created / procured.</p>
Minimising waste	√			<p>Online services for staff, citizens and businesses will be</p>

				designed to be easy to use, seamless end to end minimising waste of resources and staff admin time to resolve issues
Council plan priority: a city that takes a leading role in tackling climate change	√			It is focused on delivering the Council priorities to achieve better outcomes as set out in the Council's Corporate Plan 2022-26 and the digital strategy builds on that plan. We will actively explore test and trial new emerging technologies to take advantage of potential benefits and efficiencies these offer to the delivery of services and in respect of helping to meet our climate change commitments
Overall conclusion on the environmental and sustainability impacts of the proposal	<p>The digital strategy and delivery plan impact positively with regards the environment and sustainability. The priorities centre on taking a user centred focus in delivery of services for citizens, businesses and staff, being data driven and working collaboratively to make services seamless, accessible and available online. This will deliver efficiencies and savings as we adopt more agile ways of working, create joined up end to end services that minimise waste and re-use platforms and systems where possible. The technology estate will be simplified, and the new roadmap and technology investment will favour those technologies that support our climate change commitments. The digital strategy works alongside other programmes of change such as Early Intervention and Prevention; Customer programme and Data Programme Phase 3 to make sure that we maximise all the opportunities at our disposal to contribute to meeting the Council's priorities as set out in the Council's Corporate Plan 2022-26.</p>			

Guidance for completing the template

Theme	Example
Natural Resources - Impact on natural resources including water, soil, air.	<p>Does the decision increase water use?</p> <p>Does the decision have an impact on air quality?</p> <p>Does the decision discourage the use of the most polluting vehicles (private and public) and promote sustainable modes of transport or working from home to reduce air pollution?</p> <p>Does the decision impact on soil?</p> <p>For example, development will typically use water for carrying out various operations and, once complete, water will be needed to service the development. Providing water to development and treating affluent water requires energy and contributes to climate change. Some of the activities including construction or disposal of waste may lead to soil pollution. The decisions may lead to more journeys thereby deteriorating air quality and thus contribution to climate change and greenhouse gases.</p>
Energy use and CO ₂ emissions.	<p>Will the decision have an impact on energy use?</p> <p>Will the decision impact on carbon emissions?</p> <p>Most day-to-day activities use energy. The main environmental impact of producing and using energy such as electricity, gas, and fuel (unless it is from a renewable source) is the emission of carbon dioxide.</p>
Quality of environment.	<p>Does the decision impact on the overall quality of the built environment?</p> <p>Decisions may have an impact on the overall setting, character and distinctiveness in the area. For example, if development involves ground digging and excavations etc. it may have an impact on the local archaeology.</p>
Impact on local green and open spaces and biodiversity	<p>The proposal may lead to localised impacts on the local green and open spaces which may have an impact on local biodiversity, trees and other vegetation in the area.</p> <p>Will the proposal lead to loss (or creation) of green and blue infrastructure?</p> <p>For example, selling an open space may reduce access to open space within an area and lead to a loss of biodiversity. However, creating a new open space would have positive effects.</p>
Use of environmentally sustainable products, equipment and packaging'	<p>Will the decision present opportunities to incorporate the use of environmentally sustainable products (such as compostable bags, paper straws etc.), recycled materials (i.e. Forest Stewardship Council (FSC) Timber/wood), non-polluting vehicles, avoid the use of single use plastics and packaging.</p>
Minimising waste	<p>Will the decision minimise waste creation and the maximise recycling during the construction and operation</p>

	<p>of the development/programme/project?</p> <p>Will the decision provide opportunities to improve recycling?</p> <p>For example, if the proposal involves the demolition of a building or a structure, could some of the construction materials be reused in the new development or recycled back into the construction industry for use on another project?</p>
Council plan priority: a city that takes a leading role in tackling climate change and deliver Route to Zero.	How does the proposal or decision contribute to tackling and showing leadership in tackling climate change and deliver Route to Zero aspirations?

If you require further assistance with completing this template, please contact: ESAGuidance@birmingham.gov.uk

Birmingham City Council

Report to Cabinet

16th May 2023



Subject: Single Homelessness Accommodation Programme Bids

Report of: Paul Langford, Interim Strategic Director, City Housing

Relevant Cabinet Member: Councillor Sharon Thompson, Cabinet Member for Housing & Homelessness
Councillor Mariam Khan, Cabinet Member for Health and Social Care
Councillor Yvonne Mosquito, Cabinet Member for Finance and Resources

Relevant O &S Chair(s): Councillor Mohammed Idrees, Housing and Neighbourhoods
Councillor Mick Brown, Health and Social Care
Councillor Akhlaq Ahmed, Resources

Report author: Tim Gray, tim.gray@birmingham.gov.uk
07533 347316

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011214/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, provide exempt information paragraph number or reason if confidential :		

1 Executive Summary

- 1.1 This report requests that Cabinet approves a submission for grant funding to the government's Single Homelessness Accommodation Programme (SHAP) fund for capital and revenue funding. This is to support two bids.
- 1.2 The first SHAP bid is for the acquisition and adaptation of 15 self-contained 1-bed properties to be let to people with life limiting conditions and experience of sleeping rough, who are ready to move to settled, self-contained accommodation but cannot do so because of the lack of suitably adapted properties.
- 1.3 Properties would be let within the Housing Revenue Account (HRA) at social rents and would be ringfenced for the target client group.
- 1.4 Properties would be acquired and adapted with a combination of Council HRA capital funding and capital grant from Homes England.
- 1.5 The acquisition and adaptation of the 15 properties would require capital investment of around £1.5m from the HRA, depending on the final cost and the level of grant. This route offers the best financial, legal, operational and tax option.
- 1.6 Properties would be purchased using the acquisitions mechanism established through the Council's existing Property Acquisitions Programme, which is currently buying properties for homeless families, including buying back suitable former Council properties sold under the Right to Buy (RTB) scheme.
- 1.7 The 15 properties would be owned by Birmingham City Council, would be added to the existing Council owned stock and would be maintained and managed through the HRA.
- 1.8 In addition to the social care support required due to physical disabilities, part of this SHAP bid will be for three year revenue funding to provide intensive 'Housing First' style support to enable the target client group to live independently.
- 1.9 The second SHAP bid is for revenue only funding to continue the Council's existing Housing First programme for people at risk of sleeping rough.
- 1.10 The Council already commissions a successful Housing First programme within for adults with experience of sleeping rough who do not need specially adapted accommodation flats.
- 1.11 The funding for this programme is coming to an end in 2025 and the service is therefore expected to reduce the number of clients being supported and not to take on any new clients.
- 1.12 A bid for three-year SHAP funding, if successful, gives an opportunity to continue the programme during 2025 to 2028.
- 1.13 New clients coming on to the Housing First programme as a result of this funding would be allocated Council accommodation through direct lets due to exceptional needs.

2 Recommendations

That Cabinet:

- 2.1 Agrees to bid for, accept and use capital funding of up to £1.2m from SHAP to support the acquisition and adaptation of 15, 1-bed properties, prioritising properties available under RTB buy back arrangements in order to provide independent self-contained accommodation for former rough sleepers with disabilities.
- 2.2 Delegates authority to the Interim Strategic Director for City Housing (or their delegate) in conjunction with the Strategic Director of Place, Prosperity and Sustainability (or their delegate), and the Chief Finance Officer (or their delegate) to negotiate the acquisition of up to 15 properties for social housing use where it makes financial sense.
- 2.3 Agrees to bid for, accept and use revenue funding of up to £600k from the Department for Levelling Up, Housing and Communities (DLUHC) to provide 'Housing First' type support to the people accommodated within the properties so acquired.
- 2.4 Agrees to hold these 15 properties within the Housing Revenue Account (HRA) and let them as settled, general needs Council owned accommodation.
- 2.5 Agrees to ringfence the properties for letting to people with complex needs and experience of homelessness.
- 2.6 Authorises the Interim Strategic Director for City Housing (or their delegate) to enter into grant agreements with DLUHC and Homes England committing the Council to purchase, adapt and use the properties as set out above, in accordance with Homes England and DLUHC grant conditions under the SHAP funding programme.
- 2.7 Authorises capital investment from the HRA to make up the difference between the full costs of purchasing, renovating and adapting properties to meet the physical requirements of the target client group tenants and the SHAP grant available. This route offers the best financial, legal, operational and tax option.
- 2.8 Authorises the Strategic Director of Adult Social Care (or their delegate) to commission 'Housing First' type support for the target client group tenants of this accommodation from one of the Council's existing framework providers.
- 2.9 Agrees to bid for, accept and use revenue funding of up to £2.3m from DLUHC to provide 'Housing First' type support to extend the Council's existing Housing First programme.
- 2.10 Authorises the Interim Strategic Director of Adult Social Care (or their delegate) to use any revenue funds granted by DLUHC as a result of this bid to continue providing Housing First type services to those currently in the programme, and to extend the service to new individuals who are rough sleeping or at risk of rough sleeping.

- 2.11 Authorises the City Solicitor to negotiate, execute and complete all necessary documentation to give effect to the above recommendations.

3 Background

- 3.1 The Government launched the SHAP funding programme in November 2022. SHAP is intended to provide both capital funding and three year revenue funding to selected local authorities to fill gaps in accommodation and support provision for people with experience of street homelessness.

SHAP Eligibility Criteria

- 3.2 There are two eligible client groups for SHAP funding:
- a) those with the longest histories of rough sleeping or the most complex needs (including those known to Councils as the Target Priority Group), to help them recover from rough sleeping and its associated traumas;
 - b) vulnerable young people (age 18-25) who are experiencing or are at risk of homelessness or rough sleeping.
- 3.3 Birmingham has been assessed by DLUHC as eligible for funding for group a), but not for group b). However, we understand from DLUHC that 18 to 25 years olds with higher support needs and a history of rough sleeping can be assisted within group a).

Current Provision and Gap Analysis

- 3.4 In line with the SHAP requirements, the Council, in consultation with partners within the Homelessness Partnership Board and other stakeholders, as well as in discussion with DLUHC, has recently conducted a Strategic Gap Analysis to establish the gaps in provision for adults in group a).
- 3.5 This has resulted in the identification of a number of priority areas, where SHAP bids might be made. Two of the identified areas can be summarised as follows:
- Gap A.** Adapted self-contained 1-bed flats for former rough sleepers needing wheelchair accessible accommodation or with other physical needs which cannot be met in standard accommodation.
- Gap B.** Additional revenue only funding to continue support for adults being supported through the Council's existing Housing First Programme and for a further 30 to 50 Housing First properties which can be made available from existing, non-adapted, 1-bed council stock.

Approach to Gap A.

- 3.6 It is proposed that the best approach to delivering accommodation to address Gap A. is for the Council to acquire and adapt 15, 1-bed homes, prioritising former Council owned properties which had previously been sold through Right to Buy.
- 3.7 The need identified for adapted 1-bed accommodation for former rough sleepers with a disability arises as a result of a small number of people with serious disabilities, including bariatric conditions and wheelchair use, who have been street homeless, and for whom suitable independent accommodation is not available.
- 3.8 Typically individuals would have been discharged from hospital into specialist hostel accommodation with shared facilities which is not suitable for them for more than a short stay, but is the only accommodation available.
- 3.9 The process of identifying a suitable move on property where their social care needs can be met and the issues which led to the sleeping rough can be addressed is extremely difficult, due to the lack of suitably adapted properties, and the unavailability of Housing First type support.
- 3.10 Identifying a Council property and adapting it specifically for the individual can take many months through the current Disabled Facilities Grant (DFG) process, during which time the property would be sitting empty. This renders such moves impractical, and individuals are typically unable to move on for around 2 years after being assessed as ready to do so.

Approach to Gap B.

- 3.11 The Council already commissions a successful Housing First programme within its own housing stock for adults with experience of sleeping rough who do not need accessible flats.
- 3.12 There are currently 98 clients being supported by this service, which provides support through 16 navigators. However, the number of navigators is due to reduce to 11 over time as a result of no further funding available.
- 3.13 In terms of funding, the Council has so far been awarded the following amounts of grant to provide a Housing First service
- 2022-23: £326,194
 - 2023-24: £774,532
 - 2024-25: £495,000
- 3.14 As funding is not available after 2024/25, the service is expected to reduce the number of clients being supported in line with the caseloads of remaining navigators, and not to take on any new clients as they will not now be able to receive the comprehensive and ongoing support they need.

- 3.15 A bid for three year SHAP funding, if successful, gives an opportunity to continue the programme during 2025 to 2028 and to keep the number of navigators at 16.

4 Options considered and Recommended Proposals

Proposed Option for Gap A.

- 4.1 There is an identified need for a pool of adapted self-contained properties available to this group to enable them to move into a more settled home, increasing their independence.
- 4.2 The proposed option is to use SHAP funding to help purchase suitable 1-bed properties for this purpose, prioritising suitable ex RTB properties which come up for sale. The Council has first refusal to purchase these properties under the current RTB regulations.
- 4.3 Properties would be renovated to a good standard and adapted to be suitable for individuals using wheelchairs (considering bariatric citizen need).
- 4.4 They would be allocated as move on accommodation for former rough sleepers needing this type of accommodation and let at social rents within the HRA.
- 4.5 Social Care support would be provided using current Council funding to provide care for those who are eligible as defined in The Care Act.
- 4.6 In addition, Housing First type support would be commissioned through the Council's current provider framework using SHAP funding for the first three years.
- 4.7 If a tenant moved on or became too ill to live independently, the properties would be let to another former rough sleeper in similar circumstances.

Alternative option

- 4.8 The main alternative considered would be to work with a housing association to buy and adapt properties for sale on the open market. This option is not recommended as we are unaware of any potential provider interested in bidding to offer this service, who meets the requirement of being a Homes England Investment Partner
- 4.9 The preferred option is for the Council to purchase properties to be added to the existing Council owned stock and would be maintained and managed through the HRA. This would provide the Council with a long term asset
- 4.10 There are advantages in buying back former Council properties for this purpose, rather than street properties dispersed throughout Birmingham. The Council is currently receiving notification of circa four 1-bed buy back properties per month.
- 4.11 The Council would be able to use part of its HRA capital budget to buy properties for this purpose.

Recommended Process

- 4.12 It is proposed that the properties would be purchased using the Council's successful, existing Property Acquisitions Programme acquisition mechanism, which is buying family sized properties to be let as temporary accommodation for homeless families.
- 4.13 However, this programme would be distinct as the funding to buy and adapt properties, not covered by the SHAP grant, would come from the HRA budget, and the properties would be let as general needs Council housing.

Available Grant Funding

- 4.14 It is estimated, based on the experience of the Council's current property acquisition programme and the Council's experience of the cost of adaptations for similar client groups, that the total cost of buying and adapting 15, 1-bed properties would be up to approximately £2.7m
- 4.15 On this basis, based on discussions with Homes England about the potential grant available would bid for approximately £1.2m of Capital Funding through the Homes England online IMS bidding platform.
- 4.16 If successful, this would lead to a need for up to an estimated £1.5m to be contributed from the HRA, although the amount could be more or less.
- 4.17 The SHAP funding would be paid to BCC on a property-by-property basis in the following way:
- a) 50% on legal completion
 - b) 45% at point of void repairs being undertaken
 - c) 5% at point of letting
- 4.18 SHAP funding is conditional on property purchases completing by the end of March 2025 at the latest and having a minimum lifespan of 30 years.
- 4.19 SHAP revenue support funding from DLUHC will be bid for three years at up to £200k per year on the basis of fifteen properties. This is based on commissioning three officers working with service users on an intensive 1 to 5 caseload ratio, and one team manager.

Proposed Option for Gap B.

- 4.20 The proposed option for Gap B. is to bid for up to £2.3m to support 120 Housing First clients for three years.
- 4.21 This will allow the Council to continue to support 88 clients projected to be in the service already in Housing First tenancies, who would otherwise be left without appropriate and comprehensive support despite having that need.

- 4.22 It will also allow capacity to take on up to 32 additional clients on to the Housing First programme until 2028. The proposal is that £2.3m would fund 16 FTE Navigators and 1 FTE Team Leader for the service for 3 years.
- 4.23 If the bid is successful then there would be no need for a Council contribution to be able to continue the Housing First programme at a level which meets projected levels of need.
- 4.24 If the bid is not successful, or only partially successful, the Council would need to look elsewhere for potential funding beyond 2025 or would need to reduce the size of the programme and if necessary bring it to an end.

5 Consultation

- 5.1 Consultation has taken place internally and with the Council's external partners who work with the target client groups. They have confirmed the acute unmet need for the small number of people who meet the criteria described above for Gap A. and the larger number of people who meet the Gap B. criteria.
- 5.2 Consultation has also taken place with officers at DLUHC and Homes England, who have expressed an interest in supporting proposals of this kind from the Council. However, this can in no way be interpreted as a guarantee of funding, as all SHAP bids are assessed on their merits by a panel.
- 5.3 The next SHAP assessment of bids following Cabinet in May will take place in June. The intention would be to submit a bid to Homes England and DLUHC for consideration in June.

6 Risk Management

- 6.1 The main risks of implementing the recommendations of this report are as follows:

Risk	Impact	Likelihood	Mitigation
SHAP grant is not approved by DLUHC and Homes England	High	Medium	<ul style="list-style-type: none"> Close consultation with DLUHC and Homes England in advance of bid submission The Council will be no worse off than if it had not bid
SHAP grant is agreed at a lower level than bid for	Medium	Medium	<ul style="list-style-type: none"> Close consultation with DLUHC and Homes England in advance of bid submission This report delegates authority to the Strategic director of City Housing to determine if value for money would be achieved by going ahead at a lower grant rate

Suitable RTB properties do not come onto the market	High	Low	<ul style="list-style-type: none"> There is a need to buy 15 properties by March 2025. This is a small percentage of the 1-bed properties becoming available.
There are not enough service users meeting the need for the adapted properties, either now or within the next 30 years	Medium	Low	<ul style="list-style-type: none"> The council is aware of a number of people needing the properties now, who do meet the criteria Turnover of properties once let is likely to be infrequent
Adaptation works are subject to long delays	High	Medium	<ul style="list-style-type: none"> The property acquisitions scheme has agreed with the Council's HRM contractors an arrangement to undertake remedial works/adaptations, which will ensure that adaptations can be done as part of the initial purchase and renovations process Properties would be adapted outside the DFG process to a generic specification initially, with funding for individual bespoke adaptations not funded by SHAP coming from the acquisitions budget
SHAP revenue support funding for Housing First ends after 3 years	Medium	Certain	<ul style="list-style-type: none"> The council will need to find revenue support funding for the tenants of these properties who still need support from elsewhere or if necessary from its own resources Support for these client groups would be needed anyway. This scheme allows that support to be provided in a better setting for the individual

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

7.1.1 The provision of the proposed accommodation and support will contribute to the following priorities in the Birmingham City Council Corporate Plan 2022 to 2026:

- Priority 5. Tackle poverty and inequality

- Priority 10. Protect and safeguard vulnerable citizens
- Priority 11. Increase affordable, safe, green housing
- Priority 12. Tackle homelessness
- Priority 13. Tackle health inequalities
- Priority 15. Champion mental health
- Priority 16. Improve outcomes for adults with disabilities and older people

7.2 Legal Implications

- 7.2.1 Section 8 of the Housing Act 1985 places a duty on the Council to consider housing conditions in their district and the needs of the district with regard to the provision of further housing accommodation.
- 7.2.2 Under Section 9 of that Act the Council have the power to provide housing accommodation by acquiring houses and may alter, enlarge, repair, or improve a house so acquired and it may fit out, furnish and provide with all requisite furniture, fittings and conveniences a house provided by them. For these purposes housing accommodation includes flats and “house” is to be construed accordingly.
- 7.2.3 Sections 32 to 34 of the Housing Act 1985 contain the Council’s powers of disposal of land, with the consent of the Secretary of State, of land held for the purposes of the provision of housing accommodation under that Act. The General Housing Consents 2013 (issued March 2013 and corrected July 2013) set out the circumstances where such disposals can take place without the need for specific consent from the Secretary of State.
- 7.2.4 Part VI and Part VII of the Housing Act 1996 contains the Council’s duties relating to homelessness and threatened homelessness.
- 7.2.5 Section 166A(6(b) of the Housing Act 1996 enables housing authorities to allocate particular accommodation to people of a particular description, whether or not they fall within the reasonable preference categories, provided that overall the authority is able to demonstrate compliance with the requirements of s166A(3). This is the statutory basis for so-called ‘local lettings policies’ which may be used to achieve a wide variety of housing management and policy objectives.

7.3 Financial Implications

- 7.3.1 The first SHAP bid, to support the acquisition and adaptation of 15, 1-bed properties, includes both a capital and revenue element.
- 7.3.2 The capital cost for the 15 properties is expected to be up to approximately £2.7m. This will be financed from the SHAP funding of up to £1.2m together with additional capital investment of around £1.5m from the Council’s existing HRA budget in 2023/24 and 2024/25.

- 7.3.3 All 15 properties acquired will be added to the existing Council owned stock and be maintained and managed through the existing HRA budget.
- 7.3.3 The first SHAP bid also includes a revenue element of up to £0.6m over three years up to 2028. This would cover the cost of commissioning three officers to work with service users and one team manager. At the end of the three years, the revenue SHAP funding will end and the Council will need to decide how to fund any ongoing support.
- 7.3.4 The second bid is for SHAP revenue support funding from DLUHC to continue the Council's existing Housing First programme. This is revenue only and is to provide continued support for 120 clients (the projected 88 clients already in Housing First tenancies, plus up to 32 additional clients). The existing Housing First funding ends in 2025 so this would allow the scheme to expand and continue up to 2028. The proposed bid is for up to £2.3m over three years and would provide 16 FTE Navigators and 1 FTE Team Leader.
- 7.3.5 In summary, the impact on the Council's budgets is as follows:
- The Council's capital contribution for the first bid will come from the existing HRA capital budget;
 - The Council will manage the additional stock of 15 properties from the existing HRA budget;
 - The SHAP revenue funding will, for both bids, cover costs for three years, after which the Council will need to determine what, if any, ongoing support is required and how that would be funded.

