



HILLINGDON
LONDON



External Services Scrutiny Committee

Councillors on the Committee

John Riley (Chairman)
Ian Edwards (Vice-Chairman)
Tony Burles
Brian Crowe
Phoday Jarjussey (Labour Lead)
Allan Kauffman
John Oswell
Michael White

Date: THURSDAY, 8 OCTOBER
2015

Time: 6.00 PM

Venue: COMMITTEE ROOMS 3 &
3A - CIVIC CENTRE, HIGH
STREET, UXBRIDGE,
MIDDLESEX UB8 1UW

**Meeting
Details:** Members of the Public and
Press are welcome to attend
this meeting

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Contact: Nikki O'Halloran

Tel: 01895 250472

Email: nohalloran@hillington.gov.uk

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Putting our residents first

Lloyd White

Head of Democratic Services

London Borough of Hillingdon,

3E/05, Civic Centre, High Street, Uxbridge, UB8 1UW

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Terms of Reference

1. To scrutinise local NHS organisations in line with the health powers conferred by the Health and Social Care Act 2001, including:
 - (a) scrutiny of local NHS organisations by calling the relevant Chief Executive(s) to account for the work of their organisation(s) and undertaking a review into issues of concern;
 - (b) consider NHS service reconfigurations which the Committee agree to be substantial, establishing a joint committee if the proposals affect more than one Overview and Scrutiny Committee area; and to refer contested major service configurations to the Independent Reconfiguration Panel (in accordance with the Health and Social Care Act); and
 - (c) respond to any relevant NHS consultations.
2. To act as a Crime and Disorder Committee as defined in the Crime and Disorder (Overview and Scrutiny) Regulations 2009 and carry out the bi-annual scrutiny of decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions.
3. To scrutinise the work of non-Hillingdon Council agencies whose actions affect residents of the London Borough of Hillingdon.
4. To identify areas of concern to the community within their remit and instigate an appropriate review process.

Agenda

PART I - MEMBERS, PUBLIC AND PRESS

Chairman's Announcements

1 Apologies for absence and to report the presence of any substitute Members

2 Declarations of Interest in matters coming before this meeting

3 Exclusion of Press and Public

To confirm that all items marked Part I will be considered in public and that any items marked Part II will be considered in private

4 Minutes of the previous meeting - 17 September 2015 1 - 8

5 Preventing Violent Extremism 9 - 12

6 Work Programme 2015/2016 13 - 20

PART II - PRIVATE, MEMBERS ONLY

7 Any Business transferred from Part I

Minutes

EXTERNAL SERVICES SCRUTINY COMMITTEE

17 September 2015

Meeting held at Committee Room 6 - Civic Centre,
High Street, Uxbridge UB8 1UW



HILLINGDON
LONDON

	<p>Committee Members Present: Councillors John Riley (Chairman), Ian Edwards (Vice-Chairman), Lynne Allen (In place of Tony Burles), Brian Crowe, Phoday Jarjussey (Labour Lead), John Oswell, Brian Stead (In place of Allan Kauffman) and Michael White</p> <p>Also Present: Jeff Maslen - Healthwatch Hillingdon Richard Claydon - London Fire Brigade (Hillingdon) Niamh Farren - London Community Rehabilitation Company Juliet Wharrick - National Probation Service</p> <p>LBH Officers Present: Ed Shaylor (Service Manager - Community Safety), Gary Collier (Better Care Fund Programme Manager) and Nikki O'Halloran</p>
15.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>Apologies for absence had been received from Councillors Tony Burles and Allan Kauffman. Councillors Lynne Allen and Brian Stead were present as their substitutes.</p>
16.	<p>EXCLUSION OF PRESS AND PUBLIC (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That all items of business be considered in public.</p>
17.	<p>MINUTES OF THE PREVIOUS MEETING - 14 JULY 2015 (<i>Agenda Item 4</i>)</p> <p>It was noted that further information had been provided with regard to the majority of the actions that had been noted in the minutes of the last meeting. This information had been provided to Members of the Committee in hard copy format. The Democratic Services Manager would contact the responsible officers with regard to the outstanding actions and report back to Members once the information had been provided.</p> <p>The Chairman noted that the Committee was aware of the Shaping a healthier future (SaHF) programme and the impact that the closure of the maternity unit at Ealing Hospital would have on Hillingdon Hospital. In addition, SaHF would also see the closure of children's inpatient services at Ealing Hospital. The Chairman was keen to ensure that the Committee was kept up to date on the possible implications for Hillingdon and, as such, requested an update at the Committee's meeting on 17 November 2015.</p> <p>RESOLVED: That:</p> <ol style="list-style-type: none"> 1. the Committee receive an update on SaHF at its meeting on 17 November 2015; and

2. the minutes of the meeting held on 14 July 2015 be agreed as a correct record.

18. UPDATE ON THE PROVISION OF HEALTH SERVICES IN THE BOROUGH
(Agenda Item 5)

Mr Jeff Maslen, Chair of Healthwatch Hillingdon (HH), advised that the organisation's Annual Report 2014/2015 had included a lot of detail about the work that it had undertaken during the last year. This work had included a number of successes but HH was keen to question the impact of its intervention and had included evidence in the report to support this success. Examples of work undertaken in the last year included:

- acting as a strong independent advocate for the implementation of National Institute of Clinical Excellence (NICE);
- CAMHS commissioning; and
- improvements to the maternity service.

It was noted that HH's work was evidence based and sought to influence through providing constructive feedback and acting as a critical friend. Mr Maslen advised that HH had worked hard to build its credibility with commissioners and providers but that it did publicise its findings when necessary. For example, CAMHS had been failing in Hillingdon and the situation was becoming more serious through a lack of early intervention which could then impact on adulthood. As well as not being in the patient's best interest, this, in turn, posed additional cost implications for other services. The CAMHS report produced by HH (Seen & heard - Why not now?) had resulted from contact with young people who had received a dysfunctional service and had proved to be a powerful piece of work.

HH worked on a two year cycle and was keen undertake do more projects that would have an impact. To this end, new and innovative ways were being developed to gather individuals' thoughts and experiences of local services. HH hoped to look into the following issues over the next two years:

- unsafe discharges;
- maternity services;
- CAMHS;
- Primary care - possibly something around the new model at the heart of all NHS strategic approaches;
- Care homes; and
- Shaping a healthier future (SaHF) - which was driving change across health services in North West London (NWL).

It was noted that there were issues with regard to patients finding it difficult to cancel their GP appointments. Members were advised that HH was aware of issues around primary care (the organisation received more calls about primary care than anything else) and that this would be included as a future work stream. Mr Maslen advised that HH and the Council were members of a primary care access group that had been established to look at these issues. In addition, HH tended to contact specific surgeries in relation to issues raised by residents and that they were generally responsive. It was noted that the External Services Scrutiny Committee would be looking to undertake a major review of primary care / GP issues during this municipal year.

Mr Maslen advised that HH had limited powers but that it was aware of the conflict of interest with the CCG joint commissioning services from other GPs. He noted that

HH's role would be to continue monitor these arrangements to ensure that the conflict was being dealt with appropriately and advised that he had attended a joint commissioning meeting that afternoon.

HH was aware that CAMHS was underfunded on a national and local level and that additional funding to support the service would be welcomed. However, Mr Maslen noted that not all service improvements had costs attached and that an inefficient organisation was also a high cost organisation.

Members were advised that NHS England was driving service changes in NWL through the SaHF programme. Although the programme had initially only included clinical indicators of success, HH influence had led to the inclusion of softer indicators which were now in place.

Members congratulated HH on the work that the organisation had undertaken and the progress that it had made. Mr Maslen advised that HH funding was more secure than Healthwatch in other parts of NWL as a result of good relations with the Council. This had meant that HH had secured a two year contract with the Council, enabling the organisation to plan with the confidence and resources that it needed.

Although HH had 'enter and view' powers, these had not yet been formally used. However, should HH become aware of anything untoward, it would give notice and then go in to inspect the service. Mr Maslen advised that, when HH had previously had concerns, the agency involved had been cooperative so there had been no need to use the 'enter and view' power.

The Committee was advised that the Council had a care services inspection team which had responsibility under the Care Act to undertake announced and unannounced inspections. These inspections were often informed by intelligence from HH. Mr Maslen was not aware of any other local organisations that had this power.

It was noted that CNWL had recently been inspected by the Care Quality Commission (CQC) and that the resultant report had not been particularly good. Mr Maslen stated that CNWL provided services in a number of NWL boroughs as well as Milton Keynes and Camden but that Hillingdon did not seem to be getting a 'fair crack of the whip'. This issue had been raised with CNWL's Chairman but had not yet been progressed.

The Chairman noted that HH had contributed significantly to health improvements in Borough during a very short period. Although some of the issues dealt with by HH could be deemed to be small, these were not insignificant matters to those that were facing them.

RESOLVED: That the report and presentation be noted.

19. **SAFER HILLINGDON PARTNERSHIP PERFORMANCE MONITORING** (*Agenda Item 6*)

Mr Ed Shaylor, the Council's Community Safety Manager, advised that the report had been split into two parts:

- Part 1 - the Safer Hillingdon Partnership's (SHP) performance in 2014/2015; and
- Part 2 - the SHP's new objectives for 2015/16 and performance to date.