7.4 Procurement Implications

- 7.4.1 Procurement implications arising as a result of this report to utilise existing arrangements for acquisition, support and maintenance will be covered under separate reports and will comply with the Council's Procurement, Contract and Governance Rules.

7.5 Human Resources Implications (if required)

None

7.6 Public Sector Equality Duty

- 7.6.1 An Equalities Impact Assessment is included at Appendix 1.

8 Environment Sustainability Assessment

- 8.1 An Environmental Sustainability Assessment is included at Appendix 2.

9 Background Documents

List of appendices accompanying this report:

Appendix 1. Equalities Impact Assessment

Appendix 2. Environmental Sustainability Assessment

Title of proposed EIA	Single Homelessness Accommodation Programme bid for disability accessible 1-bed accommodation for people with experience of rough sleeping
Reference No	EQUA1094
EA is in support of	New Service
Review Frequency	Annually
Date of first review	07/03/2024
Directorate	City Housing
Division	Housing Solutions and Support
Service Area	Rough Sleeping
Responsible Officer(s)	<input type="checkbox"/> Tim Gray
Quality Control Officer(s)	<input type="checkbox"/> Kieran Cronin
Accountable Officer(s)	<input type="checkbox"/> Stephen Philpott
Purpose of proposal	To obtain Cabinet approval to bid for SHAP scheme funding to purchase and adapt properties to provide 1-bed self contained accommodation for former rough sleepers with disabilities
Data sources	Consultation Results; relevant reports/strategies
Please include any other sources of data	
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Not Applicable
Age details:	
Protected characteristic: Disability	Service Users / Stakeholders
Disability details:	<p>This programme will provide accessible self contained accommodation with Housing First type support for former rough sleepers with disabilities, including those needing wheelcahir accessible accommodation and those with bariatric conditions.</p> <p>A proportion of services users will also have mental health issues and /or substance misuse issues.</p> <p>The accommodation will enable move on from temporary hostel accommodation.</p>
Protected characteristic: Sex	Not Applicable

Gender details:

Protected characteristics: Gender Reassignment Not Applicable

Gender reassignment details:

Protected characteristics: Marriage and Civil Partnership Not Applicable

Marriage and civil partnership details:

Protected characteristics: Pregnancy and Maternity Not Applicable

Pregnancy and maternity details:

Protected characteristics: Race Not Applicable

Race details:

Protected characteristics: Religion or Beliefs Not Applicable

Religion or beliefs details:

Protected characteristics: Sexual Orientation Not Applicable

Sexual orientation details:

Socio-economic impacts
Impacts will be positive as it will allow service users to live more independently in their own settled accommodation, but with continuing social care and housing first support.

Please indicate any actions arising from completing this screening exercise.

Please indicate whether a full impact assessment is recommended NO

What data has been collected to facilitate the assessment of this policy/proposal? Data from the council's Adult Social Care and Homelessness Services

Consultation analysis

There is an identified gap in provision for this client group, who are often prevented from move on for around 2 years due to lack of adapted self contained accommodation to move on to.

Adverse impact on any people with protected characteristics. No Adverse impacts identified

Could the policy/proposal be modified to reduce or eliminate any adverse impact? N/A

How will the effect(s) of this policy/proposal on equality be monitored? Number of moves of service users with disabilities into adapted self contained accommodation

Waiting times for move on

What data is required in the future? As above

Are there any adverse impacts on any particular group(s)	No
If yes, please explain your reasons for going ahead.	
Initial equality impact assessment of your proposal	Clear positive impact for former rough sleepers needing adapted accommodation. No negative impacts on any group
Consulted People or Groups	
Informed People or Groups	
Summary and evidence of findings from your EIA	Clear positive impact for former rough sleepers needing adapted accommodation. No negative impacts on any group
QUALITY CONTORL SECTION	
Submit to the Quality Control Officer for reviewing?	No
Quality Control Officer comments	Reviewed and approved, typo corrected
Decision by Quality Control Officer	Proceed for final approval
Submit draft to Accountable Officer?	Yes
Decision by Accountable Officer	Approve
Date approved / rejected by the Accountable Officer	02/03/2023
Reasons for approval or rejection	
Please print and save a PDF copy for your records	Yes

Content Type: Item

Version: 20.0

Created at 02/03/2023 12:50 PM by ☐ Tim GrayLast modified at 02/03/2023 03:32 PM by Workflow on behalf of ☐ Stephen Philpott

Close

Environment and Sustainability Assessment

Project Title: Single Homelessness Accommodation Programme (SHAP) bid for disability accessible 1-bed accommodation for people with experience of rough sleeping				
Department: City Housing	Team: Housing Solutions			Person Responsible for assessment: Tim Gray
Date of assessment: 2/3/2023		Is it a new or existing proposal? New, but relates to existing homelessness property acquisition scheme		
Brief description of the proposal: Application for Homes England Capital Grant and DLUHC revenue grant to subsidise acquisition of and adaptation of 15 1-bed properties to accommodate former rough sleepers with serious disabilities including wheelchair use and bariatric conditions				
Potential impacts of the policy/development decision/procedure/ on:	Positive Impact	Negative Impact	No Specific Impact	What will the impact be? If the impact is negative, how can it be mitigated, what action will be taken?
Natural Resources- Impact on natural resources including water, soil, air			x	
Energy use and CO ₂ emissions	x			Some acquired properties will have works done to improve energy efficiency prior to letting. All properties will be brought up to at least an EPC C rating. Works to achieve this may include replacement of single glazed windows with double glazed, replacement UPVC windows, replacement of old boilers with ASHP or AAA boilers, replacement of radiators, roof repairs.
Impact on local green and open spaces and biodiversity			x	
Use of sustainable products and equipment			x	
Minimising waste			x	

Council plan priority: a city that takes a leading role in tackling climate change			x	
Overall conclusion on the environmental and sustainability impacts of the proposal	The proposal involves purchase and, if necessary, renovation and repair of existing properties, as well as adaptation to make them wheelchair accessible. Properties will be let as settled accommodation within the Housing Revenue Account. Environmental impact will either be neutral or positive where the energy efficiency of properties is improved.			

If you require assistance in completing this assessment, then please contact: ESAGuidance@birmingham.gov.uk

Birmingham City Council

Report to Cabinet

16 May 2023



Subject: City Region Sustainable Transport Settlement Programme Governance

Report of: Strategic Director of Place, Prosperity & Sustainability

Relevant Cabinet Member: Councillor Liz Clements –Transport
Councillor Yvonne Mosquito – Finance and Resources

Relevant O & S Chair(s): Councillor Chaman Lal – Sustainability and Transport
Councillor Akhlaq Ahmed – Resources

Report author: Phillip Edwards, Assistant Director – Transport and Connectivity
Tel: 07557 203167 Email: philip.edwards@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011137/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

1 Executive Summary

- 1.1 The climate emergency is setting the pace of fundamental change needed to the way people and goods move around our city. The Birmingham Transport Plan sets out the principles for unlocking the potential of transport in achieving our net zero carbon goal. The projects within the City Region Sustainable Transport Settlement (CRSTS) programme play a significant role in achieving this goal.
- 1.2 CRSTS funding was allocated to the West Midlands Combined Authority (WMCA), with part of the agreement with the Department for Transport (DfT) and HM Treasury that the WMCA's single assurance framework would be utilised to ensure that projects comply with necessary governance requirements.

- 1.3 In addition to the WMCA single assurance framework approvals, the Council's own governance processes still apply. All schemes to be delivered by the Council are named within the Transportation & Highways Capital Programme 2023/24 to 2028/29 approved at Cabinet on 21 March 2023 and therefore benefit from the programme's delegations, however the delegation is capped at £10m per scheme. As most schemes are over this £10m threshold, they would be required to go separately to Cabinet.
- 1.4 This report seeks to approve the governance approach for the development and delivery of the CRSTS schemes in Birmingham, to meet the programme deadline of March 2027.

2 Recommendations

- 2.1 Approve the approach to take the outline business case for each named City Region Sustainable Transport Settlement (CRSTS) scheme with a total project value over £10m (as set out in section 1.3 of this report).
- 2.2 Approve the approach that Cabinet approval of named CRSTS schemes outline business case will include delegation of the subsequent full business case to the relevant Cabinet Members in consultation with the Strategic Director of Place, Prosperity & Sustainability, the Strategic Director of Council Management, the Interim Director of Finance and the City Solicitor.
- 2.3 Approve the approach that at the point of seeking Cabinet approval for a CRSTS scheme's outline business case and full business case funding will be subject to confirmation from the West Midlands Combined Authority.
- 2.4 To note the approach to utilise West Midlands Combined Authority single assurance framework outline business case and full business case documents as appendices to each CRSTS scheme's outline business case and full business cases approval reports as set out in section 3.11 and 3.12 of this report.
- 2.5 Approve the delegation of submission of each named CRSTS scheme's strategic outline case to the West Midlands Combined Authority single assurance framework process to the Assistant Director, Transport & Connectivity in consultation with the Cabinet Member for Transport.
- 2.6 Authorises the City Solicitor & Monitoring Officer to negotiate, execute and complete any necessary legal documentation to give effect to the above recommendations.

3 Background

- 3.1 As part of Central Government's November 2020 Spending Review, it was announced that there was to be a change to how local transport funding is allocated. Over £2.5bn was confirmed for eight city regions across England from 2022-23, as part of the government's commitment of £4.2bn for a five-year, consolidated intracity transport settlements.

- 3.2 In July 2021, WMCA and other Mayoral Combined Authorities received guidance from the DfT pertaining to the CRSTS. Previously badged as the Intracity Transport Settlement, the fund is a five-year capital settlement to enable the region to achieve the Government's ambitions in terms of transport investment, Carbon reduction, economic growth and levelling up.
- 3.3 Following the WMCA Board meeting in September 2021, WMCA submitted an ambitious, over-programmed bid to HM Treasury for consideration which totalled £1.73bn. The Financial Monitoring Report to the November 2021 WMCA Board included an update on the settlement and confirmed the headline allocation awarded to WMCA was £1.050bn. DfT subsequently issued further guidance and advised that the allocation was 'indicative'; to be firmed up as part of the review and acceptance of a final programme level business case.
- 3.4 On 14 January 2022 the WMCA Board agreed to the submission of the CRSTS programme level business case to the government. The WMCA Board then, on 18 March 2022, delegated authority to the WMCA Section 151 Officer to accept the CRSTS Settlement subject to it being in line with the original programme level business case agreed by the WMCA Board. Confirmation of the finalised settlement was provided to WMCA by the DfT on 29 July 2022.
- 3.5 The CRSTS fund will be operated through and be fully compliant with the WMCA single assurance framework. This is in order to ensure compliance with the CRSTS funding objectives and to provide additional assurance to the DfT and HM Treasury over the ability to make the right interventions at the delivery pace required over the five-year programme.
- 3.6 The WMCA single assurance framework process follows a standard project lifecycle approach, requiring schemes to submit a strategic outline case, outline business case and full business case before funding for scheme implementation can be awarded.
- 3.7 Depending on the level of funding sought via the WMCA single assurance framework one of two governance routes are applicable. For funding requests of over £5m, projects need to be presented to the Investment Panel, Investment Board and finally, WMCA Board.
- 3.8 The WMCA single assurance framework process requires the scheme promoter to have sought necessary internal approvals before the outline business case or full business case is submitted. It is proposed to seek Cabinet approval for a CRSTS scheme's outline business case and full business case subject to confirmation of funding from the WMCA. This would allow a scheme's outline business case and full business case to be submitted to the WMCA single assurance framework process with the Council's approval.
- 3.9 It is also proposed that schemes append the WMCA single assurance framework outline business case or full business case documents as appendices to the Council's outline business case and full business case approval documents. Information provided to the WMCA single assurance framework for outline

business case or full business case approval is compliant with HM Treasury Green Book and is comparable to the Council's outline business case or full business case processes. Utilising the WMCA single assurance framework documents would reduce time and resource otherwise needed to transpose and edit information between templates. A covering Executive Report will still be produced in accordance with the City Council's standard formats.

- 3.10 Whilst it is proposed that a named CRSTS scheme's outline business case is reported to Cabinet, with delegation of the approval of each CRSTS scheme's full business case to the relevant Cabinet Member in consultation with the Strategic Director of Place, Prosperity & Sustainability, and the Strategic Director of Council Management, it should be noted that this process is at the discretion of the Cabinet Member for Transport in consultation with the Cabinet Member for Finance & Resources. They may decide that a particular CRSTS scheme's full business case will need to be approved via Cabinet for reasons such as level of impact.

CRSTS schemes to be delivered by Birmingham City Council

- 3.11 The following table details the CRSTS schemes to be delivered by the Council with a short description.

Scheme Name	Scheme Description
East Birmingham to Solihull Corridor – Bordesley Green Area Connectivity	Enhancements in the East Birmingham to Solihull (EBS) Corridor - first/last mile walking and cycling improvements.
Active Travel - A45 Coventry Road Cycle Route	The provision of a segregated cycle way along the A45 towards the Airport.
Sutton Gateway	A package of transport infrastructure enhancements to support Sutton Coldfield Town Centre.
Snow Hill Growth Strategy <i>(N.B. this project is part of the Our Future City Plan Transport Infrastructure Strategy)</i>	Development only project to full business case stage seeking to make improvements to the Snow Hill area of the city centre (including the usage of the ring road). Project would support expansion of development areas for residential and employment sites aligned to Our Future City Plan aspirations and objectives of the Birmingham Transport Plan.
A38 Selly Oak to Longbridge Cycle Route	Completion of the Selly Oak to Longbridge section of the high-quality A38 segregated cycle route.
City Centre Active Travel Connections to Interchange	Improved walking and cycling routes across Birmingham City Centre connecting public transport interchanges with key destinations.

One Station and Smallbrook Queensway <i>(N.B. this project is part of the overall HS2 Readiness programme)</i>	Upgrade of strategic walking and cycling routes between Birmingham New Street, Birmingham Moor Street and Birmingham Curzon Street HS2 stations.
--	--

CRSTS schemes to be delivered by Transport for West Midlands in partnership with Birmingham City Council

- 3.12 The following table details the CRSTS schemes to be delivered by Transport for West Midlands (TfWM) in partnership with the Council with a short description.

Scheme Name	Scheme Description
East Birmingham to Solihull Corridor (Bus Enhancements)	Enhancements in the East Birmingham to Solihull (EBS) Corridor including bus priority measures.
Hagley Road Rapid Transit	Further work and analysis of Metro options for these corridors followed by initial stages of delivery
Cross City Bus Corridors	Cross City Bus corridors including Sutton Coldfield to Longbridge, Perry Common / Hamstead to Hawkesley / Longbridge, Harborne to Castle Bromwich, and Birmingham to West Bromwich.
A34 and A45 Sprint Phase 2	Further Sprint measures on existing A34 and A45 Sprint corridors.

4 Options Considered and Recommended Proposal

- 4.1 **Option 1 – Do Nothing:** The alternative option to not implementing recommendations 2.1 to 2.5 would hamper the city's successful delivery of the CRSTS schemes. Utilising the conventional governance routes could delay progress and hinder the delivery of projects ahead of the funding deadline.
- 4.2 **Option 2 - Implement the proposed recommendations:** The implementation of recommendations 2.1 to 2.5 will aid the city to successfully meet the delivery of the CRSTS schemes in line with the overall CRSTS programme deadline as set out by the government. All these schemes will aid the city's ambition to increase active and sustainable transport modes, support economic growth, and positively contribute towards addressing the climate emergency, as set out within the Birmingham Transport Plan. It is therefore recommended to proceed with this option.

5 Consultation

- 5.1 Consultation will be undertaken as part of individual outline business cases and full business cases in accordance with normal practise including Ward Councillors, residents, emergency services, businesses, WMCA/Transport for West Midlands (TfWM), special interest groups and the Cycling Forum. Consultation will also be undertaken with Sutton Town Council and New Frankley in Birmingham Parish Council where appropriate.

6 Risk Management

- 6.1 This report seeks to approve the governance approach to the development and delivery of the CRSTS schemes in Birmingham in order to meet the programme deadline of March 2027.
- 6.2 Failure to gain approval of recommendations 2.1 to 2.5 would hamper the city's successful delivery of the CRSTS schemes with the following consequences as a minimum.
- Inability to successfully meet the delivery of the CRSTS schemes in line with the overall CRSTS programme deadline as set out by the government.
 - Inability to provide necessary assurance to the DfT and HM Treasury over the ability to deliver the right interventions at the pace required over the five-year programme.
 - Potential delays in achieving the Birmingham Transport Plan which is key to the delivery of Place, Prosperity and Sustainability directorate's priorities including Route to Zero, East Birmingham Strategy and Our Future City Plan.
 - Reduced impact or delays in the provision of an essential role in supporting a range of programmes and projects that contribute towards achieving the City Council's key policies and priorities as set out in the City Council Plan and Budget 2022-26, West Midlands Strategic Transport Plan, emerging Birmingham Local Plan and existing Birmingham Development Plan, Birmingham Connected transport strategy, Birmingham Transport Plan, Local Walking & Cycling Strategy & Infrastructure Plan, and Clean Air/Climate Change Emergency including Route to Zero.
- 6.3 Each of the schemes within the CRSTS Programme will maintain their individual risk registers, detail scheme specific risks which will be presented within their respective outline business cases and full business cases.

7 Compliance Issues:

- 7.1 **How are the recommended decisions consistent with the City Council's priorities, plans and strategies?**
- 7.1.1 The CRSTS schemes will perform an essential role in supporting a range of programmes and projects that contribute towards achieving the Council's key policies and priorities as set out in the City Council Plan and Budget 2022-26, West Midlands Strategic Transport Plan, emerging Birmingham Local Plan and

existing Birmingham Development Plan, Birmingham Connected Transport Strategy, Birmingham Transport Plan, Local Walking & Cycling Strategy & Infrastructure Plan, and Clean Air/Climate Change Emergency including Route to Zero.

- 7.1.2 In the context of inclusive economic growth, the CRSTS schemes have a strong focus on supporting the Council's core mission to be a 'city of growth where every child, citizen and place matters'. In addition, the programme seeks to make a significant contribution towards the key priorities of children, jobs and skills, housing and health by enabling growth, improving road safety, improving accessibility, improving air quality, encouraging active and sustainable modes of travel, and tackling the climate emergency.
- 7.1.3 In particular, delivery of the Birmingham Transport Plan is key to the delivery of Place, Prosperity and Sustainability directorate's priorities including Route to Zero, East Birmingham Strategy and Our Future City Plan.

7.2 Legal Implications

- 7.2.1 The relevant primary legislation required to implement individual projects contained within the Transportation and Highways Capital Programme comprises the Highways Act 1980; Road Traffic Regulation Act 1984; Road Traffic Act 1988; Transport Act 2000; Traffic Management Act 2004; Town and Country Planning Act 1990 and Planning and Compulsory Purchase Act 2004, together with related regulations and guidance. The Civil Enforcement of Road Traffic Contraventions (Approved Devices, Charging Guidelines and General Provisions) (England) Regulations 2022 are also directly relevant to this report in terms of the use of bus lane enforcement surpluses, alongside the Ambient Air Quality and Cleaner Air for Europe Directive 2008 and the Air Quality Standards Regulations 2010 in relation to Clean Air Zone implementation.
- 7.2.2 Section 111 of the Local Government Act 1972 empowers local authorities to do anything (whether or not involving the borrowing, expenditure or lending of money or the acquisition or disposal of any of its property) which, is calculated to, or is conducive or incidental to the discharge of any of their functions.

7.3 Financial Implications

Capital

- 7.3.1 This report does not seek to commit the Council to any financial expenditure at this stage. Information pertaining to each CRSTS scheme's financial implications will be detailed in full within their respective outline business cases and full business cases.
- 7.3.2 The total provisional capital funding to be granted to the Council to deliver the named CRSTS schemes is £93.8 million as detailed below. Local match funding is a requirement of the overall CRSTS programme.
- 7.3.3 DfT guidance on the fund stated that city regions eligible for CRSTS were expected to make a local contribution of at least 15-20% of the funding granted

for capital enhancements. Within the WMCA CRSTS business case, which was accepted by the DfT, was a local contribution across the West Midlands of 32%.

- 7.3.4 Local contributions funding decisions will form part of each CRSTS scheme's outline business cases and full business cases. This report does not seek to commit the Council at this stage to the local contributions presented within the table below which amount to £34.2m.

Scheme Name	CRSTS Value	Match Funding Value <i>(Indicative source subject to approval)</i>	Total Project Cost
	£m	£m	£m
East Birmingham to Solihull Corridor – Bordesley Green Area Connectivity	5.0	0.0	5.0
Active Travel - A45 Coventry Road Cycle Route	14.3	5.2 <i>(Transforming Cities Fund)</i>	19.5
Sutton Gateway	25.0	0.0	25.0
Snow Hill Growth Strategy <i>(N.B. this project is part of the Our Future City Plan Transport Infrastructure Strategy)</i>	5.0	0.0	5.0
A38 Selly Oak to Longbridge Cycle Route	14.5	8.0 <i>(Bus Lane Enforcement /Clean Air Zone surplus)</i>	22.5
City Centre Active Travel Connections to Interchange	20.0	16.0 <i>(Enterprise Zone)</i>	36.0
One Station and Smallbrook Queensway <i>(N.B. this project is part of the overall HS2 Readiness programme)</i>	10.0	5.0 <i>(Enterprise Zone)</i>	15.0
TOTAL	93.8	34.2	128.0

- 7.3.5 The total provisional capital funding to be granted to TfWM to deliver the named CRSTS schemes within Birmingham is £151 million as detailed below.

Scheme Name	CRSTS Value
	£m
East Birmingham to Solihull Corridor (Bus Enhancements)	11.0
Hagley Road Rapid Transit	25.0
Cross City Bus Corridors	59.0
A34 and A45 Sprint Phase 2	56.0
TOTAL	151.0

Revenue Maintenance Costs

- 7.3.6 It is recognised that new capital transport schemes can by their nature attract additional ongoing maintenance costs in respect of improved or new assets and provide opportunities to remove existing assets during works to mitigate cost increases. For all schemes (excluding those deemed to be major schemes), an ongoing corporate policy contingency annual allocation is available to bid for to accommodate basic inventory growth and expenditure incurred as a result of new capital works and this is monitored to ensure the budget allocation is not exceeded. Alternative funding sources are investigated for the maintenance of enhanced assets but where these cannot be identified, the cost of maintaining enhanced assets may have to be funded from the corporate policy contingency allocation. In this event, options to reduce costs are considered including scheme revisions and scheme deferrals. Each scheme will need to identify revenue maintenance implications and funding, as part of the scheme-specific approval process, including where relevant the use of the corporate policy contingency allocation.

7.4 Procurement Implications (if required)

- 7.4.1 There are no procurement implications with the recommendations of this report. It should be noted that the strategy for any procurement activity required for the projects has been approved in the Transportation & Highways Capital Programme 2023/24 to 2028/29 approved at Cabinet on 21 March 2023.

7.5 Human Resources Implications (if required)

- 7.5.1 N/A

7.6 Public Sector Equality Duty

- 7.6.1 An initial screening for an Equalities Impact Assessment has been undertaken for the CRSTS programme and has concluded that a full assessment is not required at this time, with no adverse impacts on the protected groups and characteristics under the Equality Act 2010. This position will be reviewed for each composite project and/or programme at outline business case and full business case stage as necessary. The initial Equalities Impact Assessment screening is provided as Appendix B to this report.
- 7.6.2 Officers from TfWM will produce the Equality Analyses for the TfWM-led CRSTS schemes, in conjunction with the Council and other local authority partners. Officers from the Council will contribute to the assessments and will confirm their agreement with the outcomes as part of the outline business case and full business case stages.

8 Appendices

Appendix A – Environment & Sustainability Assessment

Appendix B – Equalities Impact Assessment

9 Background Documents

Transportation & Highways Capital Programme 2023/24 to 2028/29 report approved by Cabinet on 21 March 2023

Appendix A

Environment and Sustainability Assessment

Birmingham City Council is required to assess any positive or negative impacts that any policy/strategy/ decision/development proposal is likely to have on the environment. This assessment must be completed for CLT and Cabinet reports where appropriate. It is the responsibility of the Service Director signing off the report to ensure that the assessment is complete.

To complete the assessment, you should consider whether the proposal will have a positive or a negative impact on each of the key themes by placing a (✓) for positive, (x) for negative and (?) for unclear impact, and (N/A) for non-applicable impact. Further guidance on the completion of the template is available on page 3 below.

Project Title:	City Region Sustainable Transport Settlement Programme (The CRSTS Programme)			
Directorate: Place, Prosperity and Sustainability	Team: Transport Planning and Investment		Person Responsible for assessment: Anita Gosain	
Date of assessment: 23/02/23	Is it a new or existing proposal? New			
Brief description of the proposal: <p>The climate emergency is setting the pace of fundamental change needed to shape the way people and goods move around our city. The Birmingham Transport Plan sets out the principles for unlocking the potential of transport in achieving our net zero carbon goal. The projects within the City Region Sustainable Transport Settlement (The CRSTS Programme) programme play a significant role in achieving this goal.</p> <p>The CRSTS fund will be operated through and be fully compliant with the WMCA SAF. This proposal will ensure compliance with BCC governance and SAF governance requirements, providing assurance to the DfT and HM Treasury over the ability to make the right interventions at the delivery pace required over the five-year programme</p> <p>This report seeks to approve the proposed governance approach to the development and delivery of the CRSTS Programme schemes in Birmingham by our March 2027 deadline at a cost of £92.8m.</p>				
Potential impacts of the policy/development/ decision on:	Positive Impact	Negative Impact	No Specific Impact	What will the impact be? If the impact is negative, how can it be mitigated, what action will be taken?

Natural Resources - including water, soil, air	√			The implementation of the CRSTS Programme will contribute to improving the air quality across the city and within local neighbourhoods through prioritising schemes that support active travel and public transport over car movements.
Energy use and CO ₂ emissions	√			The implementation of the CRSTS Programme aims to reduce carbon emissions from transport through prioritising active travel and public transport, as well as reducing the length and number of trips undertaken by private cars. The programme is in line with the council's ambition to deliver net zero emissions by 2031.
Quality of environment	√			The implementation of the CRSTS Programme will continue to direct substantial funding towards improving the existing quality of environments around the city by making it more attractive for movement via active travel.
Impact on local green and open spaces and biodiversity	√			The implementation of the CRSTS Programme will not lead to direct loss of any local green/blue open spaces and be protected and enhanced where possible. Although active travel schemes (e.g. cycle routes) will look to incorporate these spaces, any potential impacts on biodiversity will be considered and monitored closely.
Use of sustainable products and equipment	√			Utilisation of sustainable methods and products will be explored through the design and delivery processes of each scheme.
Minimising waste			√	
Council plan priority: a city that takes a leading role in tackling climate change	√			The City's successful delivery of the CRSTS schemes will play an important role in the contribution towards the net zero carbon goals
Overall conclusion on the environmental and sustainability impacts of the proposal	The proposed governance process approach aims to ensure compliance with SAF and BCC governance processes at the delivery pace required. The implementation of the CRSTS Programme supports the schemes that will guide transport development in the coming years in order to meet the city's challenges and ambitions. The programme does not include any specific commitments to policies or infrastructure			

	and therefore does not in itself, have a positive or negative impact on the environment and sustainability. However, the programme makes a clear case for the need for rapid action in order to tackle key issues that the city is facing, mainly the climate emergency and inequality. It also seeks to improve the conditions for active travel, in particularly for those whose levels of access are currently low and where private vehicles are still preferred for shorter distance trips.
--	--

Title of proposed EIA	City Region Sustainable Transport Settlement Programme
Reference No	EQUA1096
EA is in support of	New Policy
Review Frequency	Annually
Date of first review	10/03/2024
Directorate	Inclusive Growth
Division	Transport and Connectivity
Service Area	Transport Planning and Network Strategy
Responsible Officer(s)	<input type="checkbox"/> Anita Gosain
Quality Control Officer(s)	<input type="checkbox"/> Janet L Hinks
Accountable Officer(s)	<input type="checkbox"/> Mel Jones
Purpose of proposal	To assess the governance approach to the development and delivery of the City Region Sustainable Transport Settlement (CRSTS) (estimated cost of £92.8m) against the protected characteristics.
Data sources	relevant reports/strategies; relevant research
Please include any other sources of data	Listed later in the report.
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Service Users / Stakeholders; Employees; Wider Community
Age details:	<p>Of the 1,140,500 people living in Birmingham (according to the 2020 mid-year population estimates):</p> <ul style="list-style-type: none"> • 22.5% (257,100) are children and young persons; and • 13.1% (140,400) are pensioners (older persons and the elderly). <p>The policies and schemes set out by the CRSTS Programme recognise that different age groups have different travel needs, which directly impact on how and when they choose to travel.</p> <p>With such a wide range of schemes supported by the CRSTS Programme from those based on the broader city-wide scale, Birmingham's transport network will cater for the diverse travel needs of a wide range of age groups and user types. The various schemes aim to support various sustainable transportation modes and Active Travel such as the provision of a segregated cycle way reducing potential conflict for older pedestrians.</p> <p>Several schemes are specifically designed to promote and increase levels of cycling and walking, which will reduce obesity, inactivity and improve public health and quality of life for all ages. In turn, this will align with the Birmingham Development Plan (BDP) 2031 which aims 'to encourage better health and wellbeing'.</p> <p>The CRSTS programme also further supports the clean air agenda, following on from the implementation of the Clean Air Zone, through prioritising funding for sustainable, low and no-carbon modes of transport including public transport, walking and cycling, contributing towards improved ambient air quality, through reducing the pollutants associated with transport. Air pollution affects everyone, but certain age groups are more likely to be adversely affected by poor air quality (e.g. the very old or the very young) so the policies</p>

supported by the CRSTS Programme are expected to have a positive impact on these groups in this regard.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic; however, it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate. For example, it is recognised that the inclusion of seating as part of public realm schemes can make such spaces more accessible and attractive for use by older persons.

It is considered that the proposed governance approach for the CRSTS Programme will result in a net Positive impact upon the Age protected characteristic.

Protected characteristic: Disability

Disability details:

Service Users / Stakeholders; Employees; Wider Community

The West Midlands Metropolitan area has a larger percentage of people in households with a limiting long-term illness (6% of households compared to 4.7% in England and Wales). It also has a slightly larger proportion of disabled people than England and Wales (19% versus 18% in England and Wales). More and more people are living with impairments or with or beyond serious illness.

The policies and schemes set out by the CRSTS Programme recognise that disabled persons have differing travel needs, which directly impact on how and when they choose to travel.

Motability's research shows that disabled people in the UK currently make 38% fewer journeys than non-disabled people – a figure that hasn't changed in the last decade. This impacts disabled people's access to healthcare, employment, education and social activities.

Whilst the CRSTS Programme directs attention away from the use of private vehicles to more sustainable modes of travel, it is recognised that the levels of access experienced by some disabled persons with physical mobility issues to different services (e.g. health) may be dependent upon private vehicles. Although parking spaces may be lost as part of some schemes, particularly within the city centre, parking space provision for blue badge holders will be retained and potentially increased where possible.

It is also recognised that for those with hearing or sight impairments, some modes of more sustainable transport, in particular cycles and scooters (both electric and manual) may not be visible or audible which can lead to accidents and confusion. To mitigate this, separated and segregated transport modal facilities will be provided wherever possible, as well as dropped kerbs and improved legibility for all users as part of wider high-quality streetscape/public realm (re)design.

Poor air quality is also likely to adversely impact people with disabilities, particularly those with respiratory problems. Schemes incorporated by the CRSTS Programme specifically aim to improve air quality in the city and therefore, it is likely to have a positive impact on those with long-term health issues.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic, however it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net Positive impact upon the Disability protected characteristic.

Service Users / Stakeholders; Employees; Wider Community

The gender balance of residents in Birmingham is currently 49.2% male and 50.8% female.

The policies and schemes set out in the CRSTS Programme recognise that different genders have differing travel needs, which directly impact on how and when they choose to travel. For example, encouraging modal shift towards active travel and public transport may increase the number of people circulating within the public realm which may act to improve public safety, particularly for women wishing to use the transport network at different times of the day.

A study undertaken by Sustrans entitled Birmingham Bike Life 2017 identified that women in Birmingham are less represented than men in cycling and a lack of cycle infrastructure adversely affects them, attributable in part to women generally having a more risk averse attitude to mixing with traffic. The implementation of this scheme should make cycling (and walking) significantly safer and more attractive to both genders as a result of removed through traffic, promoting equality of opportunity.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic; however, it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net Positive impact upon the Gender protected characteristic.

Service Users / Stakeholders; Employees; Wider Community

There are no national estimates on the trans population in England because the subject is not included in the national census. Additionally, there has not been any research completed elsewhere in England which was large enough to be statistically significant. The best estimate is that around 1% of the population might identify as trans, including people who identify as non-binary. If this estimate is applied to Birmingham, assuming that the 1% figure is equally represented across all age groups, there are an estimated 1,400 trans people aged 16 to 24 years in Birmingham.

The policies and schemes set out by the CRSTS Programme recognise the wide scope of trips required by those falling under this protected characteristic. The LGBT Centre at 38/40 Holloway Circus in Birmingham City Centre provides access to healthcare and other social services. However, the nearest clinics providing gender dysphoria services are located further

Protected characteristic: Sex

Gender details:

Protected characteristics: Gender Reassignment

Gender reassignment details:

...from providing gender re-assignment services to patients in the city of Nottingham and Daventry (<https://www.nhs.uk/live-well/healthy-body/how-to-find-an-nhs-gender-identity-clinic/>). It is also appreciated that the ability of those requiring to access key specialist healthcare services must be provided by a range of transport modes enhancing interconnectivity with other towns and cities.

CRSTS schemes will improve walking and cycling routes across Birmingham City Centre connecting public transport interchanges with key destinations, upgrade of strategic walking and cycling routes between Birmingham New Street, Birmingham Moor Street and Birmingham Curzon Street HS2 stations. This will increase footfall and natural surveillance across the city. This will benefit those undergoing gender reassignments who can be at a higher risk of discrimination and personal security issues.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic; however, it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net Positive impact upon the Gender Reassignment protected characteristic.

Service Users/ Stakeholders; Employees; Wider Community

Only 41% of Birmingham's resident population are married or in a civil partnership, which partly reflects the relative youth of the city's population.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic, however it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net Neutral impact upon the Marriage and Civil Partnership protected characteristic.

Service Users / Stakeholders; Employees; Wider Community

Approximately 17,000 babies are born in Birmingham each year. As such, Birmingham has a large resident population of persons with this protected characteristic.

The impacts in relation to air pollution on this protected characteristic are recognised. Recent studies show that increases in NO2 have even greater damaging impacts on pregnant women than first thought, with evidence of pollution particles found in placentas.

It is estimated that traffic-related air pollution exposure (particularly exposure to Particulate Matter) of pregnant women accounts for more than one-fifth of all cases of low birth weight at term. Low birth weight is associated with low

Protected characteristics: Marriage and Civil Partnership

Marriage and civil partnership details:

Protected characteristics: Pregnancy and Maternity

Pregnancy and maternity details:

lung function, COPD, cardiovascular disease and early death in adulthood.

Air pollution can also harm placental development, which affects the development of the unborn child and has been associated with several chronic diseases, including heart disease, obesity and type 2 diabetes. Poor foetal growth is linked to abnormal development of the kidneys, and to hypertension and kidney disease in later life.

The CRSTS Programme further supports the clean air agenda, following on from the implementation of the Clean Air Zone, through prioritising sustainable modes of transport including public transport, walking and cycling to encourage low/no carbon travel modes, which will contribute towards improved air quality, aligning with the Birmingham transport Plan.

Access to main hospitals across the city, in particularly, Birmingham's Children Hospital located within the city centre, will also be maintained and enhanced where possible, especially via public transport and active travel modes. The needs of parents with small children and pushchairs will also be considered when designing measures, with dropped kerbs and ramps in appropriate places as part of high-quality streetscape design.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic, however it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that CRSTS Programme will result in a net Positive impact upon the Pregnancy and maternity protected characteristic.

Service Users / Stakeholders; Employees; Wider Community

Birmingham is a multi-ethnic city with 57.9% of Birmingham's population identifying as white, 26.6% as Asian, 9% as black and 2% as other ethnicities.

A number of the policies and schemes set out by the CRSTS Programme are in areas where there is a high concentration of ethnic minorities. These schemes will have a direct positive impact on the communities immediately surrounding the sites and will enhance the quality of life and equality of opportunity for these residents.

A study undertaken by Sustrans entitled 'Bike Life' in 2017 shows that black and ethnic minority communities are under-represented when it comes to riding a bike in Birmingham. Some ethnic minorities are also known to have lower levels of overall physical activity. This may influence certain health conditions linked to obesity, type II diabetes. Providing an enhanced environment for active travel in the study area will enable all persons of all racial backgrounds to enjoy the health benefits associated with walking and cycling.

Car ownership in Birmingham, collected from the 2011 census is lower than the England average. 36% of households in Birmingham do not own a car or van compared to 26% for

Protected characteristics: Race

Race details:

England. Disproportionately, those identifying with Asian, black and other ethnicities are less likely to have access to a car, and so will be reliant on other modes of transport to access key services and facilities.

Providing quieter roads due to a reduction in through traffic will improve the perception of safety for active travel users, encouraging greater levels of participation, whilst having the potential to address some of these inequalities by adopting active travel modes of transport.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic, however it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net **Positive** impact upon the Race protected characteristic.

Protected characteristics: Religion or Beliefs

Religion or beliefs details:

Service Users / Stakeholders; Employees; Wider Community

In Birmingham, 46.1% of residents identify as Christian, 21.8% as Muslim, 19.3% have no religion, 3% are Sikh, 2.1% are Hindu and the remaining 7.7% are other religions. The city is known for its ethnic diversity.

The policies and schemes set out in the CRSTS Programme recognise that persons of different beliefs and religious affiliations can have differing travel needs, which directly impact on how and when they choose to travel.

It is also recognised that some of the largest religious institutions within the West Midlands (e.g. Birmingham Central Mosque) are located within Birmingham. Access to these from a range of locations will be retained and promoted where possible, in particular by public transport and modes of active travel.

This strategic screening exercise has not identified any adverse impacts on this protected characteristic, however it is recognised that further equality assessments will be required as part of scheme design, development and delivery, to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

It is considered that the CRSTS Programme will result in a net Positive impact upon the Religion and beliefs protected characteristic.

Protected characteristics: Sexual Orientation

Sexual orientation details:

Service Users / Stakeholders; Employees; Wider Community

Public Health England (PHE) estimates that between 2% and 5% of the national population identify with a non-heterosexual sexual orientation. GP survey data also shows that young adults are more likely to identify with non-heterosexual identities than older age groups. Although there has been NHS guidance on collecting data on sexual orientation there is very little Birmingham data on the health of this group. Based on the various available reports, the LGBTQIA+ population of Birmingham is estimated to be approximately 45,000 adults.

who continue to see themselves as heterosexual whilst having sexual contact with other men.

Members of the LGBTQIA+ community are disproportionately more likely to be subject to personal security issues, discrimination and hate crime. The policies and schemes set out by the CRSTS Programme will increase footfall and natural surveillance across Birmingham, as well as improving access by public transport and active travel modes for all by enhancing the quality of infrastructure and services provided to support use of these modes.

It is considered that the CRSTS Programme will result in a net Positive impact upon the Sexual orientation protected characteristic.

Socio-economic impacts

Please indicate any actions arising from completing this screening exercise.

In creation of proposals to support the policies and schemes set out by the CRSTS Programme, the needs of those included under each of the protected characteristics must be recognised. Further equalities assessments must be conducted to identify opportunities to mitigate any adverse impacts and generate additional positive impacts, where realistic and appropriate.

Please indicate whether a full impact assessment is recommended

NO

What data has been collected to facilitate the assessment of this policy/proposal?

- Census 2011 and Mid-Year Population Estimates: www.nomisweb.co.uk
- Campaign for Better Transport - Why getting transport right matters to young people:

https://bettertransport.org.uk/sites/default/files/researchfiles/Young_People_and_Buses_FINAL_forweb_0.pdf

- Bike Life Birmingham 2017 – Sustrans: <https://www.sustrans.org.uk/media/2950/bike-life-birmingham-2017.pdf>
- Fit for the Future – Birmingham's Childhood Obesity Strategy: https://www.birmingham.gov.uk/downloads/file/8102/fit_for_the_future_childhood_obesity_strategy
- LGBT Britain – Hate Crime and Discrimination: <https://www.stonewall.org.uk/lgbtbritain-hate-crime-and-discrimination>
- Public Health England - Health Matters: Air Pollution:

<https://www.gov.uk/government/publications/health-matters-air-pollution/health-matters-airpollution>

Consultation analysis

Stakeholder and public consultation will be undertaken as part of the development and delivery of each individual scheme introduced as part of the CRSTS Programme.

Adverse impact on any people with protected characteristics.

None at this stage.

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

All proposed schemes set out in the CRSTS Programme will be subject to bespoke public engagement and specific equality impact assessment screening, which will identify any modifications to reduce or eliminate adverse equality impacts.

How will the effect(s) of this policy/proposal on equality be monitored?

The effects of this policy will be monitored as part of Birmingham City Council's established transport scheme development and delivery processes.

What data is required in the future?

Scheme-specific equalities impact data will be collected to inform scheme design and development processes, prior to delivery.

Are there any adverse impacts on any particular group(s)

No

If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal

Consulted People or Groups

Informed People or Groups

Summary and evidence of findings from your EIA

This Equalities Assessment reviews the CRSTS Programme for the period to March 2027 at a total estimated cost of £98.2m.

The CRSTS Programme supports delivery of the City Council's key policies and priorities, facilitating streamlined and efficient delivery. Within this update, CRSTS seeks to approve the governance approach to the development and delivery of the CRSTS schemes in Birmingham, to meet the programme deadline of March 2027. This will support a range of projects and programmes that contribute towards key City Council priorities and delivery plan.

The CRSTS Programme contributes to the delivery of priorities including those set out by the West Midlands Strategic Transport Plan: Movement for Growth, emerging Birmingham Local Plan, Birmingham Connected transport strategy, Birmingham Transport Plan (BTP), the Route to Zero strategy, and to allow the City Council to create a legacy for the city building on the work that was completed prior to and during the 2022 Commonwealth Games (CWG). These policy documents and associated reports have already been subject to an Equalities Impact Analysis.

The intended outcomes of the CRSTS Programme include:

- Supporting economic growth,
- Reducing congestion,
- Increasing active travel,
- Improving physical fitness and health,
- Improving road safety, improving accessibility, and
- Improving air quality.