With regard to the 2014/15 target in relation to at least 70% of reporters of ASB to the Council being satisfied, it was noted that the survey had identified a 50% satisfaction

level, thus missing the target. It was noted that this did not align with the Council's self assessment of its performance which had identified that 87% of ASB cases reported to the Council were closed with successful outcomes. Mr Shaylor stated that there were reports which could be easily classed as having a successful outcome, e.g., the removal of an abandoned vehicle. However, the Council also classed reports that were referred on to TfL, the Environment Agency and other agencies (when they were outside the purview of the authority) as successful (as the Council had fulfilled its duty) even though the issue that had been reported had not been resolved at that point. The Committee suggested that these instances should not be classed as successful as the issue had not actually been resolved.

Mr Shaylor advised that changes had since been made to the way that the Council dealt with reports of ASB but that further work was still required with regard to the speed with which action was taken by the Council. In addition, information about what residents could expect from the service had been included in Hillingdon People.

Members were advised that ensuring priority Integrated Offender Management (IOM) offenders were provided with additional support would be part of the London Crime Prevention Fund project which was still under negotiation. It was noted that Trinity Housing and other housing associations provided housing for many offenders. Whilst it was important to ensure that offenders could lead a stable life, it was also recognised that housing provision for them, many of whom were single men, tended to be in Houses of Multiple Occupation (HMOs) as this was a more affordable option and therefore more sustainable. Mr Shaylor advised that it was difficult to balance this provision of housing with the wishes of other residents in the Borough.

Mr Shaylor acknowledged that the targets in relation to reducing risk factors associated with youth offending had been missed in 2014/2015. He advised that these targets had been removed from for 2015/2016 as it was an issue being monitored and addressed by the Youth Offending Service (YOS) Management Board and Children's Services. It was noted that the number of young offenders in Hillingdon was small but that, during 2014/2015 there had been a slight increase (about 200 had been identified and 125 had gone before a court).

The Committee welcomed the partnership working that had been illustrated in the 2014/2015 report and commended the new streamlined reporting format for the current year.

RESOLVED: That the report and presentation be noted.

20. **LONDON FIRE BRIGADE - PREVENTATIVE WORK** (*Agenda Item 7*)

Mr Richard Claydon, Borough Commander of the London Fire Brigade (LFB) in Hillingdon, advised that he had worked for the LFB for 30 years, during which time he had been Commander in three boroughs. Mr Claydon had been in post at Hillingdon for three months and noted that, from an LFB perspective, the Borough was very safe, ranking in the mid twenties of the 33 London boroughs.

Members were advised that there had been a 50% reduction in the number of incidents in Hillingdon and that the Borough received approximately 3,000 calls. There were four fire stations in Hillingdon, one aerial platform and five fire engines.

Mr Claydon advised that, in the last six months, there had been:

- 60 dwelling fires, with eight fire injuries that required hospital treatment (there

- had been 156 dwelling fires with 25 fire injuries in the last 12 months); and
- 117 arsons. Of the 223 arsons in the last 12 months, 30 had been set on the RAF Uxbridge site during the schools holidays. The LFB had worked closely with the site security team, the RAF police and the Metropolitan Police Service to address the issue. Although there had been no prosecutions, there had been no further arsons on the site.

With regard to outdoor rubbish fires, Members noted that LFB had been working with Mr Shaylor and his team. Fire crews checked hotspots on a daily basis and reported the presence of rubbish to the Council so that it could be cleared.

Members were advised that the Safe Drive Stay Alive programme was led and funded by TfL in London and was aimed at young people in sixth form. The programme would be held in November 2015 and would include a number of VIP days which Members were invited to attend.

Mr Claydon noted that, with regard to hoax calls, the LFB had schools led teams that concentrated on high risk areas - there were few high risk areas in Hillingdon. Although the 36 first schools in Hillingdon were deemed low risk, a new engagement initiative had been introduced to talk to these young people about fire safety as well as the implications of making hoax calls.

The LFB had completed 2,614 Home Fire Safety Visits (HFSV) in the last rolling 12 month period (against a target of 2,400) with 86% of these being undertaken with vulnerable people (against a target of at least 80%). Further plans were being developed to increase this number even further. It was noted that HFSV were available to anyone. As well as being able to fit smoke alarms and talk to the householders about what they would do in case of a fire, these visits also enabled the LFB to identify vulnerable individuals and refer them to partner agencies.

Mr Claydon stated that those at biggest risk of fatal fires were vulnerable people that were unknown to the LFB. As such, effort was made to ensure that front line staff (e.g., carers) made the authorities aware of any vulnerable people so that this information could be shared appropriately. Once the LFB was aware of a vulnerable person, they were able to undertake a risk assessment and fit smoke detectors within 48 hours. Members were advised that the LFB could also offer free fire resistant bedding to vulnerable individuals when appropriate.