Transportation and highway improvements will benefit districts and wards across the city, with further benefits to visitors and those who commute into the city. Measures implemented will benefit all ages and communities across the city. Many schemes are prioritised in terms of need, in addition to detailed data analysis, consultation and reference to existing Council, Transport for West Midlands, Department for Transport and other guidance or policy. Schemes will cover a broad spectrum of modes including public transport, walking, cycling, freight / business movement and the private car.

It is considered that there are no aspects of the CRSTS Programme that could contribute to inequality or inequity. The facilities and measures proposed are for all users and none are excluded. At this stage, no measures are considered to discriminate against protected groups in terms of age, race, gender reassignment, sexual orientation, sex, pregnancy or maternity, disability, marriage / civil partnership

or religion / belief. Internal consultation will be undertaken with the Director of Place, Prosperity and Sustainability, Assistant Director Highways, Assistant Director Planning, Assistant Director Development and the Assistant Director Transport and Connectivity.

Individual scheme proposals will be further screened for equalities analysis as part of standard Council governance and approval processes, and EAs will be completed at Options Appraisal and FBC stage for individual projects and programmes.

QUALITY CONTORL SECTION

Submit to the Quality Control Officer for reviewing?

No

Quality Control Officer comments

Proceed to Accountable Officer 20 03 2023

Decision by Quality Control Officer

Proceed for final approval

Submit draft to Accountable Officer?

Yes

Decision by Accountable Officer

Approve

Date approved / rejected by the Accountable Officer

20/03/2023

Reasons for approval or rejection

Approved on the basis of a thorough assessment and only net neutral or positive impacts identified.

Please print and save a PDF copy for your records

Yes

Content Type: Item
Version: 26.0
Created at 02/03/2023 05:11 PM by ☐ Jamie Stanford
Last modified at 20/03/2023 04:09 PM by Workflow on behalf of ☐ Mel Jones

Close

Birmingham City Council

Report to Cabinet

16 May 2023



Subject: DIATOMIC (Digital Innovation Transformative Change) - Innovate UK funded West Midlands Innovation Accelerator project – Full business Case

Report of: Peter Bishop, Director Digital & Customer Services
Paul Kitson Strategic Director of Place, Prosperity and Sustainability

Relevant Cabinet Member: Councillor Jayne Francis -Digital, Culture, Heritage and Tourism
Councillor Yvonne Mosquito – Finances and Resources

Relevant O &S Chair(s): Councillor Akhlaq Ahmed - Resources
Councillor Saima Suleman - Economy and Skills

Report author: Heather Law, European Affairs Manager
Heather.Law@birmingham.gov.uk
Tel: 07917 172402

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected –
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 010708/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential :		

1 Executive Summary

- 1.1 The purpose of the report is to seek approval to the Full Business Case (FBC) for the DIATOMIC (Digital InnovAtion TransfOrMative Change) project and to accept

a revenue grant of £1.035m funded by Innovate UK West Midlands Innovation Accelerator to build the innovation capability and capacity to drive growth and prosperity in Birmingham, positioning Birmingham as a leading UK city in digital innovation and inclusive innovation.

- 1.2 The project will build a digital twin mirroring Birmingham. This is a virtual model of the physical world on a cloud-based data platform which will gather real time data such as pollution and traffic congestion. This will enable the twin to run simulations of local challenges, that accurately reflect the physical environment. This will study performance issues, generate possible improvements and valuable insights, which can then be applied back in real-life. This will provide access to data that will enable SMES and multi-sector organisations to access market opportunities primarily in the clean energy, retrofit and health innovation sectors. This will in turn enable them to access procurement opportunities and contribute towards creating Birmingham and the West Midlands' leading tech companies.
- 1.3 The project will galvanise innovation in BCC's procurement system and support Birmingham's Tech talent. By creating access to agile, smart, more efficient SMEs that respond to challenges identified above, BCC can actively support the scaling ambitions of local business. This could potentially also open up new international market opportunities for local SMEs through the global innovation city twin platform (described below). The pilot targets East Birmingham and is aligned to the East Birmingham Inclusive Growth Programme. It will open opportunities to the diverse base of SMEs and social businesses (traditionally attracting women and migrants) who represent the untapped economic potential of the region. It will establish the UK's first regional Inclusive Innovation Network (IIN) focussing on how we design, deliver and diffuse the benefits of innovation to the West Midlands region. All the outputs are designed and delivered to be inclusive, based around societal benefit and impact.
- 1.4 The project will establish a global innovation city twin platform (an online portal where cities involved in DIATOMIC post the challenges, they are looking to identify solutions for) and will form the basis for attracting global investors and businesses. It will establish a network of city-to-city collaborative partnerships and connectivity to global markets which will support knowledge exchange, access to skills and support scaling of new approaches and potential for foreign direct and capital investment.
- 1.5 In addition, the funding will deliver a PR, Communications and Dissemination work package to supporting the promotion of the DIATOMIC project locally, nationally and globally.

2 Recommendations

- 2.1 Approves the Full Business Case (FBC) for the DIATOMIC project as detailed in Appendix 1 for BCC to deliver the outcomes detailed in 1.2, 1.3,1.4 and 1.5 above.
- 2.2 For Cabinet to accept grant funding of £1.035m funding from Innovate UK to fully fund the DIATOMIC project and to enter into the associated funding agreement, subject to receipt of an offer letter.
- 2.3 Delegates authority to the Director Digital and Customer Services, Strategic Director of Place, Prosperity and Sustainability and Director of Public Health to manage and implement the project in line with the conditions of the grant funding agreement.
- 2.4 Delegates authority to the Director Digital Services, the Assistant Director Corporate Procurement or their delegate, in conjunction with the Chief Finance Officer or their delegate, and the City Solicitor or their delegate to approve the procurement strategy and selection of successful bidder(s) following the conclusion of the tender process and to execute the necessary contractual documentation to effect this outcome.
- 2.5 Authorises the City Solicitor (or their delegate) to execute and complete all the necessary legal documents to give effect to the above.

3 Background

- 3.1 In September 2022 Connected Places Catapult (CPC) approached Birmingham City Council and 5 other organisations to join a consortium to bid for Innovate UK Innovation Accelerator funding. A bid was submitted to the Innovate UK funded Innovation Accelerator programme in November 2022 and the team were notified that the bid was successful on 13th January 2023.
- 3.2 The total project value is £6.1m and this is apportioned across the following organisations: Birmingham City University; Aston University; University of Birmingham; the Greater Birmingham Chambers of Commerce, Connected Places Catapult (CPC) and BCC. The lead partner is CPC.
- 3.3 The project will contribute to the City Council Places, Prosperity and Sustainability East Birmingham Inclusive Growth Programme by supporting the development and growth of SMEs and the social economy, alongside the development of new products/services to tackle challenges identified by the Inclusive Innovation Network (IIN) and Innovative Procurement Programme and will be aligned to the City Council Digital City programme.
- 3.4 The project will also contribute to the Council's emerging Route to Zero (R20) work and seek synergy with other existing initiatives such as the Climate Emergency work.

- 3.5 Led by the City Council's Digital City and European and International Affairs Teams, the project is for 2 years and will commence 1st April 2023 and complete on 31st March 2025.
- 3.6 The Council will undertake several procurement exercises during the course of the DIATOMIC project. In total, the Council will procure a total of £0.285m procured services to include: £0.160m for Work Package (WP) 3 which will fund a £0.05m business engagement and advice programme; £0.05m challenge programme for impact entrepreneurs; £0.06m; first phase of the grant programme for health innovation involving social enterprises led by and creating employment for protected characteristics with a specific focus on launching or scaling up sustainable business ideas. Work Package 9 will procure £0.125 in total, £0.100m to fund an international city innovation network and £0.025m to fund global events.
- 3.7 The programme will deliver the following outputs:
- a digital twin to drive data
 - innovation in procurement to drive city challenges to SMEs focussing on enabling new solutions around Health Tech / Clean Tech and Med Tech with an inclusive innovation network to ensure all people, organisations and communities can contribute and take part in these challenges
 - a global innovation twin, pairing cities and investors to invest in the region.
 - In addition, the funding will deliver a PR, Communications and Dissemination work package to supporting the promotion of the DIATOMIC project locally, nationally and globally

In turn this will address the city's and region's challenges and deliver outcomes that:

- Support the data economy (the data economy will be supported by giving SMEs access to data to use in product development in response to the challenges that will be set through WP3 and WP4)
 - Double the spend with the social economy
- Embed entrepreneurship into the fabric of society
- Create international trade
- Generate bilateral innovative solutions that respond to local and global challenges

4 Options considered and Recommended Proposal

- 4.1 **Option 1 - Do Nothing.** This would result in Birmingham withdrawing from the partnership risking reputational damage which could impact on future funding opportunities and partnerships with Connected Places Catapult and Innovate UK funding. Domestic funding now represents the biggest opportunity to fund activity which complements the work of the City Council now that we have left the European Union.
- 4.2 **Option 2 - Approve the Full Business Case at a total cost of £1.035m and accept the grant award of £1.035m from the Innovate UK Innovation Accelerator Programme for the DIATOMIC Project.** This is the recommended

proposal as domestic funding is replacing funding we would previously have drawn from the European Union.

5 Consultation

- 5.1 The two-year project has been fully consulted with the city stakeholders participating in the project who have expressed their full support for the project.

6 Risk Management

- 6.1 Connected Places Catapult has developed a risk management register which will be reviewed regularly by the project board which will include representation from Birmingham City Council. A project governance structure has been identified to ensure risks are appropriately managed.
- 6.2 There is a risk around audit and potential clawback of the external funding on the basis of eligibility or poor document/data retention/failure to comply with the funding conditions. This risk will be mitigated as tried and tested policies and templates are in place which are already in use. The BCC project leads have extensive experience in managing multi-level complex projects and are able to mitigate against this through effective project management.
- 6.3 The biggest risks for the partnership are cost of development of digital twin outgrows budget; timely availability of the platform.; market opportunities change or are not accessible for businesses engaged on the programme. All these risks will be managed through regular project management meetings to monitor spend and progress. The last risk is that thorough and continued market research conducted throughout the duration of the programme. Support offered to businesses enables them to pivot and respond to emerging opportunities.

7 Compliance Issues:

- 7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?
 - 7.1.1 The acceptance of the Innovate UK grant supports the updated Birmingham City Council Corporate Plan. This project aligns with four of the five grand challenges set out in this document. They are:

Employment, Skills and the local economy – the project will develop an Inclusive Innovation Network (INN) and this will support the creation of jobs and SME growth through access to opportunities in the clean tech, health tech and med tech sectors in East Birmingham. Home to Tylesley Energy Park and the Heartlands hospital, both key assets, with data already held for this area. These anchor institutions offer opportunities for significant procurement challenges where SMEs can respond, and a place for investment.

Community resilience and cohesion – The IIN will support the access of SMEs and social businesses (traditionally migrants and female led

businesses), an untapped economic potential in the region, to procurement opportunities in clean and sustainable energy market (linking to the WMCA's retrofit agenda and Tyseley Energy Park) and health tech opportunities. It will open opportunities to a diverse base of SMEs and social businesses (traditionally attracting women and migrants) who represent the untapped economic potential of the region. This links to the WMCA's pledge to double the social economy spend by 2030 and the work of WMCA's SE Task Group creating new social economy clusters and linking them with local innovation ecosystems and real market opportunities.

Health and wellbeing – The Innovation in Procurement programme will focus on identifying both Health Tech and Med Tech challenges and will then procure potential solutions from Birmingham's SME base.

Climate emergency – The West Midlands has a concentration of energy and utility firms, along with research assets like the Tyseley Energy Park and the academic research base. It also has manufacturing and engineering capabilities, including supply chains for wind, solar PV and biomass in the region. It also has a detailed blueprint for energy security for energy-intensive industry base through Repowering the Black Country project. In addition, the West Midlands has a Circular Economy Routemap with cases for industrial symbiosis programmes.

The project's approach to digital and data will create a competitive advantage for the region by improving the currently fragmented landscape and with better coordination we will create a market and attract SMEs who can create solutions benefiting from the open data. In fact, a key incentive for start-ups, disruptive entrepreneurs and innovators is access to free or readily available data. This removes a significant barrier to market.

7.2 Legal Implications

- 7.2.1** Under the general power of competence in Section 1 Localism Act 2011, the Council has the power to enter into the arrangements set out in this report and they are within the boundaries and limits of the general power of competence in Sections 2 and 4 of the Localism Act 2011.

7.3 Financial Implications

- 7.3.1** The total value of the DIATOMIC project proposal is £6.098 of which £1.0356m has been awarded to BCC in its role as project partner and will be claimed up to the project end date of 31st March 2025. The profile of the expenditure is set out below.

	Financial Year
--	----------------

	23/24	24/25	Total
REVENUE CONSEQUENCES			
Revenue cost during project delivery	517,801	517,801	1,035,602
FUNDING SOURCES			
Innovate UK	456,499	456,499	912,998
Match Funding BCC	61,302	61,302	122,604

7.3.2 On receipt of the funding agreement, a more detailed delivery plan will be established which sets out how the grant funding will be distributed between the BCC service areas to cover the costs detailed in the Full Business Case eg staffing, commissioning etc. This is still subject to further refinement and discussion. This will be part of the delegated authority to the appropriate service directors.

7.4 Procurement Implications

7.4.1 The Council will undertake several procurement exercises (this will involve building on the innovation in procurement methodology (Digital Innovation in Public Services) to ensure local organisations are supported to access procurement opportunities) during the course of the DIATOMIC project. In total, the Council will procure a total of £0.285m procured services to include: £0.160m for WP 3 which will fund a £0.05m business engagement and advice programme; £0.05m challenge programme for impact entrepreneurs; £0.06m; first phase of the grant programme for health innovation involving social enterprises led by and creating employment for protected characteristics with a specific focus on launching or scaling up sustainable business ideas. WP 9 will procure £0.125 in total, £0.100m to fund an international city innovation network and £0.025m to fund global events.

7.5 Human Resources Implications

- 7.5.1 The roles and nature of the jobs are subject to the wider redesign of European and International Affairs and Business Development. These will be communicated at a later date. The Council will administer the BCC part of the project whilst the overall management will sit with Connected Places Catapult.
- 7.5.2 There are no TUPE implications.

7.6 Public Sector Equality Duty

- 7.6.1 Initial Equality Analysis (EQUA 1036) has been carried out in December 2022 (see Appendix 2) which takes into account equality measures in the day-to-day activities in assisting companies. No equality issues have been identified that could impact the project during its delivery time.

8 Appendices

- Appendix 1 Full Business Case
- Appendix 2 Equality Assessment
- NB No ESA is required at this stage, but upon receipt of funding and as projects progress an ESA will be completed for the next update to Cabinet

9 Background Documents

- 9.1 DIATOMIC application accepted by Innovate UK
- 9.2 Report to Cabinet of April 2022 – Digital City programme and Roadmap

FULL BUSINESS CASE (FBC)

A. GENERAL INFORMATION

A1. General

Project Title <i>(as per Voyager)</i>	DIATOMIC (Digital Innovation Transformative Change)		
Voyager code	TBC		
Portfolio /Committee	Digital, Culture, Heritage and Tourism/Finance and Resources	Directorate	Digital and Customer Services/ Place Prosperity and Sustainability
Approved by Project Sponsor	Waiting for approval by Innovate UK	Approved by Finance Business Partner	

A2. Outline Business Case approval *(Date and approving body)*

The project proposal has yet to be approved. It was submitted to the Innovate UK Innovation Accelerator Programme in November 2022. We are awaiting notification regarding whether funding will be awarded or not. We should know this on January 20th 2023.

A3. Project Description

[a focussed description which shouldn't generally exceed ½ page. An FBC for smaller, simpler projects should be shorter and simpler than for major complex projects]

The overall aim of the project is to build the innovation capability and capacity to drive growth and prosperity in Birmingham, positioning Birmingham as a leading UK city in digital innovation and inclusive innovation . It will achieve this by:

1. Building a digital twin mirroring Birmingham. This is a virtual model of the physical world on a cloud-based data platform which will gather real time data such as pollution and traffic congestion. This will enable the twin to run simulations of local challenges, that accurately reflect the physical environment. This will study performance issues, generate possible improvements and valuable insights, which can then be applied back in real-life. This will provide access to data that will enable SMES and multi-sector organisations to access market opportunities primarily in the clean energy, retrofit and health innovation sectors. This will in turn enable them to access procurement opportunities and contribute towards creating Birmingham and the West Midlands' leading tech companies.
2. Galvanising innovation in BCC's procurement system and support Birmingham's Tech talent. By creating access to agile, smart, more efficient SMEs that respond to challenges identified above, BCC can actively support the scaling ambitions of local business. This could potentially also open up new international market opportunities for local SMEs through the global innovation city twin platform (described below). The pilot targets East Birmingham and is aligned to the East Bham Inclusive Growth Programme. It will open opportunities to the diverse base of SMEs and social businesses (traditionally attracting women and migrants) who represent the untapped economic potential of the region. It will establish the

UK's first regional Inclusive Innovation Network (IIN) focussing on how we design, deliver and diffuse the benefits of innovation to the West Midlands region. All the outputs are designed and delivered to be inclusive, based around societal benefit and impact.

3. Establishing a global innovation city twin platform (an online portal where cities involved in DIATOMIC post the challenges, they are looking to identify solutions for) and will form the basis for attracting global investors and businesses. It will establish a network of city-to-city collaborative partnerships and connectivity to global markets which will support knowledge exchange, access to skills and support scaling of new approaches and potential for foreign direct and capital investment.
4. Establishing a global innovation city twin platform which will form the basis for attracting global investors and businesses that are keen to exploit and drive trade and investment. It will establish a network of city-to-city collaborative partnerships and connectivity to global markets which will support knowledge exchange, access to skills and support scaling of new approaches and investment.

A4. Scope

The project covers the following work packages:

WP0 Project Management (Steering Committee) (CPC Lead) M1-M24 which will ensure that the outputs and outcomes from the project are fully exploited and generate tangible economic/ wider benefits to Birmingham, the West Midlands and the UK. BCC will attend the project management steering committee.

WP1 Digital Twin for East Birmingham (UoB Lead): M1- M 12 which will deliver a digital twin as a digital asset for Birmingham and the West Midlands (WM) region. The platform will accelerate innovation within the city and region. (This will link to the work of Birmingham City Observatory and support the objective of making data readily available.)

WP2 West Midlands Innovation Centre of Excellence (CPC Lead) M2- M24 a physical CPC centre enabling collaboration between partners and local SMEs or innovation and growth in the three sectors -- MedTech, Health Tech, Clean tech

WP3 Inclusive Innovation Network (CPC Lead) M1-M24 will create a work programme and pilot activities with the first cohort of businesses and with excluded communities (both ethnic minorities and women) in the east of Birmingham. It will open procurement opportunities to the diverse base of SMEs and social businesses (traditionally attracting women and migrants) who represent the untapped economic potential of the region. It will focus on Inclusive Innovation in the region as well as linking into CPC's newly created national network. An inclusive innovation network will be established for the West Midlands. BCC will co-ordinate the engagement of city stakeholders and excluded groups in this network and will commission activity to support the inclusion of these groups in entrepreneurial activity.

WP 4 Accelerator (CPC Lead): M1-M10 – Three elements are included in this WP. A) BCU will deliver an open challenge programme to BCC colleagues to identify the most pressing challenges in directorates B) CPC will deliver a programme to procurers to help them to adopt innovation procurement methodology. C) A yet to be identified innovation accelerator will deliver a programme of scouting, selection, acceleration and funding of 12 UK-based SMEs to develop their business offerings to BCC challenges. (BCC will provide challenges for this activity and will be involved in selection of the businesses bringing forward solutions. Procurers will be supported in adopting the innovation in procurement methodology)

WP 5 Impact Assessment Toolkit (CPC Lead): M1--M8 - assessing programme impact and creating an Impact Toolkit to be shared with others across the region in support of investment decisions.

WP 6 Twinning (CPC Lead): M1-M9 - demonstrating that cities and regions can deliver on local, national and international agendas in an outcome- driven manner. Includes a Cross-city demonstrator (four SMEs receiving funding)

WP7 Global Investment programme (CPC Lead): M10-M14 - Creating SME investment strategy and UK and international collaboration programme

WP8 Global Accelerator (CPC Lead): M13-M24 - programme of scouting, selection, acceleration and funding of eight UK-based SMEs to develop business offerings for a selected global market, including travel and in country support.

WP9 PR and Dissemination (BCC Lead): M1-M24 - supporting the promotion of DIATOMIC locally, nationally and globally, enhancing the profile of the city-region and positioning it as a leader in city-diplomacy and city-to-city diplomacy

A5. Scope exclusions

The focus of the project is East Birmingham. There is no plan to develop digital twins for the other Birmingham areas. Notwithstanding this, it is expected that wider Birmingham and the West Midlands will benefit from the activity of the project. Indeed, we will support knowledge sharing on these innovations in public sector practices with policymakers across the West Midlands. Challenge-led procurement identifies shared global city challenges, and the city twin platform forms the basis for attracting global investors and businesses that are keen to exploit it and drive trade and investment.