The Committee was advised that Mr Claydon chaired the Vulnerable Persons Panel (VPP) where the agencies reviewed cases where it was harder to engage with an individual. The Panel reviewed approximately 4-6 cases each month and there were currently 3-4 outstanding cases. Since chairing the VPP, Mr Claydon had introduced an immediate referral scheme.

The annual Junior Citizen's Programme (JCP) would next be held in March 2016 and was aimed, through schools, at 10-11 year olds (Year 6 pupils). The JCP, which was funded by the Council, involved partner agencies and enabled the LFB to talk to these young people about fire safety and prevention. Mr Claydon advised that Hillingdon's JCP was seen as the best in London and only cost the Council £8k.

As this was an annual event, it was anticipated that the majority of children in the Borough would pass through the scheme. However, it was noted that, despite sending an annual invitation, two schools continually refused to take part in the Programme. It was suggested that consideration be given to lobbying the Parent and Teachers

Associations and the Boards of Governors at these schools to encourage them to take part.

In addition to the JCP, the LFB visited secondary schools to talk about fire safety. Other engagement initiatives being considered included a summer school and cadets (the latter would be a one year programme, cost in the region of £23k to set up and successful completion would result in the award of an NVQ). Consideration was also being given to the introduction of the LIFE Scheme which would involve up to 15 low level offenders that had dropped out of main stream schooling participating in a week long fire fighter's course. Although the LIFE Scheme would cost approximately £23k to run, the LFB match funded any contributions.

RESOLVED: That the report and presentation be noted.

21. **PROBATION SERVICE - REDUCING REOFFENDING BY ADULT OFFENDERS**
(Agenda Item 8)

Ms Juliet Wharrick, National Probation Service (NPS), advised that she was head of Ealing, Harrow and Hillingdon local delivery. She noted that the NPS and London Community Rehabilitation Company (LCRC) had been established on 1 June 2014 and that the transformation programme that had taken place over the last year had been challenging. The NPS was now part of the Ministry of Justice's Offender Service and was therefore better aligned with the court system. However, the NPS was made up of seven divisions which did not align with local authority areas. It was noted that the NPS was now in a 'stabilisation period' and was completing an effectiveness, efficiency and savings programme to align with the cuts being undertaken by other areas of the public sector.

The NPS was a public body which was tasked with dealing with the most high risk offenders that served longer sentences (there were approximately 15k) - in Hillingdon, the NPS case load was approximately 350. It was responsible for undertaking court based assessments (risk assessment / management) and producing the associated reports.

Ms Wharrick advised that the provision of housing for individuals who had served long term sentences was particularly challenging as there were not enough approved premises and they often had little in the way of family support. Concern was expressed that placing offenders in a House of Multiple Occupation (HMO) with other offenders would not necessarily help them to leave their criminal past behind. Ms Wharrick stated that the NPS did not have access to housing and therefore had little control over where these offenders lived so often had to use the one bedroom accommodation that was available. However, through MAPPA (Multi Agency Public Protection Arrangements), the NPS continued to work hard in the placement of sex offenders.

Ms Niamh Farren, Assistant Chief Officer Hillingdon and Hounslow at the LCRC, advised that ownership of the LCRC transferred to MTCnovo on 1 February 2015. MTCnovo was a joint venture involving MTC (Management Training Corporation - a private American company) and novo (a consortium of public, private and third sector organisations). The LCRC was the largest of the 21 CRCs in the country and managed approximately 25,000 medium and low risk cases.

Members were advised that the LCRC ran accredited programmes and senior attendance centres, led on Integrated Offender Management (IOM), delivered Community Payback and provided support services such as housing, education,

training/employment, mentoring and Restorative Justice. A 'Through the Gate' resettlement service had recently been introduced for prisoners with less than 12 weeks left in custody. As prisoners with shorter sentences were deemed more likely to reoffend, it was anticipated that this early intervention to address their behaviour would reduce the likelihood of them reoffending. The Committee noted that the recent introduction of new legislation had meant that all offenders were now subject to a supervision order, irrespective of the length of their sentence

Improvements introduced by MTCnovo included:

- streamlining administration - to free frontline staff from dealing with paperwork and enable them to focus on direct work with offenders;
- new IT systems - to increase the organisation's efficiency and effectiveness and enable more flexible working; and
- from 7 December 2015, working with offenders in cohorts - to target rehabilitation work more effectively to reduce reoffending: 18-25 year old males; 26-49 year old males; 50+ year old males; women; and those with mental health and intellectual disabilities as their primary presenting need. It was noted that, with regard to the women cohort, there tended to be fewer female offenders, they were often more complex cases (e.g., they may have suffered domestic violence) and therefore needed a multi agency approach.