B. STRATEGIC CASE

This sets out the case for change and the project's fit to the Council Plan objectives

B1. Project objectives and outcomes

The case for change including the contribution to Council Plan objectives and outcomes

[bullet points will be fine]

There will be an impact assessment toolkit to measure the impact of all elements of DIATOMIC. The project will contribute to the Council's 5 grand challenges in the following way:

1. **Employment, Skills and the Local Economy** – Birmingham is the place for everyone to benefit from its economy and prosperity. The project will benefit East Birmingham through the activity of the IIN to level up economic prosperity. The pilot programme will support women and ethnic minorities to engage in social businesses and SMEs. This enables income generation, ensures growth, encourages social and technical innovation and breaks grant dependency. Tyseley Energy Park will link local SMEs, specifically those ethnic minority and women-led with the University's business incubation platform. The project will also benefit local SMEs included in the Accelerator (WP 4) who will respond to Council departments health tech and clean tech challenges and be included in an innovative procurement. The digital twin will provide access to data. By improving the currently fragmented landscape and with better coordination the project will create a market and attract SMEs which can create solutions benefiting from the open data.
 - The proposed projects have the potential to increase gross domestic product by approximately £145m-436m over the project period by improving access to, and availability of, data in the city. The project will result in increased attractiveness for inward investment,* start-ups and innovation, better access to data increase business/commercial attractiveness and lower costs/barriers to entry for new firms to emerge through coordinated data sharing and the digital twin. This intervention could have a profound effect on Birmingham's attractiveness as a location for inward investment. Access to high-quality data sources enabled through data sharing could act to induce investment from data-intensive, high-growth, high-value businesses.

2. **Community Resilience and Cohesion** – As noted above, the activity of the IIN will bring benefit to E Birmingham's social and SME businesses. This will bring investment to the locality and promote greater resilience and cohesion. The challenge identification will address both health and clean tech. Inclusion and sustainability will be promoted by enabling wider community involvement in big data and its management in Birmingham through the implementation of a Data Charter. The Data Charter could embed social inclusion and sustainability at the heart of big data in Birmingham.
3. **Health and Wellbeing** – One of the sectors we are looking to work with is health innovation. This has been chosen because of the specific need for innovation in the sector and the existing contracting opportunities available from the NHS and the local authority social care. BCC is already working with social economy consortia that hold these contracts and who are seeking new partners (Living Well UK Consortium and Forward Carers CIC).
4. **The Climate Emergency** One of the sectors we are looking to work with is the clean and sustainable energy market (specifically linking to the WMCA's retrofit agenda and the business incubator programme from Tyseley Energy Park). This has been chosen because of the specific need for innovation in the sector. Tyseley Energy Park will link local SMEs, specifically those ethnic minority and women-led with the University's business incubation platform.

B2. Project Deliverables

These are the outputs from the project eg a new building with xm2 of internal space, xm of new road, etc

[again, this should be focussed, and a list of bullet points will be fine]

- WPO Project Management
- WP1 Digital Twin for East Birmingham
- WP2 West Midlands Connected Place Innovation Centre of Excellence
- WP3 Inclusive Innovation Network
- WP4 UK-based Accelerator
- WP5 SME Impact Assessment Toolkit
- WP6 City Twinning
- WP7 Global Investment programme
- WP8 Global Accelerator
- WP9 PR and Dissemination

B3. Project Benefits

These are the social benefits and outcomes from the project, eg additional school places or economic benefits.

Measure	Impact
<i>List at least one measure associated with each of the objectives and outcomes in B1 above</i>	<i>What the estimated impact of the project will be on the measure identified – please quantify where practicable (eg for economic and transportation benefits)</i>
0. Project Management (WP1)	Project is delivered on time and in accordance with plan. This will result in an effectively delivered project meeting the objectives and impacts for each of the work packages
1. Digital Twin for East Birmingham	The digital twin will provide access to data – traditionally a barrier to market for SMEs as entry costs will be lower as a result. By improving the currently fragmented landscape and with better coordination we will create a market and attract

APPENDIX 1

	SMEs who can create solutions benefiting from the open data.
2. West Midlands Connected Place Innovation Centre of Excellence	A physical CPC centre enabling collaboration between partners and local SMEs or innovation and growth in the three sectors -- MedTech, Health Tech, Clean tech.
3. Inclusive Innovation Network	A work programme and pilot activities with the first cohort of businesses and with excluded communities (both ethnic minorities and women) in the east of Birmingham.
4. UK-based Accelerator	Both SMEs and social businesses will have access to procurement opportunities that previously would not have been accessible.
5. SME Impact Assessment Toolkit	This will collect data from the project to demonstrate how regional economies drive the national agenda around transformative innovation, further supporting the business case to national government for greater funding and expanded competence. This places the West Midlands at the heart of an international movement for cities as innovation actors and thus elevates Birmingham as a global leading city for innovation.
6. City Twinning	This will pair cities and investors to invest in Birmingham and the West Midlands. It is expected that there will be 3 cities that will be paired with Birmingham including Ulsan in South Korea. The city twin platform forms the basis for attracting global investors and businesses that are keen to exploit it and drive trade and investment.
7. Global Investment programme	This will create an SME investment strategy and UK and international collaboration programme
8. Global Accelerator	This is a programme of scouting, selection, acceleration and funding of eight UK-based SMEs to develop business offerings for a selected global market, including travel and in-country immersion support. SMEs will each receive £20k passthrough + travel for in-country immersion. This supports the internationalisation of SME agenda.
9. PR and Comms	This supports the promotion of DIATOMIC locally, nationally and globally, enhancing the profile of the city-region and positioning it as a leader in city-diplomacy and city-to-city innovation.

For major projects and programmes over £20m:

A detailed Benefits Register is attached at G5 below.

N/A

B4. Benefits Realisation Plan

Set out here how you will ensure the planned benefits will be delivered

The overall management of the project will be undertaken by the CPC. Agile management methods and collaborative working practices will be used throughout the project with the consortium. The Monitoring Officer will receive quarterly reporting on progress, deliverables, milestones, decisions, issues and risks. The PM will track project status, direct the non-technical aspects of the project, make timely and informed

decisions and regularly update the overall gantt chart, work breakdown structure and risk register. The PM will maintain a joint project schedule containing dates, tasks, deliverables, milestones and dependencies. Regular reporting will be agreed upon between partners using appropriate collaborative working toolsets (e.g. MS Teams or Zoom) and a shared data repository. Periodic face-to-face meetings (within safety guidelines) will be held within Work Package elements. A detailed work plan will be drafted if the project is approved.

Evidence of delivering similar project

BCC have delivered a number of relevant national and international projects that demonstrate our place-based approach to working with partners across the city, region and globally. Below is a list of relevant research, development and innovation activities that exemplify our ability to deliver on our ambitions and are thematically, related to the DIATOMIC project.

- Birmingham Digital Partnership - Set and championed Birmingham's ambition as a digital city and promoted Digital Birmingham nationally and internationally, attracting investment and support from business and government
- Smart Routing – Innovate UK
- Horizon 2020 City4Age: The EU-supported City4Age project developed a 'social prevention model' of elderly care, utilising 'ambient' ICT tools and services.
- Interreg Europe: Better - Stimulating Regional Innovation through Better e-Government Services which aims to deliver an increase in innovation by 10% at the end of 2023. This has included a focus on better support for SMEs by connecting them with innovation and digital solutions.
- ERDF Big Data corridor – Using data to create new businesses and products through an innovative approach.
- H2020 Pulse project – Data-driven project for how you capture data on air quality and how you devise interventions. To accomplish the transformation of public health systems, and stimulate the development of intersectoral policy in cities, PULSE has leveraged large amounts of data from city governments, health systems, and citizens (via sensing technologies and social media).
- Urban Innovative Actions USE IT project - combining research and social innovation.
- West Midlands Innovation Fund – Digital Innovation In Public Services which aims to remove the procurement barriers for locally based digital SMEs to accessing public sector contracts.

B5. Stakeholders

A stakeholder analysis is set out at G4 below. A summary of consultation responses is in the covering Executive report.

C. ECONOMIC CASE AND OPTIONS APPRAISAL

This sets out the options that have been considered to determine the best value for money in achieving the Council's priorities

C1. Summary of options reviewed at Outline Business Case

(including reasons for the preferred option which has been developed to FBC)

If options have been further developed since the OBC, provide the updated Price quality matrix and recommended option with reasons.

No prior Council Outline Business Case has been brought forward for approval. This report therefore seeks approval to progress with the project as detailed within this Full Business Case (FBC) and to accept the offer of grant funding.

The project provides the council with the opportunity to build on projects that have already been trialled in the council, namely the Use IT (Unlocking Social and Economic Innovation Together) project and the DIPS (Digital Innovation In Public Services) project. DIATOMIC is fully funded by Innovate UK and will not require any council funding for the delivery of any of the work packages.

C2. Evaluation of key risks and issues

The full risks and issues register is included at the end of this FBC

[drawing attention to the biggest items only]

Connected Places Catapult has developed a risk management register which will be reviewed regularly by the project board which will include representation from Birmingham City Council. A project governance structure has been identified to ensure risks are appropriately managed.

1. There is a risk around audit and potential clawback of the external funding on the basis of eligibility or poor document/data retention/failure to comply with the funding conditions. This risk will be mitigated as tried and tested policies and templates are in place which are already in use. The BCC project leads have extensive experience in managing multi-level complex projects and can mitigate against this through effective project management.

2. The biggest risks for the partnership are cost of development of digital twin outgrows budget; work to develop themes progresses too slowly to deliver solution within time frame; market opportunities change or are not accessible for businesses engaged on the programme all these risks will be managed through regular project management meetings to monitor spend and progress. The last risk is thorough and continued market research conducted throughout the duration of the programme. Support offered to businesses enables them to pivot and respond to emerging opportunities.

3. The biggest risk for the BCC elements of the project is that covid restrictions are reintroduced making it difficult to engage with social economy and SMEs more difficult in East Birmingham.

C3. Other impacts of the preferred option

Describe other significant impacts, both positive and negative

[bullet points are ok]

Connected Places Catapult calculated the potential value of project activity as described below:

- Clean Tech in West Midlands is an exciting growth opportunity: a further £420m to £470m of output and 4,400 to 4,900 jobs will be created by matching the growth trajectory of the leading UK region for similar clusters.
- Health Tech and Med Tech in West Midlands show additional growth opportunities: a further £400m to £430m of output and 5,300 to 5,900 jobs by matching the growth trajectory of the leading UK region for similar clusters.
- Embracing digital and open data within our projects also creates impact to drive markets. The proposed projects have the potential to increase gross domestic product by approximately £145m-436m over the project period by improving access to, and availability of, data in the city.
- The pilot will be delivered in East Birmingham and aligned to the East Birmingham Inclusive Growth Programme. It will open opportunities to the diverse base of SMEs and social

businesses (traditionally attracting women and migrants) who represent the untapped economic potential of our region. This links to the WMCA's pledge to double the social economy spend by 2030 and the work of WMCA's SE Task Group creating new social economy clusters and linking them with local innovation ecosystems and the real market opportunities.

The project will link to the following BCC policies and strategies:

- East Birmingham Inclusive Growth Strategy – through the development of a new Inclusive Innovation Network and resulting opportunity for women led and ethnic minority led enterprise.
- Route to Zero Clean Air Zone – providing business solutions to reduce carbon emissions through the city challenges
- Everyone's Battle Everyone's Business – by supporting social businesses and SMEs in E Birmingham to take part in a business acceleration programme.
- Birmingham's City Observatory – by supporting the city through the work of the digital twin to provide access to open data in the themes of health tech and clean tech.

D. COMMERCIAL CASE

This considers whether realistic and commercial arrangements for the project can be made

D1. Partnership, Joint venture and accountable body working

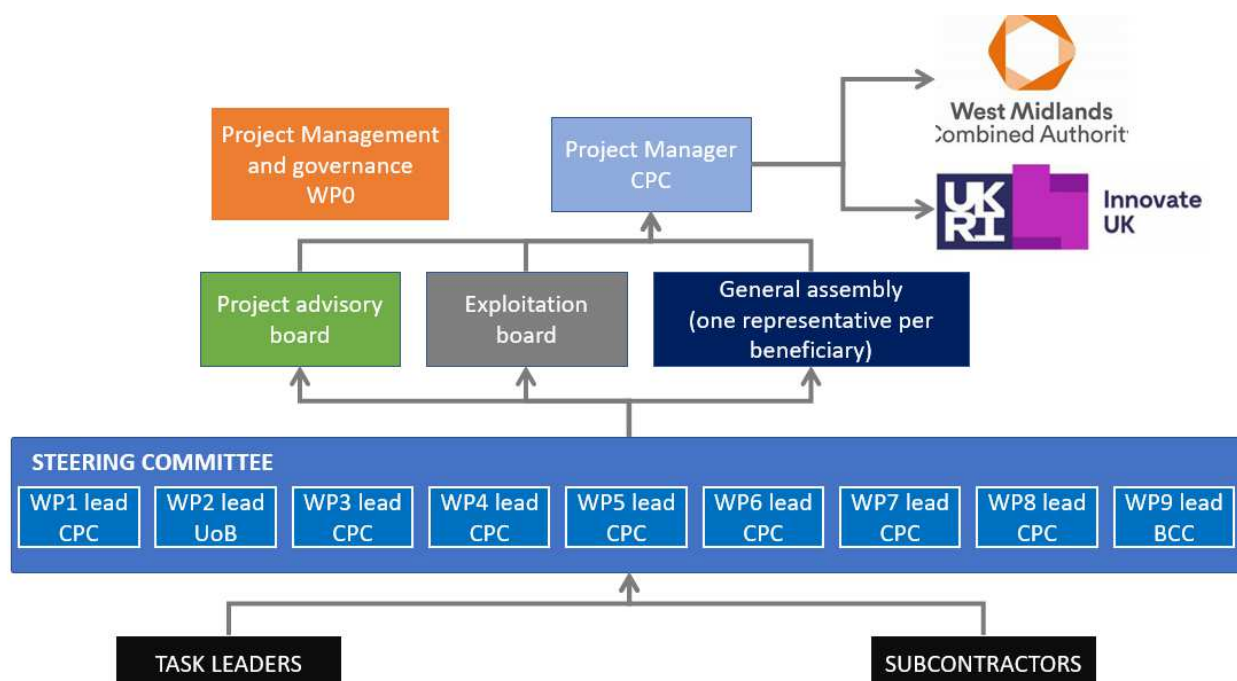
Describe how the project will be controlled, managed and delivered if using these arrangements

The project is a partnership of 6 organisations including BCC, 3 universities, Greater Birmingham Chambers of Commerce and Connected Places Catapult.

A Project Board will be formed including representatives of all organisations and led by the Lead Partner Connected Places Catapult (Accountable Body).

Each of the work packages will have a steering group led by the assigned organisation. BCC is responsible for WP 9 PR, Communications and Dissemination.

The complete management structure is shown in this diagram.



D2. Procurement implications and Contract Strategy:

APPENDIX 1

What is the proposed procurement contract strategy and route? Which Framework, or OJEU? This should generally discharge the requirement to approve a Contract Strategy (with a recommendation in the report).

The Council will undertake several procurement exercises during the course of the DIATOMIC project. In total, the Council will procure a total of £0.285m procured services to include: £0.160m for WP 3 which will fund a £0.05m business engagement and advice programme; £0.05m challenge programme for impact entrepreneurs; £0.06m; first phase of the grant programme for health innovation involving social enterprises led by and creating employment for protected characteristics with a specific focus on launching or scaling up sustainable business ideas.

WP 9 will procure £0.125 in total, £0.100m to fund an international city innovation network and £0.025m to fund global events.

The value of this procurement activity is above the £0.2m limit where the Birmingham Business Charter for Social Responsibility applies. The proposed procurement will ensure that the Living Wage Policy is applied as appropriate.

D3. Staffing and TUPE implications:

The roles and nature of the jobs are subject to the wider redesign of European and International Affairs and Business Development. These will be communicated at a later date. The Council will administer the BCC part of the project whilst the overall management will sit with Connected Places Catapult.

There are no TUPE implications.

E. FINANCIAL CASE

This sets out the cost and affordability of the project

E1. Financial implications and funding

Financial Year:		20xx/yy	20xx/yy	20xx/yy	later	Total
		£000	£000	£000	£000	£000
Capital code:						
CAPITAL EXPENDITURE						
Capital costs already incurred						0.0
						0.0
Other costs to complete:						
Fees						0.0
Land acquisition						0.0
Works						0.0
[please itemise other costs]						0.0
						0.0
Contingencies						0.0
Total capital expenditure		0.0	0.0	0.0	0.0	0.0
CAPITAL FUNDING:						
Development costs funded by:						
[please itemise]						0.0
						0.0
Other costs funded by:						
[please itemise]						0.0
						0.0
						0.0
Total capital funding <i>must fund all the costs</i>		0.0	0.0	0.0	0.0	0.0

	2022/2023	2023/2024	Total
REVENUE CONSEQUENCES			
Revenue cost during project delivery			
BCC	£517,801.60	£517,801.60	£1,035,603.20
Operating period expenditure	£0.00	£0.00	£0.00
Less Income			
Innovate UK Funding			
Salaries	-£230,615.22	-£230,615.22	-£461,230.44
Overheads	-£58,383.60	-£58,383.60	-£116,767.20
Commissioning	-£142,500.00	-£142,500.00	-£285,000.00
Materials	-£25,000.00	-£25,000.00	-£50,000.00
Net Revenue Consequences	£61,302.78	£61,302.78	£122,605.56
REVENUE FUNDING			
Current Budget Provision (BCC)	£61,302.78	£61,302.78	£122,605.56
Total Revenue Funding	£61,302.78	£61,302.78	£122,605.56

On receipt of the funding agreement, a more detailed delivery plan will be established which sets out how the grant funding will be distributed between the BCC service areas to cover the costs detailed in the Full Business Case eg staffing, commissioning etc. This is still subject to further refinement and discussion. This will be part of the delegated authority to the appropriate service directors.

E2. Evaluation and comment on financial implications:

The total project cost is £6.2m. The project is split across 2 financial years, ending in 2024/25.

The split across the individual expenditure categories for the project is also shown in a separate table above

The City Council element of the overall programme totals £1.035m. An analysis by expenditure category is shown above.

The City Council's match contribution to the project of £0.122m consists of staff costs (East Birmingham Inclusive Growth staff).

Grant conditions will be detailed in the Partnership Agreement between Connected Places Catapult and the City Council and based on the activities described in the project application.

Innovate UK may seek to clawback funding if expenditure is ineligible or if funding is claimed for activities/outputs that did not take place.

This project is an innovative project designed to test new approaches to boost innovative entrepreneurship. It is also linked to the delivery of East Birmingham Inclusive Growth Strategy and as such is seen as part of the EBIGS portfolio of projects. Any financial implications arising from the transfer of best practice will be covered by subsequent Cabinet Reports linked to EBIGS

E3. Approach to optimism bias and provision of contingency

[E3 and E4 should require only a few lines each]

The project will be fully evaluated and approved by Innovate UK and supported by the WMCA. No optimism bias or provision of contingency has been designed because this is an innovative project and it is expected that even a failure is a learning outcome providing that sufficient analysis has been conducted and lessons drawn. The European and International Team have substantial experience in managing research and innovation projects. The risk factor linked to experimentation inherently present in all innovative projects will be utilised for the benefit of the project to enrich its learning and test some non-standard approaches.

E4. Taxation

Describe any tax implications and how they will be managed, including VAT

Tax will be deducted from the yearly financial claims submitted to the Accountable Body.

F. PROJECT MANAGEMENT CASE

This considers how project delivery plans are robust and realistic

F1. Key Project Milestones

The summary Project Plan and milestones is attached at G1 below

Planned Delivery Dates	
Planned start date for delivery of the project	1 st April 2023
Xxx Survey /Planning approval etc complete (as appropriate)	n/a
Main contract award	2 nd April 2023
Practical completion	31 st March 2025
Date Project operational	2nd April 2023
Date of Post Implementation Review	31 st March 2025

F2. Achievability

Describe how the project can be delivered given the organisational skills and capacity available

Tried and tested policies and templates are in place which are already in use on several projects, and the Project Leads within European and International Affairs and Digital and Customer Services have experience in successfully managing similar funded projects over the years. WP 3 and WP4 are based on projects that have already been successfully delivered with the City Council. WP4 is based on the Use IT project methodology which was managed by Karolina Medwecka in E&IA and WP 4 will expand the Digital Innovation In Public Services (DIPS) model which was trialled with council colleagues in 2022.

F3. Dependencies on other projects or activities

The project will link to work which is currently being pursued in the city council including the Data Observatory and the Route to Zero.

F4. Officer support

Project Manager: Mark Reed
Mark.Reed@birmingham.gov.uk
 Tel: 07917445066

Project Accountant: Rob Pace
Rob.Pace@birmingham.gov.uk
 Tel: 0121 303 3817

Project Sponsor:

F5. Project Management

Describe how the project will be managed, including the responsible Project Board and who its members are

The accountable body for the project is Connected Places Catapult. This partner will convene a project board which is made up of representatives from the partnership.

Connected Places Catapult – Luciano Falco,
luciano.falco@cp.catapult
 170 Midsummer Boulevard, Milton Keynes, United Kingdom, MK9 1BP

University of Birmingham – Martin Freer
M.Freer@bham.ac.uk
 Edgbaston, Birmingham, West Midlands, B15 2TT

Birmingham City University – Martin Weston
martin.weston@bcu.ac.uk
 University House, 15 Bartholomew Row, Birmingham B5 5JU

Aston University – Paul Knobbs
P.R.KNOBBS@aston.ac.uk
 Aston University, Aston Triangle, Birmingham, West Midlands, B4 7ET

Birmingham City Council – Mark Reed
Mark.Reed@birmingham.gov.uk
 Council House, Victoria Square, Birmingham, United Kingdom, B1 1BB

Greater Birmingham Chamber of Commerce and Industry – Sunny Claire
s.claire@birmingham-chamber.com
 75 Harborne Road, Edgbaston, Birmingham B15 3DH

G. SUPPORTING INFORMATION

(Please adapt or replace the formats as appropriate to the project)

G1. PROJECT PLAN

Detailed Project Plan supporting the key milestones in section F1 above

A detailed project plan will be provided once the project is approved and second level planning has taken place.

G2. SUMMARY OF RISKS AND ISSUES REGISTER			
<i>Risks should include Optimism Bias, and risks during the development to FBC</i>			
<i>Grading of severity and likelihood: High – Significant – Medium - Low</i>			
		Risk after mitigation:	
Risk or issue	mitigation	Sever-ity	Like-lihood
There is a risk around audit and potential clawback of the external funding on the basis of eligibility or poor document/data retention/failure to comply with the funding conditions.	This risk will be mitigated as tried and tested policies and templates are in place which are already in use. The BCC project leads have extensive experience in managing multi-level complex projects and are able to mitigate against this through effective project management.	High	Low
The biggest risk for the BCC elements of the project is that covid restrictions are reintroduced making it difficult to engage with social economy and SMEs more difficult in East Birmingham.	This risk will be mitigated as we have existing links with the social economy via city council networks and civil society. Online methods of working have been adopted during lockdowns and these will be reinstate in this instance.	Mediu m	Low
Cost of development of digital twin outgrows budget	Regular project management meetings to monitor spend and the examination of budget flexibility and descope options.	High	Low
market opportunities change or are not accessible for businesses engaged on the programme meaning the access to real market opportunities determine the longitudinal success of the programme as it guarantees further income for businesses engaged in the programme	Regular project management meetings with clear monitoring of progress and planning for descope options	Mediu m	Low
Timely availability of the platform meaning Delay in being able to use the base framework for the digital twin	The twin will be developed as an executable prototype ready for deployment. If the platform is late then this will not prevent the case study impact being delivered. Begin procurement before project start	High	Low

G3. EXTERNAL FUNDING AND OTHER FINANCIAL DETAILS

Description of external funding arrangements and conditions, and other financial details supporting the financial implications in section E1 above (if appropriate)

The total project costs of £1.035m will be 88% grant funded as 12% match funding is required for the City Council in this Innovate UK project.

Legal and compliance issues associated with the Innovation Accelerator grant and the project will be delivered within funding conditions set out in the standard grant agreement issued by the Innovate UK Secretariat.

Terms and Conditions have been reviewed and agreed by Legal Services and, in the context of the project, they are not deemed onerous and are acceptable to the Council.

BCC officers in charge of the project have a comprehensive understanding of and are content with the terms and conditions outlined in the grant agreement and have the necessary measures in place to ensure compliance. Robust management and monitoring processes will be put in place to ensure compliance as per other externally funded projects the teams delivered to date.

G4. STAKEHOLDER ANALYSIS		
Stakeholder	Role and significance	how stakeholder relationships will be managed
University of Birmingham	Is responsible for providing a use case for the digital twin and is the main lead with Siemens who will develop the physical infrastructure for the Digital Twin. Leads on WP 1.	Will be managed by the accountable body Connected Places Catapult
Birmingham City University	Is responsible for providing a use case for the digital twin and will deliver the workshops for work package 4	Will be managed by the accountable body Connected Places Catapult
Aston University	Is responsible for providing a use case for the digital twin and will be co-delivering work package 3	Will be managed by the accountable body Connected Places Catapult
Greater Birmingham Chambers of Commerce	Will feed into work package 7 and 8 by providing access to global networks and innovators.	Will be managed by the accountable body Connected Places Catapult
Connected Places Catapult (CPC)	CPC is the accountable body for the project and the lead on all work packages with the exception of work package 9 (BCC responsible for this) and work package 1 (University of Birmingham responsible for this).	Is the accountable body for the project

G5. BENEFITS REGISTER

For major projects and programmes over £20m, this sets out in more detail the planned benefits. Benefits should be monetised where it is proportionate and possible to do so, to support the calculation of a BCR and NPSV (please adapt this template as appropriate)

Measure	Annual value	Start date	Impact
<i>List at least one measure associated with each of the outcomes in B1 above</i>			<i>What the estimated impact of the project will be on the measure identified</i>
(a) Monetised benefits:	£		
(b) Other quantified benefits:			
(c) Non-quantified benefits:	n/a		

Other Attachments

provide as appropriate

<ul style="list-style-type: none"> Eg. Outcome of consultation Technical Feasibility Assessments Site plans and drawings Summary of Impact assessments External Funding and Partnership agreement implications 	
•	
•	
•	

Title of proposed EIA	Diatomic (Digital Innovation Transformative Change)
Reference No	EQUA1036
EA is in support of	Amended Policy
Review Frequency	Two Years
Date of first review	31/03/2025
Directorate	Inclusive Growth
Division	European and International Affairs
Service Area	European and International Affairs
Responsible Officer(s)	<input type="checkbox"/> Heather Law
Quality Control Officer(s)	<input type="checkbox"/> Janet L Hinks
Accountable Officer(s)	<input type="checkbox"/> Lloyd Broad
Purpose of proposal	To build the innovation capability and capacity to drive growth and prosperity in Birmingham.
Data sources	
Please include any other sources of data	Innovate UK project (Innovation Accelerator)
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Not Applicable
Age details:	Not Applicable.
Protected characteristic: Disability	Not Applicable
Disability details:	Not Applicable.
Protected characteristic: Sex	Service Users / Stakeholders
Gender details:	Focus on including women in Innovative Entrepreneurship.
Protected characteristics: Gender Reassignment	Not Applicable
Gender reassignment details:	Not Applicable.
Protected characteristics: Marriage and Civil Partnership	Not Applicable
Marriage and civil partnership details:	Not Applicable.
Protected characteristics: Pregnancy and Maternity	Not Applicable
Pregnancy and maternity details:	Not Applicable.
Protected characteristics: Race	Service Users / Stakeholders
Race details:	Ethnic minorities.

Protected characteristics: Religion or Beliefs	Not Applicable
Religion or beliefs details:	Not Applicable.
Protected characteristics: Sexual Orientation	Not Applicable
Sexual orientation details:	Not Applicable.
Socio-economic impacts	Placing the innovation accelerator project in East Birmingham and linking it to the East Birmingham Inclusive Growth Programme specifically opens the opportunities to the diverse base of SMEs and social businesses (traditionally attracting women and migrants) who are the untapped potential of our city.
Please indicate any actions arising from completing this screening exercise.	None identified at this stage.
Please indicate whether a full impact assessment is recommended	NO
What data has been collected to facilitate the assessment of this policy/proposal?	
Consultation analysis	Not Applicable.
Adverse impact on any people with protected characteristics.	None
Could the policy/proposal be modified to reduce or eliminate any adverse impact?	Not Applicable.
How will the effect(s) of this policy/proposal on equality be monitored?	By assessing the number of ethnic minority and women businesses supported.
What data is required in the future?	Numerical businesses led by women and ethnic minorities.
Are there any adverse impacts on any particular group(s)	No
If yes, please explain your reasons for going ahead.	Not Applicable.
Initial equality impact assessment of your proposal	The benefits of diversity in new business growth and entrepreneurial ship have been clearly articulated and accepted in the Rose Review (Gender) and McGregor review (Race), millions would be added to the economy. Innovate UK itself only sees 1 in 7 applications from women and estimate that if the number of women led businesses were representative then an additional £180bn could be added to

Consulted People or Groups

the economy. This is an assessment of the national level which will need to be reduced in line with the Birmingham population total.

Aston University (CREME), i-SE (Initiative for Social Entrepreneurs), BSSEC, Living Well Consortium, Forward Carers Consortium and University of Birmingham Tyseley Energy Park.

Informed People or Groups

Not Applicable at this stage.

Summary and evidence of findings from your EIA

A full assessment is not required.

QUALITY CONTORL SECTION

Submit to the Quality Control Officer for reviewing?

Yes

Quality Control Officer comments

Proceed for final approval.

Decision by Quality Control Officer

Proceed for final approval

Submit draft to Accountable Officer?

Yes

Decision by Accountable Officer

Approve

Date approved / rejected by the Accountable Officer

Reasons for approval or rejection

Please print and save a PDF copy for your records

Yes

Content Type: Item

Version: 3.0

Created at 13/12/2022 02:44 PM by ☐ Sukhi Kaur

Last modified at 13/12/2022 02:44 PM by Workflow on behalf of ☐ Sukhi Kaur

Close

Birmingham City Council

Report to Cabinet

16th May 2023



Subject: ICB FURTHER SUPPORT FUNDING 2022/23 VIA SECTION 256

Report of: Professor Graeme Betts, CBE
Strategic Director for Adult Social Care

Relevant Cabinet Member: Cllr Mariam Khan - Health and Social Care
Cllr Yvonne Mosquito - Finance and Resource

Relevant O & S Chair(s): Cllr Mick Brown - Health and Social Care
Cllr Aikhlaq Ahmed - Resources

Report author Neil Haddock
ASC Finance Business Partner
Email: Neil.Haddock@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011385/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 As a response to the financial pressures facing Birmingham City Council and the need for investment in areas of mutual benefit, the Birmingham and Solihull Integrated Care Board have identified further one-off funding of £0.500m to cover expenditure incurred in the financial year 2022/23 by the Adult Social Care

Directorate of Birmingham City Council. This is in addition to funding of £16.765m that was previously identified and accepted by the Cabinet at its meeting of 21st March 2023.

- 1.2 Accepting this funding will allow Birmingham City Council to meet in-year financial pressures, fund new areas of provision and enhance preventative services, to the benefit of the whole Health and Social Care system.

2 Recommendations

- 2.1 Cabinet is recommended to; -

- 2.1.1 Accept the funding to contribute towards the 2022/23 pressures as well as invest in new areas of mutual benefit in Adult Social Care and approves the s151 officer to enter into a S256 agreement to that effect.

3 Background

- 3.1 Birmingham City Council has an established record of working with NHS partners to align, and integrate where appropriate, delivery, commissioning, reporting, and funding of services, through pooled budgets, shared resources, and joint models of service delivery. The strength of this relationship and the existing joint working is recognised as fundamental to the success of the Birmingham system's response to the post pandemic market, as well as investing in preventative and transformative areas for the mutual benefit of the health and social care system.
- 3.2 At its meeting of 21st March Cabinet accepted recommendations to accept funding of £16.765m whereby both organisations agreed to put in place a S256 agreement to fund the services which we provide and commission, in order to recognise the value of these services, and their benefit to the whole system of Health and Social Care in Birmingham.
- 3.3 Subsequent to this decision, the ICB approached the Council on 30th March having identified further one-off funding of £0.500m for the 2022/23 financial year
- 3.4 As such the ICB has:
 - 3.4.1 Offered funding to help mitigate the significant cost pressures faced by the Council in social care budgets for learning disability package and placement costs, by covering expenditure already incurred in the financial year 2022/23.
 - 3.4.2 Offered funding to meet 22/23 adult social care costs that thereby enable the Council to invest in a new Fairer Futures (Learning Disabilities) Fund for a year. This fund will support a range of integrated activities to address health inequalities in the city.

4 Options considered and Recommended Proposal

- 4.1 The alternative option is to not accept the offer of funding from the ICB. This would represent the loss of an opportunity to mitigate existing in-year pressures and to enable greater investment into the delivery of ICS priorities via the Fairer

Futures (Learning Disabilities) Fund. **The only option considered is the recommended option of accepting the funding.**

5 Consultation

- 5.1 All joint initiatives in section 3.4 have been discussed with system partners including through the Better Care Fund Programme Board.

6 Risk Management

- 6.1 If funding was not accepted and received by 31st March 2023 the option for support funding would have been lost for 2022-2023 as it cannot be carried into next financial year. Cabinet approval is required immediately in order to remove this risk.
- 6.2 The S256 agreement governs the use of this funding to ensure that there is no future legal issue with the transfer

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

- 7.1.1 This support funding is partnership working across the local Health and Social Care system to ensure core activity, prevention and future investment is maintained at a level which ensures the best outcomes for citizens in need of, or soon to be in need of social care support.

7.2 Legal Implications

- 7.2.1 The S256 agreement comes under the National Health Service Act 2006 (a) and gives the Secretary of State the power to enter into this agreement.
- 7.2.2 The Section 256 agreement has been drafted in consultation with Legal Services and does not commit the authority to further expenditure.
- 7.2.3 Other initiatives detailed as part of the partnership funding will be governed by separate legal agreements and brought to Cabinet in due course as set out in section 3.4.
- 7.2.4 Nothing in the S256 agreement for consideration in this report legally commits the Council to that future spending decision.
- 7.2.5 There is no personal data involved in the funding agreement.

7.3 Financial Implications

- 7.3.1 The impact of the General Fund resources freed up allows the Council to meet the pressures on the general fund reported in 2022-2023, continue the preventative work which will reduce longer term pressures on social care, and fund future Council investment in Social Care and systemwide initiatives, including contribution to the longer-term investment pool, without needing to

increase Adult Social Care budget beyond that already set in the Medium-Term Financial Plan.

- 7.3.2 Future initiatives funded by these investment pools will bring financial benefit to the local system as a whole – with agreements still to be drawn up around how much of this can be released to each organisation and how much should be reinvested.

7.4 Procurement Implications (if required)

- 7.4.1 None

7.5 Human Resources Implications (if required)

- 7.5.1 None

7.6 Public Sector Equality Duty

- 7.6.1 There are no equality implications from the acceptance of the support funding as this covers expenditure already incurred through arrangements in place for the discharge of the Council's social care responsibilities.

7.7 Environmental and Sustainability Implications

- 7.7.1 None. This is a financial report with no sustainability/environmental implications.

8 Appendices

- 8.1 Appendix 1 – Section 256 Partnership Arrangements 2022/23 LD

9 Background Documents

Cabinet Decision 21st March 2023 (Forward Plan Ref. No. 011116/2023) – ICB Support Funding 2022/23 Via Section 256

**Memorandum of Agreement
SECTION 256 PARTNERSHIP ARRANGEMENTS**

Annex 1

**(To be completed for each partnership arrangement and updated annually
for amendment of a partnership arrangement)**

Reference number:

**Title of Scheme:2022/23 revenue grant to support learning disability social care
services.....**

1. NAMES OF THE STATUTORY PARTNERS (Officers & Organisations)	Birmingham City Council and NHS Birmingham & Solihull Integrated Care Board
2. DATE OF AGREEMENT	31 st March 2023
3. DATE WHEN PARTNERSHIP IS INTENDED TO START OR DATE OF ANNUAL UPDATE FOR DH IF THIS HAS BEEN PREVIOUSLY NOTIFIED	31 st March 2023
4. TITLE OF OFFICER RESPONSIBLE FOR THE PARTNERSHIP	Director of Finance
5. CONTACT NAME	Heather Moorhouse
6. CONTACT TEL. No./email	Heather.Moorhouse1@nhs.net
7. CONTACT ADDRESS	NHS Birmingham & Solihull ICB Wesleyan, Colmore Circus Queensway, Birmingham B4 6AR
7a. CONTACT DETAILS FOR BIRMINGHAM CITY COUNCIL	Neil Haddock Interim Business Partner Neil.Haddock@birmingham.gov.uk

<p>8. WHICH CARE GROUP OR CATEGORY DOES THE PARTNERSHIP SERVE?</p>	<p>Residents of the Birmingham City Council area receiving learning disabilities adult social care services through domiciliary and residential/nursing home package costs.</p>
<p>9. SUMMARY OF KEY OBJECTIVES/DESCRIPTION OF SERVICE</p>	<p>In 2022/23 the Local Authority has shared details of the financial pressures on their budgets due to the operational response and demands for services over this past 12 months.</p> <p>This contribution is to part mitigate the significant cost pressures in social care budgets for learning disability packages costs. The demand for services is substantial and has resulted in a significant overspend for BCC against baseline funding. Inflationary pressures are adding to this issue due to care home providers (largely independent sector) seeking high fee increases, above planned rates, to meet their rising costs eg wage inflation, energy and food costs.</p> <p>The ICB already joint funds a number of LD packages of care and works closely with LA partners particularly to support community placements for clients under the Transforming Care programme. Learning disability services have historically been part of joint commissioning arrangements and supported by a Section 75 agreement between BCC and the former CCGs.</p> <p>Funding is available, from NHS resources in 22/23, due to non-recurrent flexibility with the current financial year, as indicated from the most recent assessment of the System financial position due to non-recurrent SDF LD allocations which have not been fully utilised (in part due to the impact of system transition from CCG to ICS and some key shortfalls in commissioning capacity to take forward LD initiatives) and also from release of 21/22 expenditure accruals from the balance sheet.</p>
<p>10. HOW THE SECTION 256 WILL SECURE MORE HEALTH GAIN THAN AN EQUIVALENT EXPENDITURE OF MONEY ON THE NHS</p>	<p>From an ICS perspective, it is important that we make best use of all resources available to BSOL, to support pressures and underpin the resilience of the wider health and care system. This non-recurrent funding will help support the sustainability of social care services which have a significant impact on people's lives, including enabling BSOL residents to live well within their local neighbourhoods and communities in the most appropriate setting.</p> <p>The funding will assist in underpinning the care market and prevent breakdown in placements, where pressures within LA budgets could contribute to the inability to reach agreement on funding uplifts. This could, in turn, have consequence for activity across all health care services and sectors, for example through the demand for access to GP or specialist community LD health services to support those clients or impact into ED or other emergency provision for any escalations.</p> <p>By supporting these services in social care, we are able to deliver a health gain that would otherwise not be possible within the NHS.</p>

<p>11. CONTRIBUTIONS</p> <p>IDENTIFY THE S256 FINANCIAL CONTRIBUTION AND ANY OF THE OTHER PARTNER SEPARATELY</p>	<p>NHS Birmingham & Solihull ICB Non recurrent £500,000 in 2022/23</p> <p>This is towards learning disability package costs (domiciliary and in residential/nursing homes).</p> <p>All amounts payable under this Section 256 Partnership Arrangement are exclusive of VAT.</p> <p>The payment will be by CHAPS transfer. The timing of the payments will be agreed between the ICB and the Council.</p> <p>The funding is being given on a non-recurrent basis. This is to reflect the additional costs being incurred by our System partners in 2022/23 in support of the health and care system and in response to current operational pressures and, therefore, there will be no ongoing commitment to funding beyond this financial year. If the funding is not fully committed as outlined above in 2022/23 then there would be further agreement on use of the funding between ICB (or any successor body) and the Local Authority.</p>
--	---

<p>SIGNED by</p> <p>David Melbourne for and on behalf of NHS BIRMINGHAM AND SOLIHULL ICB</p>	<p>.....</p> <p>Signature</p> <p>Title Chief Executive</p> <p>.....</p> <p>Date</p> <p>.....</p>
<p>SIGNED by</p> <p>Fiona Greenway for and on behalf of BIRMINGHAM CITY COUNCIL</p>	<p>.....</p> <p>Signature</p> <p>Title Director of Finance (s151 officer)</p> <p>.....</p> <p>Date</p> <p>.....</p>

ANNEX 2 – Annual voucher and certificate for auditors

The following annual voucher must be used as required by direction 5(1).

Section 256 Annual Voucher

.....Council

PART 1 STATEMENT OF EXPENDITURE FOR THE YEAR 31 MARCH 2023

Scheme Reference Number [XXX]

Title: 2022/23 revenue grant to support social care services

Revenue Expenditure Total £

Project £

PART 2 STATEMENT OF COMPLIANCE WITH CONDITIONS OF TRANSFER

I certify that the above expenditure has been incurred in accordance with the conditions, including any cost variations, for each scheme approved by the
..... Board in accordance with these Directions.

Signed: Date:

..... Director of finance or
responsible officer of the recipient

NATIONAL HEALTH SERVICE, ENGLAND

The National Health Service (Conditions Relating to Payments by NHS Bodies to Local Authorities) Directions 2013

The Secretary of State for Health gives the following Directions in exercise of powers conferred by sections 256(6) and (7), 272(7) and (8) and 273(1) and (4) of the National Health Service Act 2006(a).

Citation, commencement and interpretation

1.—(1) These Directions may be cited as the National Health Service (Conditions Relating to Payments by NHS Bodies to Local Authorities) Directions 2013 and come into force on 20 May 2013.

(2) In these Directions—

“the Act” means the National Health Service Act 2006;

“capital costs” means expenditure of a capital nature incurred by a recipient;

“disposal” includes a disposal by way of a sale, an assignment, the creation of any lease or tenancy, a surrender or a merger, and “disposes” shall be construed accordingly;

“paying authority” means the Board or clinical commissioning group which makes a payment to the local authority under section 256 or 257;

“recipient” means—

(a) in the case of a payment under section 256 of the Act, a body specified in section 256(1), (2) or (3), which has received, or is to receive, a payment under section 256,

(b) in the case of a payment under section 257 of the Act, a voluntary organisation which has received, or is to receive, a payment under that section;

“responsible officer” means an officer of the recipient who for the time being is responsible for discharging the function of authenticating and certifying the voucher in accordance with direction 5(3) of these Directions; and

“section 256 or 257” means section 256 or 257 of the Act.

Conditions relating to section 256 or 257 payments

2.—(1) This direction applies to any payment made by a paying authority under section 256 or 257, and any such payment must be made subject to and in accordance with the conditions specified in the following paragraphs(b).

(2) Before making a payment under section 256 or 257, the Board or a clinical commissioning group must be satisfied that the payment is likely to secure a more effective use of public funds than the deployment of an equivalent amount on the provision of services under arrangements made under sections 3(1), 3A or 3B of the Act(c).

(a) 2006 c.41 (“2006 Act”); section 256 was amended by paragraph 129 of Schedule 4 to the Health and Social Care Act 2012 (c.7) (“the 2012 Act”). The powers exercised by the Secretary of State in giving these Directions are exercisable only in relation to England, by virtue of section 271(1) of the 2006 Act.

(b) The conditions specified in Directions 2 and 3 of these Directions in so far as they relate to section 256 or 257 payments made by the Board are to be read together with conditions relating to payments by the Board set out in the National Health Service Commissioning Board (Payments to Local Authorities) Directions 2013.