As the changes made to help reduce re-offending over the last 18 months had not yet come into effect, Ms Farren noted that she would only be able to talk about what the impact was likely to be. However, she was confident that the staff had been engaged throughout the transformation process and the right staff were now in the right place.

It was noted that there had been some slippage with regard to achieving the first quarter targets for 2015/2016 in relation to: 90% of offenders completing their Unpaid Work Requirement (86% achieved) and 90% of offenders successfully completing their programme requirement (86% achieved). Ms Farren advised that these targets had been difficult to set as the 2015/2016 period straddled the move from a cluster arrangement to a cohort arrangement. She noted that the move to cohorts would make it easier to extract Hillingdon-specific data and that she would pass this information to Mr Shaylor for circulation to the Committee. Members were assured that Hillingdon was performing well.

The Committee noted that there were currently approximately 1,000 people in custody, on licence, etc in Hillingdon. They were advised that the Community Payback scheme had been integrated into all of the cohorts and that responsibility for the scheme had returned to LCRC from Serco. Members recalled the Mayoral initiative which had involved Community Payback participants clearing the canal towpath in Hayes. Ms Farren advised that the LCRC would welcome update requests from the Committee in relation to Community Payback and noted that the organisation could now be responsive to requests from local authorities for specific projects to be undertaken for a community benefit.

Members were advised that the LCRC remained committed to maintaining partnership working, particularly in relation to IOM. To this end, the organisation would be introducing a more strategic approach to stakeholder relations.

RESOLVED: That:

- 1. Ms Farren provide Mr Shaylor with Hillingdon-specific data for circulation to Members in relation to:**
 - a. offenders completing their Unpaid Work Requirement; and**

	<p style="text-align: center;">b. offenders successfully completing their programme requirement; and 2. the report and presentation be noted.</p>
22.	<p>WORK PROGRAMME 2015/2016 (<i>Agenda Item 9</i>)</p> <p>Consideration was given to the Committee's Work Programme. It was noted that, since the agenda for this meeting had been published, confirmation had been received that the following representatives from The Hillingdon Hospitals NHS Foundation Trust (THH) would be attending the additional meeting that had been scheduled to specifically look at the CQC's recent re-inspection report:</p> <ul style="list-style-type: none"> • Mr Shane DeGaris - Chief Executive • Professor Theresa Murphy - Director of Patient Experience, Nursing and DIP • Dr Abbas Khakoo - Medical Director <p>It was agreed that the Committee would set up a Working Group (comprising 3 Conservative Members and 2 Labour Members) to undertake a major review of GP pressures. This review would be undertaken following the completion of the review of under 18 alcohol related presentations at A&E which was currently underway.</p> <p>Members requested that the Committee receive an update in relation to the Shaping a healthier future programme at its meeting on 17 November 2015.</p> <p>RESOLVED: That the Work Programme, as amended, be noted.</p>
	<p>The meeting, which commenced at 6.00 pm, closed at 8.23 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran on 01895 250472. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

REPORT TO THE EXTERNAL SERVICES SCRUTINY COMMITTEE - PREVENTING VIOLENT EXTREMISM

Contact: Fiona Gibbs
Telephone: x7035

REASON FOR ITEM

This report provides an update to the External Services Scrutiny Committee in relation to the work being undertaken in Hillingdon with regards the Government's Prevent strategy and the new Prevent Duty as defined within the Counter Terrorism and Security Act 2015.

OPTIONS OPEN TO COMMITTEE

The Committee is asked to note the contents of the report and ask questions of the Stronger Communities Manager to clarify any matters.

INFORMATION

1. Introduction

CONTEST is the Government's counter terrorism strategy; its aim is to reduce the risk to the UK and its interests overseas from terrorism.

PREVENT is a key part of the CONTEST strategy, its aim is to stop people becoming terrorists or supporting terrorism. Early intervention is at the heart of "Prevent" in diverting people away from being drawn into terrorist activity. "Prevent" happens before any criminal activity takes place. It is about recognising, supporting and protecting people who might be susceptible to radicalisation.

Radicalisation is defined as the process by which people come to support terrorism and extremism and, in some cases, to then participate in terrorist groups.

"**Extremism** is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas" (*HM Government Prevent Strategy 2011*)

The Prevent Strategy objectives are:

- **Ideology** - respond to the ideological challenge of terrorism and the threat we face from those who promote it;
- **Individuals** - prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support; and
- **Institutions** - work with sectors and institutions where there are risks of radicalisation which we need to address.

CHANNEL is a key element of the "Prevent" strategy and is a multi-agency approach to protect people at risk from radicalisation. Channel uses existing collaboration between local authorities, statutory partners (such as education and health sectors, social services, children's and youth services and offender management services), the police and the local community to:

- identify individuals at risk of being drawn into terrorism; and
- assess the nature and extent of that risk; and develop the most appropriate support for the individuals concerned.

Channel is about safeguarding children and adults from being drawn into committing terrorist-related activity. It is about early intervention to protect and divert people away from the risk they face before illegality occurs.

Counter Terrorism and Security Act 2015

Section 26 of the Counter-Terrorism and Security Act 2015 (the Act) places a duty on certain bodies ("specified authorities" listed in Schedule 6 to the Act), in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism". (Prevent Duty Guidance for England and Wales 2015:

<https://www.gov.uk/government/publications/prevent-duty-guidance>)

Within the duty, there are specific responsibilities and considerations highlighted for different agencies, with a number of common themes throughout, including:

- Partnership working;
- Risk assessment and Safeguarding. Identifying and providing support to those who might be vulnerable to radicalisation and supporting terrorism;
- Safety online; and
- Building resilience and community cohesion.

2. Implications for Hillingdon

Co-ordination and Partnership working

The Local Authority has a role in providing leadership within their area. To establish a local plan based upon agreed risk. To co-ordinate "Prevent" activity that is proportionate and is informed through partnership working, with multi agency and community involvement.

"We expect local authorities to use the existing counter-terrorism local profiles (CTLPs), produced for every region by the police, to assess the risk of individuals being drawn into terrorism. This includes not just violent extremism but also non-violent extremism, which can create an atmosphere conducive to terrorism and can popularise views which terrorists exploit.

This risk assessment should also be informed by engagement with Prevent co-ordinators, schools, registered childcare providers, universities, colleges, local prisons, probation services, health, immigration enforcement Youth Offending Teams and others, as well as by a local authority's own knowledge of its area." (Prevent Duty Guidance for England and Wales)

Safeguarding responsibilities

Working Together to Safeguard Children

<https://www.gov.uk/government/publications/working-together-to-safeguardchildren> identifies exposure to, or involvement with, groups, or individuals who condone violence as a means to a political end as a particular risk for some children. All children and young people's partnerships should have an agreed process in place for safeguarding vulnerable individuals including children's, transition and adult's services. Local Safeguarding Children Boards (LSCBs) and local authorities should ensure they are informed of the particular risks in their area.

3. Current work

Currently in Hillingdon, we have been working in the following areas:

1) Partnership working

There is a local Prevent Partnership group that has been in place since 2008 and works together to develop and implement an annual and local Prevent plan for Hillingdon. This group has a broad membership from both within Council departments and other local statutory services, including: police, probation, Uxbridge College, Brunel University, Schools, mental health and adult services, community health, CCG, Hillingdon and Harefield hospitals, youth offending, children's services, LSCB (Local Safeguarding Children's Board) and safeguarding.

This group meets quarterly and reports into the Strong and Active Communities Partnership which is a theme group of the local strategic partnership (LSP). Regular updates are also provided to the Safer Hillingdon Board and the LSP Executive as required.

Through this partnership, support and co-ordination of how each organisation is meeting their duties under Prevent are discussed alongside a shared risk assessment and agreed proportionate approach for the Borough. Advice and support to partners is also provided by the Stronger Communities Manager as the Council's Prevent lead.

2) Support for vulnerable individuals

Within the London Borough of Hillingdon, there is a Prevent Multi-Agency Partnership group that is responsible for coordinating work on this agenda and collectively managing referrals and local concerns. The "Channel" process is established in Hillingdon, which consists of a referral process and processes for responding to identified risk and need, and in providing appropriate support.

Through the LSCB, we are working collectively with partners to ensure that any safeguarding concerns are managed effectively and in a co-ordinated manner across all agencies.

Currently, guidance is being drafted for dissemination to local organisations with regards the Prevent duty and how to respond and make referrals when there are concerns.

3) Information sharing and identification of local needs

There is an information exchange/protocol in place between the Council and Police and regular meetings are held where information, intelligence and local concerns are discussed, and any actions required at a local level are agreed. This sharing of information helps to inform any local risk assessment and local action plans.

4) Training and awareness raising

A programme of training for staff and other stakeholders in relation to Prevent is ongoing. The facilitation of these sessions has been accredited by the Home Office and delivered by the Stronger Communities Manager. These sessions are open to all Council staff as appropriate and to external partners, including schools.

Approximately 800 staff from across the Council and partner agencies, including schools, have received this training since October 2014.

Training is undertaken at the Council as well as sessions undertaken within agencies' venues.

Schools, in particular, have been increasing their demand for support, advice and training for staff, to ensure that they are able to meet the requirements of the new duty.

5) Work with our communities

Engagement with the community is a key aspect of the Prevent work. Hillingdon Inter Faith Network (HIFN) plays a key role in enabling us to work together with our faith communities in promoting greater understanding and strengthening relationships. HIFN is a member of the Strong and Active Communities Partnership and there are a number of initiatives that have been developed in partnership with them. These include: the Annual Peace walk, Annual Inter Faith week events, Inter Faith workshops in schools and regular themed network meetings on community issues. We have also established an emergency response network of faith leaders to support our management of any incidents or community concerns.