- (c) Section 3(1) of the Act was amended by section 13(1) and (2) of the 2012 Act; sections 3A and 3B of the 2006 Act were inserted by sections 14 and 15, respectively, of the 2012 Act.

(3) Direction 2(2) is subject to the requirements under Direction 2 of the National Health Service Commissioning Board (Payments to Local Authorities) Directions 2013 (minimum amounts of section 256 payments)(a).

(4) Where a payment is made under section 256 or 257 to meet part or all of the capital costs of any project, the amount of the payment must be determined before the project begins.

(5) Before making any payment to which this paragraph applies in respect of any project, the Board or a clinical commissioning group must be satisfied that the recipient intends to meet the cost of the project—

- (a) to the extent that it is not funded by payments under section 256 or 257; and
- (b) for so long as the project is considered by the paying authority and the recipient to be necessary or desirable.

(6) This paragraph applies where a recipient which has received a payment made under section 256 or 257 in respect of a project has reduced the level of services provided in connection with the project below the level of services which it undertook to provide at the time the payment was agreed.

(7) Where paragraph (6) applies, the paying authority must reduce accordingly the amount of any further payments made under section 256 or 257 in respect of the project.

Duties of the paying authority in relation to section 256 or 257 payments

3. In the case of any payment made under section 256 or 257, the paying authority making the payment must—

- (a) so far as is practicable, ensure that the payment is used by the recipient in such a way as will secure the most efficient and effective use of the amount paid; and
- (b) with the agreement of the recipient, prepare a memorandum of agreement in writing in the form set out in Annex 1 of these Directions.

Duties of recipients in relation to section 256 or 257 payments4.—(1)

Subject to paragraph (6) below, where—

- (a) a payment has been made under section 256 or 257 towards the cost of acquiring, or of executing works to, land or other property for the purposes of any functions specified in section 256(1) or (3) of the Act; and
- (b) the recipient—
 - (i) disposes of the whole or part of the land or other property, or
 - (ii) uses it or any part of it for any purpose other than that for which the payment was made,

the recipient must repay to the paying authority an amount equal to the proportion of the open market value of the land or other property (or the relevant parts) as is attributable to the expenditure of the payment.

(2) For the purpose of paragraph (1), the open market value of the land or property in question must be assessed by a suitably qualified valuer, who may be a District Valuer, and the apportionment of the part of such value attributable to the expenditure of payment must be made by that valuer.

(3) Where an assessment, or an apportionment, falls to be made in accordance with paragraph (2), it must be made as respects the date at which the disposal is completed or, as the case may be, the alternative use commences.

(4) It is a condition of any payment under section 256 or 257 that the recipient agrees to enter into a legal charge in favour of the paying authority making the payment, at the request of that paying authority, upon the happening of any default.

(5) In this direction, “default” means the circumstances as described in paragraph (1).

(6) This direction does not apply in the case of a payment which has been made towards the cost of acquiring premises for the purpose of rental, where a tenant subsequently exercises a right to buy those premises.

Requirements following the making of a section 256 or 257 payment

5.—(1) Where a payment is made under section 256 or 257, the paying authority must require the recipient to provide an annual voucher in the form set out in Annex 2 to these Directions.

(2) Recipients must send completed vouchers to their external auditor by no later than 30th September following the end of the financial year in question and arrange for these to be certified and submitted to the paying authority by no later than 31st December of that year.

(3) A voucher provided for the purposes of paragraph (1) above must be authenticated and certified by the Director of Finance or responsible officer of the recipient

Revocation and savings and transitional provision

6.—(1) The Directions by the Secretary of State as to the conditions governing payments by Health Authorities and other bodies to local authorities under section 28A of the National Health Service Act 1977(a), which came into force on 28 March 2000, are revoked.

(2) The Directions mentioned in paragraph (1) shall continue to have effect in relation to any payment made under section 256 or 257 before 20 May 2013, subject to the modification specified in paragraph (3).

(3) The modification referred to in paragraph (2) is that references to “NHS body” are to be read as references to—

- (a) in the case where the rights and liabilities of a Primary Care Trust or Strategic Health Authority under the agreement with a recipient in connection with a payment under section 256 or 257 have been transferred to the Board or a clinical commissioning group by a property transfer scheme made under section 300 of the Health and Social Care Act 2012, that Board or group;
- (b) in any other case, the Board or clinical commissioning group responsible from 1st April 2013 for exercising the function under the Act in relation to which, or in connection with which, the payment was made.

Signed by authority of the Secretary of State



Sebastian Habibi Deputy Director
Social Care Strategic Policy and Finance Department of
Health

16 May 2013

(a) There are no relevant amendments to Direction 2 of the National Health Service Commissioning Board (Payments to Local Authorities) Directions 2013.

Birmingham City Council

Report to Cabinet

Date: 16th May 2023



Subject: KEY DECISION PLANNED PROCUREMENT ACTIVITIES (JUNE 2023 – AUGUST 2023) AND QUARTERLY CONTRACT AWARDS (JANUARY – MARCH 2023)

Report of: ASSISTANT DIRECTOR – PROCUREMENT

Relevant Cabinet Member: Councillor Yvonne Mosquito, Finance and Resources

Relevant O &S Chair(s): Councillor Akhlaq Ahmed, Chair of Resources O & S

Report author: Steve Sandercock, Assistant Director, Procurement
Email Address: steve.sandercock@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 011349/2023		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, provide exempt information paragraph number or reason if confidential :		
3. Information relating to the financial or business affairs of any particular person (including the council)		

1 Executive Summary

- 1.1 This report provides details of the planned procurement activity for the period June 2023 – August 2023 which are key decisions and all contract award decisions made under Chief Officer's delegation during the previous quarter. Planned procurement activities reported previously are not repeated in this report

- 1.2 The report enables Cabinet to identify whether any reports for procurement activities should be brought to this meeting for specific executive decision, otherwise they will be dealt with under Chief Officer delegations up to the value of £10m, unless TUPE applies to current Council staff.
- 1.3 Appendix 4 informs Cabinet of the contract award decisions made under Chief Officers delegation during the period January 2023 – March 2023.

2 Recommendations

- 2.1 To approve the planned procurement activities as set out in Appendix 1 and approve Chief Officer delegations, set out in the Constitution, for the subsequent decisions around procurement strategy.
- 2.2 Notes the contract award decisions made under Chief Officers delegation during the period January 2023 – March 2023 as detailed in Appendix 4.

3 Background

- 3.1 The report approved by Council Business Management Committee on 16 February 2016 set out the case for introducing this process.
- 3.2 At the 12th July 2022 meeting of Council changes to procurement governance were agreed which gives Chief Officers the delegated authority to approve procurement contracts up to the value of £10m for key decisions over the life of the contract. Where it is likely that the award of a contract will result in staff employed by the Council transferring to the successful contract under TUPE, the contract award decision has to be made by Cabinet.
- 3.3 In line with the Procurement and Contract Governance Rules that form part of the Council's Constitution, this report acts as the process to consult with and take soundings from Cabinet Members and the Resources Overview & Scrutiny Committee.
- 3.4 This report sets out the planned procurement activity over the next few months where the contract value is between the procurement threshold £177,897.50 (excluding VAT) and £10m (excluding VAT) for key decisions. This will give members visibility of all procurement activity within these thresholds and the opportunity to identify whether any procurement reports should be brought to Cabinet for approval even though they are below the £10m delegation threshold.
- 3.5 It should be noted that the procurement threshold has changed from £189,330 to £177,897.50 (excluding VAT) and applies from 1st January 2022 for a period of 2 years.
- 3.6 Individual procurements may be referred to Cabinet for an executive decision at the request of Cabinet, a Cabinet Member or the Chair of Resources Overview & Scrutiny Committee where there are sensitivities or requirements that necessitate a decision being made by Cabinet.
- 3.7 Procurements below £10m contract value that are not listed on this or subsequent monthly reports can only be delegated to Chief Officers if specific approval is

sought from Cabinet. Procurements above £10m contract value will still require an individual report to Cabinet in order for the award decision to be delegated to Chief Officers if appropriate.

- 3.8 A briefing note with details for each item to be procured is listed in Appendix 2. The financial information for each item is detailed in Appendix 3 – Exempt Information.

4 Options considered and Recommended Proposal

- 4.1 The options considered are:

- To identify specific individual procurements as listed in appendix 1 for further consideration, along with clear reason(s) for such additional consideration, to Cabinet around the procurement strategy and contract award .
- To approve the planned procurement activities for all the projects listed in appendix 1 and approve Chief Officer delegations as set out in the Constitution, for the subsequent decisions around procurement strategy and contract awards.– this is the recommended option

5 Consultation / Engagement

- 5.1 This report to Cabinet is copied to Cabinet Support Officers and to Resources Overview & Scrutiny Committee and therefore is the process for consulting with relevant cabinet and scrutiny members. At the point of submitting this report Cabinet Members/ Resources Overview & Scrutiny Committee Chair have not indicated that any of the planned procurement activity needs to be brought back to Cabinet for executive decision.

6 Risk Management

- 6.1 Members should note that in respect of any procurement projects which are sought to be referred back to Cabinet for further considerations these may impact on timescales around the delivery of those projects.
- 6.2 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

- 7.1.1 Details of how the contracts listed in Appendix 1 and Appendix 2 support relevant Council policies, plans or strategies, will be set out in the individual reports.

7.2 Legal Implications

- 7.2.1 Members are reminded that as a Local Authority the Council has specific duties under public sector procurement, specifically the Public Contract Regulations 2015.

- 7.2.2 Specific details of any implications related to public sector procurement Regulations are set out- in the individual reports appended to this report.

7.3 Financial Implications

- 7.3.1 Specific details of how decisions will be carried out within existing finances and resources will be set out in the individual reports.

- 7.3.2 Any cashable savings generated as a result of the procurement exercises are detailed in Appendix 2 to the delivery of procurement related savings and be removed from Directorate where identified in addition to the existing service area savings target as set out in the Medium-Term Financial Plan (MTFP) in line with the principles to treatment of identified savings against third party contracts as agreed by CLT on 24th January 2022.

7.4 Procurement Implications (if required)

- 7.4.1 As noted under the Legal Implications the Council has a duty to ensure that public sector procurement activity is in line with public sector legislation, specifically the Public Contracts Regulations 2015.
- 7.4.2 For each of the individual projects the specific procurement implications associated to the legislation are set out and detailed in the appendices

7.5 Human Resources Implications (if required)

- 7.5.1 None.

7.6 Public Sector Equality Duty

- 7.6.1 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports which should also give consideration to application of Equality Impact Assessments in line with Council Policy

8 Background Documents

- 8.1 List of Appendices accompanying this Report (if any):
- 1. Appendix 1 - Planned Procurement Activity June 2023 – August 2023
 - 2. Appendix 2 – Background Briefing Paper
 - 3. Appendix 3 – Exempt Information
 - 4. Appendix 4 – Quarterly Awards Schedule (January 2023 – March 2023)

APPENDIX 1 – PLANNED PROCUREMENT ACTIVITIES (JUNE 2023 – AUGUST 2023)

No.	Type of Report	Title of Procurement	Ref	Brief Description	Contract Duration	Directorate	Portfolio Finance and Resources Plus	Finance Officer	Contact Name	Planned CO Decision Date
1	Strategy / Award	Berkeley Scott Temporary Labour	TBC	To fulfil outstanding temporary vacant positions together with, short and long term sickness absence to ensure adequate levels of delivery of preparation and food service are safely fulfilled within the Cityserve portfolio.	4 years	Council Management	Finance and Resources	Lee Bickerton	Carl Bennett	27/06/2023

APPENDIX 2

BRIEFING NOTE ON PLANNED PROCUREMENT ACTIVITIES **CABINET – 16th May 2023**

Title of Contract	Berkeley Scott Temporary Labour
Contact Officers	Director / Assistant Director: Alison Jarrett – Director of Group & Capital finance Client Officer: Derek Price / Gary Farquhar Procurement Officer: Richard Tibbatts, Head of Category - Corporate
Relevant Portfolio	Cabinet Member for Finance & Resources, Councillor Yvonne Mosquito
Briefly describe the service required	<p>To fulfil outstanding temporary vacant positions together with, short- and long-term sickness absence to ensure adequate levels of delivery of preparation and food service are safely fulfilled within the Cityserve portfolio.</p> <p>Berkeley Scott are specialist providers of temporary staff within the hospitality and education industry with a strong Birmingham presence, thus enabling Cityserve to react to immediate key staffing needs as and when they are required.</p> <p>Cityserve currently have c.50 vacancies due to short and long term sickness, plus c.70 vacancies in school kitchens at various stages of the recruitment & selection process. Currently this shortfall in kitchen resource is having an adverse effect on current workforce health & safety and service delivery. Therefore, this proposed solution will enable Cityserve to reduce health & safety risks and reduce management and field staff resource currently being diverted to the front-line service delivery to ensure minimal disruption – this is not part of their job role. This will reduce workload pressures and improve staff morale & welfare of existing colleagues.</p>
What is the proposed procurement route?	Direct Award via Purchasing Organisation (TUCO) Framework CAT11051-TU - Provision of Temporary & Permanent Catering Staff.
What are the existing arrangements? Is there an existing contract? If so when does that expire?	Currently using HAYS 3SS system however despite much engagement & dialogue with HAYS we have and still cannot meet the past and ongoing requirements in this area.
Will any savings be generated?	No cashable savings will be generated by this scheme.
Has the In-House Preferred Test been carried out?	The services provided by our preferred supplier cannot be delivered by Birmingham City Council, as described above.
How will this service assist with the Council's commitments to Route to Zero?	Not applicable.
How do these activities assist the Council with Everybody's Battle; Everybody's Business?	This solution will assist in creating a better work life balance for existing colleagues who are currently working above their contracted hours to maintain service level agreement to our customers.
Is the Council under a statutory duty to provide this service? If not, what is the justification for providing it?	There is no statutory duty for Birmingham City Council to provide this service. However, individual schools do have a statutory responsibility to provide free school meals. As Birmingham City Councils "in-house" school meal provider, Cityserve is contracted to these schools to work on their behalf to fulfil this statutory requirement and provide a school meal service
What budget is the funding from for this service?	This scheme is cost neutral to the council as all recruitment costs are included within Cityserve's financial budget.
Proposed start date and duration of the new contract	The proposed start date is June 2023 for a period of 4 years.

APPENDIX 4 - QUARTERLY CONTRACT AWARD SCHEDULE (JANUARY 2023 – MARCH 2023)

Type of Rept	Title of Procurement	Ref	Brief Description	Contract Duration	Directorate	Portfolio Finance and Resources	Finance Officer	Contact Name	Comments - including any request from Cabinet Members for more details	Contractor(s) Awarded to	Value of Contracts	Value w/ Option to Extend	Chief Officer	Actual G/ Live date
Delegated Extension Award	Employers Agent Services for the Druids Heath Regeneration Scheme	P0540	The services provided under the Employer's Agent contract include the following disciplines: • Project Management • Programme Management • Architectural Services • Principal Designer • Engineering Services • Party Wall Surveying • Quantity Surveying • Clerk of Works • Liaison between the Council and contractor(s) • Market Information	10 months	Place, Prosperity and Sustainability	Housing	Carl Tomlinson	Simon Fellon / Charlie Short	This contract was included in the Planned Procurement Activities list approved by Cabinet as part of the sounding out process on 9th October 2018 for the estimated value of £800,000 for the duration of 7 years. The value of the modification is within the 20% tolerance stated in the Procurement and Contract Governance Rules Item 4.69(i).	WSP (Real Estate & Infrastructure) Limited	Original value of £730,790 to £960,000		Paul Kilson / Steve Sandercock	10/01/2023
Strategy / Award	Design Services for the Alexander Stadium Legacy Works	P1095	To support the reinstatement of the Alexander Stadium site to operate as a functional community and events facility to support the legacy from the Commonwealth Games 2022, there is a requirement for design services to support the works.	2 years	City Operations	Leader	Guy Olivart	Dave Wagg / Charlie Short	Presented to Cabinet for info 13/12/2022. Strategy / Award Report signed 20/01/2023.	Alexander Stadium to Ove Arup & Partners Limited	£651,359		Mark Wiltshire / Steve Sandercock	23/01/2023
Strategy / Award	Provision of ERP Functional Support		The provision of ERP functional support, advice, roadmap management, knowledge transfer, configuration, enhancements, audit, account management, minor and major projects and service requests.	2 years	Digital and Customer Services	Digital, Culture, Heritage and Tourism	Lee Bickerton	Ian Badger / Jake Smith	Presented to Cabinet for info 11/10/2022. Strategy / Award Report signed 31/01/2023.	Version 1 Solutions Limited	£1,600,000		Peter Bishop / Steve Sandercock	01/02/2023
Strategy / Award	Children's travel service casual / Agency transport guides		Interim arrangement for the provision of pupil guides.	8 months	Children & Families	Children, Young People and Families	Clare Sandland	Edward Harper / Henrietta Jacobs	On 13th Dec 2022, Cabinet approval was given to procure various providers for the provision of pupil guides with delegated authority to award these contracts. Strategy / Award Report signed 05/02/2023.	1) Aspire 2) Balfour 3) Connought 4) Eynars 5) Teach Active 6) ABC Teachers, 7) CERT 8) Green Destinations	£1,342,641.05		Sue Harrison / Steve Sandercock	07/02/2023
Delegated Award Report	The Domestic Abuse Housing Solution and Support Service	P0994	A Domestic Abuse Housing Solutions and Support Hub for those who are homeless or threatened with homelessness due to domestic abuse. The service will undertake statutory housing needs assessments and deliver homelessness prevention and relief duties in accordance with the Housing Act 1996, as amended by the Homelessness Reduction Act 2017.	3 years with the option to extend for a further 12 months	City Housing	Housing	Carl Tomlinson	Richard Labran / Marie Kennedy	Presented to Cabinet for info 11/10/2022. Approval to Tender Strategy Report signed 16/11/2022 and delegated the award to CO. Delegated Award Report signed 07/02/2023.	Cranstoun	£1,038,558	£1,038,558	Paul Langford / Steve Sandercock	01/04/2023
Strategy / Award	Administrative Replacement Process in respect of the Confirm IG Highways Management Information Systems (MIS System)		The Highways Management Information Systems (MIS) is used to underpin the day-to-day operation of the Highways Maintenance and Management PFI contract, as well as other core Highway Service activities, which in turn enables the council to fulfil its statutory and regulatory responsibilities as Highway Authority.	7 years	City Operations	Digital, Culture, Heritage and Tourism	Carl Tomlinson	Mark Shelswell / Jake Smith	Presented to Cabinet for info 08/11/2022. Strategy / Award Report signed 09/02/2023.	Softcat PLC	£1,477,020	£590,808	Mark Wiltshire / Steve Sandercock	13/02/2023
Delegated Award Report	Integration support services for sanctuary seekers	P0915A		4 years	Adults and Social Care	Adults Social Care and Health	Yusef Shaibu	Bethany Finch / Marie Kennedy / Manjit Samral	The requirements of the Flexible Contracting Arrangements has been included in the Cabinet Report approved by Cabinet on the 26 July 2022. Delegated Award Report signed 15/02/2023.	Lot 1 - Tenancy & Family Support (follow on service) 1) Beam 2) Father Hudson's Society 3) Migrant Helpline 4) Spring Housing Association 5) The Refugee Migrant Centre Limited Lot 2 - Refugee Participation and Engagement 1) Bosnia and Herzegovina UK Network 2) Migrant Helpline Page 2 of 12 3) Refugee Action 4) The Refugee Migrant Centre Limited 5) Trident Reach the People Charity Lot 3 - Employability Service 1) Ashley Community & Housing Ltd (Via ACH) 2) Beam 3) Bosnia and Herzegovina UK Network 4) Breaking Barriers 5) Father Hudson's Society 6) Migrant Helpline 7) The Refugee Migrant Centre Limited 8) Trident Reach the People Charity Lot 4 - Wellbeing & Mental Health 1) Birmingham and Solihull Mental Health NHS Foundation Trust 2) Father Hudson's Society 3) The Refugee Migrant Centre Ltd	up to £16,050,000.		Graeme Betts / Steve Sandercock	01/04/2023
Strategy / Award	Maintenance, Servicing and Supply of Fire Extinguishers	P0417_2022	The maintenance, servicing and supply of fire extinguishers at Council sites is required for directorates of the Council and schools on an annual basis in accordance with legislation and British Standard (BS) 5306 part 3:2009 and part 8:2012. As part of this contract, there is a requirement for the servicing and supply of fire blankets and fire equipment signage.	4 years	Council Management	Finance and Resources	Lee Bickerton	Jose Vitoria	Presented to Cabinet for info 17/01/2023. Strategy / Award Report signed 02/03/2023.	Firemark Limited	£880,000		Steve Sandercock	01/04/2023
Strategy / Award	Installation of energy efficiency measures in owner occupied and private rented properties	P1096	The Council has secured funding from the then Department for Business, Energy and Industrial Strategy (BEIS) for measures to improve the energy efficiency of up to 630 owner occupier privately owned domestic properties (Local Authority Delivery Phase 3, - 'on gas' properties.) and (Home Upgrade Grant Phase 1) there is a total of up to 103 owner occupier/private rented properties which are 'off gas'. Applications are submitted to the Council for specific measures.	5 months	City Housing	Housing	Carl Tomlinson	Gwen Mayo	Approved by Cabinet in the Green Homes Grants – Local Authority Delivery Phase 2 report dated 7th September 2021. Strategy/ Award Report signed 03/03/2023.	Dodd Group Limited	£7,600,000		Paul Langford / Steve Sandercock	06/03/2023
Delegated Award Report	Processing Green Waste	P0402	The provision of Processing Green Waste.	5 years with option to extend for a further period of 2 years	City Operations	Environment	Carl Tomlinson	Darren Share / Meena Chuhani	Cabinet approved the Procurement Strategy in Support of the Waste Strategy Framework 2017 – 2040, dated 13 February 2018 and delegated the award to CO. Delegated Award Report signed 03/03/2023.	Veolia ES Limited	£4,050,000	£1,620,000	Mark Wiltshire / Steve Sandercock	17/01/2024

Type of Report	Title of Procurement	Ref	Brief Description	Contract Duration	Directorate	Portfolio Finance and Resources	Finance Officer	Contact Name	Comments - including any request from Cabinet Members for more details	Contractor(s) Awarded to	Value of Contracts	Chief Officer	Actual Go Live date
Strategy / Award	Provision of a Children's Placement Portal		Birmingham Children's Trust require a partner to build a new Placement Portal for managing child placements. A test of the market has suggested that there is currently a gap in regard to this type of system being immediately available.	1 year with option to extend by a further 1 year	Digital and Customer Services	Digital, Culture, Heritage & Tourism	Lee Bickerton	James Gregory / Jake Smith	Presented to Cabinet for info 27/07/2022. Strategy / Award Report signed 06/03/2023.	NEC Software Solutions UK Limited	£999,350	Peter Bishop / Steve Sandercock	31/03/2023
Delegated Award Report	Genealogy Services	P0786	For the provision of National and International genealogy services for the purpose of locating next of kin in order that the Council can comply with its statutory obligations in arranging dignified Public Health Funerals. Where no next of kin is immediately identified the case will be referred to an accredited Genealogist, Family Research and Probate Company to commence a search for family members who need to be notified of the death and provided the opportunity to take over the funeral arrangements. <u>This project is income generation.</u>	5 years	Adult Social Care	Health and Social Care	Yusef Shaibu	Mike White / Stuart Follows	Presented to Cabinet for info 11/10/2022. Approval to Tender Strategy Report signed 30/11/2022 and delegated the award to CO. Delegated Award Report signed 16/03/2023.	Finders Genealogists Ltd, T/A Finders International Probate Genealogists	£1,505,000	Graeme Betts / Steve Sandercock	01/04/2023
Strategy / Award	Insurance services for Acivico and Birmingham Children's Trust (BCT)	P1108	The insurance policies for renewal as follows: • BCT (Birmingham Children's Trust); □ Lot 1 - All required covers including (Money, Employers Liability, Fidelity Guarantee and Personal Accident). • Acivico. □ Lot 2 - All required covers including (Material Damage for Contents only, Public Liability, Employers Liability, Fidelity Guarantee, Personal Accident and Business Travel); □ Lot 3 - Management liability covers including (Professional Indemnity, Directors and Officers).	3 years	Council Management	Finance and Resources	Lee Bickerton	Matthew Z Davis / Stuart Follows	Presented to Cabinet for info 08/11/2022. Strategy / Award Report signed 23/03/2023.	Zurich Municipal PLC	£1,472,014	Rebecca Hellard / Steve Sandercock	01/04/2023
Strategy / Award	A managed service provider to support transformation of BCC and deliver savings efficiencies and opportunities	P1131	To support the scoping, planning and development of transformation and improvement architecture. This contract seeks to establish a more efficient and effective way of sourcing support, specialist resources and expertise over a number of years. It will enhance delivery capacity and allow the Council to have a coherent overview of all the resources engaged on transformation and improvement. It will further ensure the resources are managed accordingly, whilst ensuring value for money and successful achievement of deliverables and outcomes.	4 years	Council Management	Finance and Resources	Lee Bickerton	Nic Fell / Stuart Follows	Presented to Cabinet for info 21/03/2023. Strategy / Award Report signed 30/03/2023.	Constellia Public Limited	£9,000,000	Rebecca Hellard / Steve Sandercock	01/04/2023
Strategy / Award	Neighbourhood Integration – Programme Support	P0937	To support the continued development and implementation of multi-agency neighbourhood working in the local health and social care system. This will include: •Project management for the NI programme; •Working with 5 existing neighbourhood test teams to design and iterate new ways of integrated working across health and social care; •Managing the change process across multi-agency teams; •Managing stakeholder relationships; •Ensuring reporting and accountability through to Integrated Care System Place governance arrangements; •Establishing baselines and measuring impact and benefits of new ways of working.	1 year	Adult Social Care	Health and Social Care	Yusef Shaibu	Michael Walsh / Mike Smith	Presented to Cabinet for info 14/02/2023. Strategy / Award Report signed 30/03/2023.	Newton Europe	£948,150	Graeme Betts / Steve Sandercock	01/04/2023
Delegated Award Report	Primrose Park Landscape Construction Works	P1194	There is a requirement for the construction of a new 1.10 hectare neighbourhood park and the works consist of landscaping, a new play area and equipment for children up to the age of 14, a multi-use games area, outdoor fitness equipment, seating and paths. It will also contain trees and wild flower planting with bulbs. The perimeters of the park will be fenced and new entrance features.	1 year	City Operations	Environment	Carl Tomlinson	Cigdem Jain / Charlie Short	Presented to Cabinet for info 26/07/2022. Delegated Award Report signed 31/03/2023.	Haystoun Construction Limited	£1,145,177	Mark Wiltshire / Steve Sandercock	01/04/2023

Birmingham City Council

Report to Cabinet

Date: 16th May 2023



Subject: NON-KEY DECISION PLANNED PROCUREMENT ACTIVITIES (JUNE 2023 – AUGUST 2023) AND QUARTERLY CONTRACT AWARDS (JANUARY 2023 – MARCH 2023)

Report of: ASSISTANT DIRECTOR – PROCUREMENT

Relevant Cabinet Member: Councillor Yvonne Mosquito, Finance and Resources

Relevant O & S Chair(s): Councillor Akhlaq Ahmed, Chair of Resources O & S

Report author: Steve Sandercock, Assistant Director, Procurement
Email Address: steve.sandercock@birmingham.gov.uk

Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, add Forward Plan Reference:		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, provide exempt information paragraph number or reason if confidential :		
3. Information relating to the financial or business affairs of any particular person (including the council)		

1 Executive Summary

- 1.1 This report provides details of the planned procurement activity for the period June 2023 – August 2023 which are not key decisions and all contract award decisions made under Chief Officer's delegation during the previous quarter. Planned procurement activities reported previously are not repeated in this report.

1.2 The report enables Cabinet to identify whether any reports for procurement activities should be brought to this meeting for specific executive decision, otherwise they will be dealt with under Chief Officer delegations up to the value of £500,000, unless TUPE applies to current Council staff.

1.3 Appendix 1 informs Cabinet of the contract award decisions made under Chief Officers delegation during the period January 2023 – March 2023.

2 Recommendations

2.1 To note there are no non-key decisions planned procurement activities for this month.

2.2 Notes the contract award decisions made under Chief Officers delegation during the period January 2023 – March 2023 as detailed in Appendix 1.

3 Background

3.1 The report approved by Council Business Management Committee on 16 February 2016 set out the case for introducing this process.

3.2 At the 12th July 2022 meeting of Council changes to procurement governance were agreed which gives Chief Officers the delegated authority to approve procurement contracts up to the value of £500,000 for non-key decisions over the life of the contract. Where it is likely that the award of a contract will result in staff employed by the Council transferring to the successful contract under TUPE, the contract award decision has to be made by Cabinet.

3.3 In line with the Procurement and Contract Governance Rules that form part of the Council's Constitution, this report acts as the process to consult with and take soundings from Cabinet Members and the Resources Overview & Scrutiny Committee.

3.4 This report sets out the planned procurement activity over the next few months where the contract value is between the procurement threshold £177,897.50 (excluding VAT) and £500,000 (excluding VAT) for non-key decisions. This will give members visibility of all procurement activity within these thresholds and the opportunity to identify whether any procurement reports should be brought to Cabinet for approval even though they are below the £10m delegation threshold.

3.5 It should be noted that the procurement threshold has changed from £189,330 to £177,897.50 (excluding VAT) and applies from 1st January 2022 for a period of 2 years.

3.6 Individual procurements may be referred to Cabinet for an executive decision at the request of Cabinet, a Cabinet Member or the Chair of Resources Overview & Scrutiny Committee where there are sensitivities or requirements that necessitate a decision being made by Cabinet.

3.7 Procurements below £500,000 contract value that are not listed on this or subsequent monthly reports can only be delegated to Chief Officers if specific approval is sought from Cabinet. Procurements above £10m contract value will

still require an individual report to Cabinet in order for the award decision to be delegated to Chief Officers if appropriate.

4 Options considered and Recommended Proposal

4.1 The options considered are:

- To note the planned procurement activities for all the projects listed in Appendix 1 and the Chief Officer delegations as set out in the Constitution, for the subsequent decisions around procurement strategy and contract awards.– this is the recommended option.

5 Consultation / Engagement

5.1 This report to Cabinet is copied to Cabinet Support Officers and to Resources Overview & Scrutiny Committee and therefore is the process for consulting with relevant cabinet and scrutiny members. At the point of submitting this report Cabinet Members/ Resources Overview & Scrutiny Committee Chair have not indicated that any of the planned procurement activity needs to be brought back to Cabinet for executive decision.

6 Risk Management

6.1 Members should note that in respect of any procurement projects which are sought to be referred back to Cabinet for further considerations these may impact on timescales around the delivery of those projects.

6.2 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

7.1.1 Details of how the contracts support relevant Council policies, plans or strategies, will be set out in the individual reports.

7.2 Legal Implications

7.2.1 Members are reminded that as a Local Authority the Council has specific duties under public sector procurement, specifically the Public Contract Regulations 2015.

7.2.2 Specific details of any implications related to public sector procurement Regulations are set out- in the individual reports appended to this report.

7.3 Financial Implications

7.3.1 Specific details of how decisions will be carried out within existing finances and resources will be set out in the individual reports.

7.4 Procurement Implications (if required)

7.4.1 As noted under the Legal Implications the Council has a duty to ensure that public sector procurement activity is in line with public sector legislation, specifically the Public Contracts Regulations 2015.

7.4.2 For each of the individual projects the specific procurement implications associated to the legislation are set out and detailed in the appendices

7.5 Human Resources Implications (if required)

7.5.1 None.

7.6 Public Sector Equality Duty

7.6.1 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports which should also give consideration to application of Equality Impact Assessments in line with Council Policy

8 Background Documents

8.1 List of Appendices accompanying this Report (if any):

- 1. Appendix 1 - Planned Procurement Activity (June 2023 – August 2023)
- 2. Appendix 2 – Background Briefing Paper
- 3. Appendix 3 – Exempt Information
- 4. Appendix 4 – Quarterly Awards Schedule (January 2023 – March 2023)

APPENDIX 1 – PLANNED PROCUREMENT ACTIVITIES (JUNE 2023 – AUGUST 2023)

No.	Type of Report	Title of Procurement	Ref	Brief Description	Contract Duration	Directorate	Portfolio Finance and Resources Plus	Finance Officer	Contact Name	Planned CO Decision Date
1	Strategy / Award	Consultancy to support the implementation & programme management of new corporate landlord service model	TBC	<p>Following discussions with CLT in January 2023, a review of the existing Corporate Landlord approach was completed in March 2023. From this a revised approach and Delivery Plan was developed. External expertise and capacity are now required to lead on the initial implementation of the new model to provide overall programme management services and implementation / subject matter expertise support for the Corporate Landlord programme which will create a single corporate custodian of all Birmingham City Council's operational property assets, transitioning the portfolio into a shared strategic resource which is fully aligned to, and supportive of, the Council's overarching objectives.</p> <p>The Corporate Landlord model will play a key role as an enabler to the wider place-based approach and will support other key priority programmes such as Early Intervention and Prevention.</p>	6 months with option to extend for up to 6 months	Place, Prosperity And Sustainability	Leader	Azhar Rafiq	David Coulson / Andrea Webster	27/06/2023

APPENDIX 2

BRIEFING NOTE ON PLANNED PROCUREMENT ACTIVITIES **CABINET – 16th May 2023**

Title of Contract	Consultancy to support the implementation & programme management of new corporate landlord service model
Contact Officers	Director / Assistant Director: Paul Kitson, Director of Place, Prosperity and Sustainability Client Officer: David Coulson, Interim Portfolio Lead Inclusive Growth Procurement Officer: Andrea Webster, Sub Category Manager
Relevant Portfolio	Leader, Councillor Ian Ward
Briefly describe the service required	Following discussions with CLT in January 2023, a review of the existing Corporate Landlord approach was completed in March 2023. From this a revised approach and Delivery Plan was developed. External expertise and capacity are now required to lead on the initial implementation of the new model to provide overall programme management services and implementation / subject matter expertise support for the Corporate Landlord programme which will create a single corporate custodian of all Birmingham City Council's operational property assets, transitioning the portfolio into a shared strategic resource which is fully aligned to, and supportive of, the Council's overarching objectives. The Corporate Landlord model will play a key role as an enabler to the wider place-based approach and will support other key priority programmes such as Early Intervention and Prevention.
What is the proposed procurement route?	The proposed route to market will be to use a compliant public sector framework agreement.
What are the existing arrangements? Is there an existing contract? If so when does that expire?	This is follow on work from the review of the Corporate Landlord programme that was undertaken by Ernst Young LLP under the Strategic Partner Programme Support, Early Intervention and Prevention Programme contract (P0916). This work is complete.
Will any savings be generated?	It is anticipated that the implementation of the Corporate Landlord model will deliver significant savings for the Council. Initial estimates indicate savings ranging from £3.1m to £5.7m from operational efficiencies. These estimates will be subject to further ratification and due diligence as the work moves forward.
Has the In-House Preferred Test been carried out?	Yes, and the test demonstrated this is not suitable to be carried out in-house as capacity, knowledge & expertise is not available in house.
How will this service assist with the Council's commitments to Route to Zero?	As the contract will generate negligible carbon emissions there are no opportunities for this to assist with the Council's Route to Zero commitments. However, as the new Corporate Landlord model is implemented and further developed, attention will be paid to improving the energy management approach deployed in the Council's operational estate.
How do these activities assist the Council with Everybody's Battle; Everybody's Business?	The procurement of this service provider will be expected to support the delivery of the Council's Equalities Strategy - Everyone's Battle Everyone's Business when dealing with contracts for services, internal staff, as well as external customers.
Is the Council under a statutory duty to provide this service? If not, what is the justification for providing it?	There is not a statutory duty to provide this service. However, the service is required to support the Corporate Landlord Programme, which is one of the Council's key, whole-organisation transformation programmes, and is part of the Place, Prosperity and Sustainability transformation portfolio.
What budget is the funding from for this service?	This is funded from Delivery Plan Capacity Build Fund (funded by Flexible Use of Capital Receipts flexibility).
Proposed start date and duration of the new contract	The proposed start date is June 2023 for a period of up to the end of November 2023, by which point a review will have been completed in order to determine any future requirements beyond that date. Although it is impossible to determine exact requirements at this stage, it is proposed that an extension period of up to 6 months (May 2024) is appropriate.

APPENDIX 4 - QUARTERLY CONTRACT AWARD SCHEDULE (JANUARY 2023 – MARCH 2023)

Type of Report	Title of Procurement	Ref	Brief Description	Contract Duration	Directorate	Portfolio Finance and Resources	Finance Officer	Contact Name	Comments - including any request from Cabinet Members for more details	Contractor(s) Awarded to	Value of Contracts	Value with Option to Extend	Chief Officer	Actual Go Live date
Strategy / Award	Technical Professional Services for the Southside Public Realm Final Scheme	P0856	Technical professional services to support the completion and delivery of the Southside Public Realm scheme.	2 years, 6 months	Place, Prosperity and Sustainability	Transport	Azhar Rafiq	Jaswant Chahal / Charlie Short	Presented to Cabinet for info 13/12/2022. Strategy / Award Report signed 27/01/2023.	Jacobs UK Limited	£282,699		Paul Kitson / Steve Sandercock	27/01/2023
Delegated Award Report	Increase in contract value - works for plots 8 and 9 of the Perry Barr Regeneration Scheme	P0427/1	To increase the value of the contract for the fitout works to Plots 8 and 9 of the Perry Barr Regeneration Scheme (PBRS). This increase is for the unforeseen incidental works required during the installation period to ensure efficient and effective delivery of the scheme that were not identified as part of the original procurement process and contract award as they were previously anticipated to be undertaken as a part of the works managed for the Council.	4 months	Place, Prosperity and Sustainability	Leader	Guy Olivant	Mumtaz Mohammed / Charlie Short	This contract was included in the Birmingham 2022 – Update on the Perry Barr Regeneration Scheme FBC report to Cabinet dated 27th July 2021 that advised of the procurement. The contract modification is compliant with PCR 2015, Regulation 72(1)(c) on the basis that the modification was unforeseen and does not alter the overall nature of the contract and the increase in price does not exceed 50% of the value of the original contract. Delegated Award Report 'Contract Award – Fit Out Works for Plot 8 & 9 of the Perry Barr Regeneration Scheme' dated 8th December 2021. Delegated Award Report signed 01/02/2023.	Willmott Dixon Construction	£498,298		Paul Kitson / Steve Sandercock	08/01/2023
Strategy / Award	Eclipse Software as a Service		The Council currently contracts with OLM Systems Ltd for Eclipse & Carefirst which are the core Social Care applications in use by BCC Adults and Birmingham Children's Trust (BCT).	1 year, with option to extend for a further 12 months	Digital and Customer Services	Digital, Culture, Heritage and Tourism	Clare Sandland / Lee Bickerton	Jake Smith	Presented to Cabinet for info 17/01/2023. Strategy / Award Report signed 08/02/2023.	OLM Systems Ltd	£397,000	£397,000	Cheryl Doran / Steve Sandercock	13/02/2023
Delegated Award Report	Peer Mentoring and Mental Health Champions for Children and Young People 16-25 years	P0981	There is a requirement for the development and delivery of a peer mentoring scheme, with a focus on young people aged 16 – 25 years from LGBT+ communities, young people with disabilities and young people from Black, Asian and other diverse ethnicities. There is a need to recruit and train 30 peer mentors (aged 16 – 25 years) who have lived experiences of those they are mentoring: 10 from Black, Asian and minority ethnic communities; 10 from LGBT+ communities; 10 young people with disabilities. Each peer mentor would have a 12-month period in which time they would: • Receive Peer Mentoring training • Support at least 3 young people from within their peer group • Receive support to contribute to the training of the next peer mentor	3 years with break clause in years 2 and 3	Public Health	Health and Social Care	Lee Bickerton	Joann Bradley / Kathy Lee / Manjit Samra	Presented to Cabinet for info 28/06/2022. Approval to Tender Strategy / Report signed 12/08/2022 and delegated the award to CO. Delegated Award Report signed 15/02/2023.	Banardo's Central Region	£320,675		Justin Varney / Steve Sandercock	01/03/2023
Strategy / Award	Project management services to support the development of Perry Barr Regeneration Scheme the PBRS	P0426/3	The purpose of the development is now focussed on the regeneration of Perry Barr rather than an Athletes Village and is being delivered in two key stages, the first is the delivery of new residential accommodation (Perry Barr Residential Scheme), which will provide approximately 1000 homes (on plots 3, 4, 5, 6, 7, 8 & 9) completed to a standard where the homes are ready for occupation. The second part is the delivery of sites (land and buildings) surrounding the residential complex to a standard where they can be developed or disposed of to a third-party developer.	6 months	Place, Prosperity and Sustainability	Leader	Guy Olivant	Mumtaz Mohammed / Charlie Short	This contract was included in the Birmingham 2022 – Update on the Perry Barr Regeneration Scheme FBC report to Cabinet dated 27th July 2021 that advised of the procurement.	Arcadis LLP	£299,375		Paul Kitson / Steve Sandercock	17/02/2023
Delegated Award Report	Statutory Assessment Moderation and Monitoring of KS1 and KS2	P0884	Moderation of key stage 1 (KS1) and key stage 2 (KS2) and Monitoring of key stage 2 (KS2) SATS. Local Authorities are required to validate a sample of KS1 Teacher assessment (TA) judgements in English writing.	4 years with a break clause in years 3 and 4	Children and Families	Children, Young People and Families	Clare Sandland	Kamah Boothe / Sandra Asiedu	Presented to Cabinet for info 08/02/2022. Approval to Tender Strategy / Report signed 27/07/2022 and delegated the award to CO. Delegated Award Report signed 10/03/2023.	Services for Education	£484,000		Sue Harrison / Steve Sandercock	01/04/2023
Strategy / Award	Professional Services for Integrated Care System - Place Strategic Commissioning Programme	P0999	The purpose of the programme is to establish integrated approaches to markets and areas of commissioning activity in which the local authority and the NHS are both currently acting independently. Professional services support is required to assist with programme development and management to: •Support workstream leads to develop implementation plans, identify benefits and approaches to benefit realisation •Provide capacity to progress actions within workstreams •Establish robust programme governance •Add value to the process in respect of expertise in establishing cross-organisation commissioning arrangements	1 year	Adults Social Care	Health & Social Care	Sanantha Bloomfield	Richard Doig / Manjit Samra	Presented to Cabinet for info 07/08/2022. Strategy / Award Report signed 16/03/2023.	4OC Limited	£111,810 for Phase 1	£138,190 for Phase 2 Total £250,000	Graeme Betts / Steve Sandercock	01/04/2023
Strategy / Award	Electronic Document Management System		Provision of an Electronic Document Management System (EDMS) requirement to Birmingham City Council (BCC).	3 years	Digital and Customer Services	Digital, Culture, Heritage & Tourism	Lee Bickerton	Bimbola Igandan	Presented to Cabinet for info 17/01/2023. Strategy / Award Report signed 30/03/2023.	IDOX Software Limited	£217,337.00		Peter Bishop / Steve Sandercock	01/04/2023