Through the Strong and Active Communities Partnership, a broader approach has been established to promoting community involvement, inclusion, access to local services and participation in learning, leisure, arts and culture underpin the aim of building stronger and more resilient communities.

Agenda Item 6

EXTERNAL SERVICES SCRUTINY COMMITTEE - WORK PROGRAMME 2015/2016

Contact Officer: Nikki O'Halloran
Telephone: 01895 250472

REASON FOR ITEM

To enable the Committee to plan and track the progress of its work in accordance with good project management practice.

OPTIONS OPEN TO THE COMMITTEE

Members may add, delete or amend future items included on the Work Programme. The Committee may also make suggestions about future issues for consideration at its meetings.

INFORMATION

1. The Committee's meetings tend to start at either 5pm or 6pm and the witnesses attending each of the meetings are generally representatives from external organisations, some of whom travel from outside of the Borough. The meeting dates for the remainder of the municipal year are as follows:

Meetings	Room
Thursday 8 October 2015 - 6pm	CR3 & CR3a
Tuesday 17 November 2015 - 6pm	CR6
Tuesday 12 January 2016 - 6pm	CR6
Tuesday 16 February 2016 - 6pm	CR3 & CR3a
Tuesday 15 March 2016 - 6pm	CR5
Tuesday 26 April 2016 - 6pm	CR5

2. The Committee last received an update in relation to the Better Care Fund (BCF) at its meeting on 28 April 2015. Subject to the timetabling of consideration of the BCF Plan at Cabinet, it is suggested that the Committee receive an update at its meeting on 12 January 2016.

Future Topics

3. The Committee has made the following suggestions for possible future single meeting or major review topics and update reports:
 - a) CQC Inspection of London Ambulance Service NHS Trust - To review the findings of the CQC report in relation to its inspection of LAS that was undertaken in June 2015
 - b) Female genital mutilation (FGM)
 - c) Child Sexual Exploitation (CSE)
 - d) Probation Service
 - e) frequent callers (links between the police, health services and Council services)
 - f) Drug treatment and substance misuse update
 - g) CNWL - to look at reasons why issues for action already identified by the Trust prior to the CQC inspection had not previously been resolved

- h) CAMHS - possible joint major review with Children, Young People and Learning POC

4. Consideration will need to be given to which of these topics will be pursued and the associated timings.

Major Review

5. At its meeting on 17 September 2015, it was agreed that the Committee's second major review during this municipal year would be in relation to GP pressures. A Working Group, comprising three Conservative and two Labour Group Members, will be set up to undertake the review. It is anticipated that the scoping report for the review will be considered by the Committee at its meeting on 17 November 2015.

EXTERNAL SERVICES SCRUTINY COMMITTEE
2015/2016 WORK PROGRAMME

NB – all meetings start at 6pm in the Civic Centre unless otherwise indicated.

Shading indicates completed meetings

Meeting Date	Agenda Item
17 June 2015	<p>Major Review: Consideration of a scoping report and the formulation of a Working Group to undertake a major review on behalf of the Committee</p> <p>Quality Account Reports & CQC Evidence Gathering To receive a presentation from the London Ambulance Service NHS Trust on its Quality Account 2014/2015 report</p>
14 July 2015	<p>Health Performance updates and updates on significant issues:</p> <ul style="list-style-type: none"> • The Hillingdon Hospitals NHS Foundation Trust • Royal Brompton & Harefield NHS Foundation Trust • Central & North West London NHS Foundation Trust • The London Ambulance Service NHS Trust • Local Medical Committee • Local Dental Committee • Public Health • Hillingdon Clinical Commissioning Group • Care Quality Commission (CQC) • Healthwatch Hillingdon <p>Update on the implementation of recommendations from previous scrutiny review:</p> <ul style="list-style-type: none"> • Policing and Mental Health

Meeting Date	Agenda Item
17 September 2015	<p>Crime & Disorder To scrutinise the issue of crime and disorder in the Borough:</p> <ul style="list-style-type: none"> • London Borough of Hillingdon • Metropolitan Police Service (MPS) • Safer Neighbourhoods Team (SNT) • London Fire Brigade • London Probation Area • British Transport Police • Hillingdon Clinical Commissioning Group (CCG) • Public Health <p>Health To receive a performance update and the annual report of Healthwatch Hillingdon</p>
30 September 2015	<p>THH CQC Re-Inspection To scrutinise the report published on 7 August 2015 as a result of the CQC re-inspection of THH.</p>
8 October 2015	<p>Prevent Update on counter terrorism work being undertaken in the Borough.</p>
17 November 2015	<p>Health Performance updates and updates on significant issues:</p> <ul style="list-style-type: none"> • The Hillingdon Hospitals NHS Foundation Trust • Royal Brompton & Harefield NHS Foundation Trust • Central & North West London NHS Foundation Trust • The London Ambulance Service NHS Trust • Local Medical Committee • Local Dental Committee • Public Health • Hillingdon Clinical Commissioning Group • Care Quality Commission (CQC) • Healthwatch Hillingdon <p>Shaping a healthier future To receive an update on the progress of the <i>Shaping a healthier future</i> programme</p> <p>Major Review 1: Consideration of final report from the Working Group</p> <p>Major Review 2: Consideration of the scoping report</p>

Meeting Date	Agenda Item
12 January 2016	Better Care Fund Update
16 February 2016	<p>Crime & Disorder To scrutinise the issue of crime and disorder in the Borough:</p> <ul style="list-style-type: none"> • London Borough of Hillingdon • Metropolitan Police Service (MPS) • Safer Neighbourhoods Team (SNT) • London Fire Brigade • London Probation Area • British Transport Police • Hillingdon Clinical Commissioning Group (CCG) • Public Health <p>Update on the implementation of recommendations from previous scrutiny reviews:</p> <ul style="list-style-type: none"> • Policing and Mental Health • Child Sexual Exploitation • Family Law Reforms
15 March 2016	Major Review 1: Consideration of final report from the Working Group
26 April 2016	<p>Quality Account Reports & CQC Evidence Gathering To receive presentations from the local Trusts on their Quality Account 2014/2015 reports and to gather evidence for submission to the CQC:</p> <ul style="list-style-type: none"> • The Hillingdon Hospitals NHS Foundation Trust • Royal Brompton & Harefield NHS Foundation Trust • Central & North West London NHS Foundation Trust • The London Ambulance Service NHS Trust • Hillingdon Clinical Commissioning Group • Care Quality Commission (CQC) • Healthwatch Hillingdon • Local Medical Committee • Local Dental Committee • Public Health
Possible future single meeting or major review topics and update reports	<ol style="list-style-type: none"> 1. CQC Inspection of London Ambulance Service NHS Trust - To review the findings of the CQC report in relation to its inspection of LAS that was undertaken in June 2015 2. Female genital mutilation (FGM) 3. Child Sexual Exploitation (CSE)

PART I – MEMBERS, PUBLIC AND PRESS

Meeting Date	Agenda Item
	<ol style="list-style-type: none">4. Probation Service5. frequent callers (links between the police, health services and Council services)6. Drug treatment and substance misuse update7. CNWL - to look at reasons why issues for action already identified by the Trust prior to the CQC inspection had not previously been resolved8. CAMHS - possible joint major review with Children, Young People and Learning POC

MAJOR SCRUTINY REVIEW BY WORKING GROUP

Members of the Working Group:

- Councillors Allen, Dann, Denys, East and Gilham

Topic: Alcohol related presentations at Accident and Emergency amongst children and young people in Hillingdon

Meeting	Action	Purpose / Outcome
ESSC: 17 June 2015	Agree Scoping Report	Information and analysis
Working Group: 1st Meeting - 2pm, 15 September 2015, CR3a	Introductory Report / Witness Session 1	Evidence and enquiry
Working Group: 2nd Meeting - 2pm, 29 September 2015, CR9	Witness Session 2	Evidence and enquiry
Working Group: 3rd Meeting - 2pm, 27 October 2015, CR9	Draft Final Report	Proposals – agree recommendations and final draft report
ESSC: 17 November 2015	Consider Draft Final Report	Agree recommendations and final draft report
Cabinet: 17 December 2015	Consider Final Report	Agree recommendations and final report

Additional stakeholder events, one-to-one meetings and site visits can also be set up to gather further evidence.

MAJOR SCRUTINY REVIEW BY WORKING GROUP

Members of the Working Group:

- Councillors TBA (3 Conservative / 2 Labour)

Topic: GP finances and the associated pressures (what will GP practices look like in five years?)

Meeting	Action	Purpose / Outcome
ESSC: 17 November 2015 2015	Agree Scoping Report	Information and analysis
Working Group: 1st Meeting - TBA	Introductory Report / Witness Session 1	Evidence and enquiry
Working Group: 2nd Meeting - TBA	Witness Session 2	Evidence and enquiry
Working Group: 3rd Meeting - TBA	Draft Final Report	Proposals – agree recommendations and final draft report
ESSC: 15 March 2016	Consider Draft Final Report	Agree recommendations and final draft report
Cabinet: 21 April 2016	Consider Final Report	Agree recommendations and final report

Additional stakeholder events, one-to-one meetings and site visits can also be set up to gather further evidence.