

Minutes of a meeting of the Keighley Area Committee held on Thursday 11 February 2016 at Keighley Town Hall, Bradford

Commenced 1800
Concluded 2025

PRESENT – Councillors

CONSERVATIVE	LABOUR
Ali	Farley
Brown	Khadim Hussain
Rickard	M Slater
B M Smith	

Councillor Hussain in the Chair

45. DISCLOSURES OF INTEREST

No disclosures of interest in matters under consideration were received.

46. MINUTES

Resolved –

That the minutes of the meeting held on 3 December 2015 be signed as a correct record.

47. INSPECTION OF REPORTS AND BACKGROUND PAPERS

There were no appeals submitted by the public to review decisions to restrict documents.

48. PUBLIC QUESTION TIME

There were no questions submitted by the public.



49. **NOMINATION TO LIST LAND AND ASSETS AS ASSETS OF Worth Valley COMMUNITY VALUE – THE COMMUNITY CENTRE, SHAW LANE, OXENHOPE, KEIGHLEY**

The Strategic Director, Regeneration, presented a report, (**Document “V”**) which detailed a nomination to list property known as The Community Centre, Shaw Lane, Oxenhope, Keighley, as an Asset of Community Value under the Localism Act 2011.

It was confirmed that the nomination and nominated asset met the Asset of Community Value criteria set out in the Localism Act.

Resolved –

That, in accordance with the advice detailed in Option 1 of Document “V”, the nomination of the property known as The Community Centre, Shaw Lane, Oxenhope, Keighley, be approved as an Asset of Community Value.

***OVERVIEW AND SCRUTINY COMMITTEE: Regeneration and Economy
ACTION: Strategic Director, Regeneration***

50. **NOMINATION TO LIST LAND AND ASSETS AS ASSETS OF Worth Valley COMMUNITY VALUE – HORSESHOE DAM, OXENHOPE, KEIGHLEY,**

The Strategic Director, Regeneration, presented a report, (**Document “W”**) which detailed a nomination to list property known as Horseshoe Dam, Oxenhope, Keighley, as an Asset of Community Value under the Localism Act 2011.

It was confirmed that the nomination and nominated asset met the Asset of Community Value criteria set out in the Localism Act.

Resolved –

That, in accordance with the advice detailed in Option 1 of Document “W”, the nomination of the property known as Horseshoe Dam, Oxenhope, Keighley, be approved as an Asset of Community Value.

***OVERVIEW AND SCRUTINY COMMITTEE: Regeneration and Economy
ACTION: Strategic Director, Regeneration***

51. **ARRANGEMENTS BY THE COUNCIL AND ITS PARTNERS TO TACKLE CHILD SEXUAL EXPLOITATION**

Previous reference: Minute 30, Executive (2015/16) and Keighley Area Committee Minute 72 (2014/15)

The Interim Assistant Director of Children’s Specialist Services submitted **Document “X”** which provided an update to the report presented to the Council Executive on 13th January 2015 and subsequently to the District’s Area Committees regarding the issue of



child sexual exploitation (CSE). It set out the arrangements that have been put in place, and which continue to develop, to safeguard children from CSE.

The Bradford Safeguarding Children Board (BSCB) Manager introduced the report and explained that appended to Document "X" was a summary of specific activity to address CSE issues in the Keighley area which had been prepared by the Keighley Area Co-ordinator.

Information on the prevalence of CSE in the district was provided and the numbers of children identified as being at risk of CSE was discussed. It was explained that children at risk of abuse were categorised in one of three risk groups. For children at the highest level of risk there would be a multi agency plan of action and criminal investigations. Those classified as medium risk would be the subject of focused intervention and those classed as low risk would require preventative support.

The number of children identified as at risk as at 10 February 2016 in the Bradford district was reported. The proportion of those children in the Keighley constituency was discussed and it was confirmed that the majority of those cases were in the medium to low risk category.

The report identified that across the district there was a low representation of males, particularly in the medium and high risk groups and it was felt this emphasised the importance of continuing awareness raising and training to ensure people were aware of the risk, incidence and impact of CSE on boys and young men.

Members were advised of a significant amount of preventative work being undertaken across the district and of specific activities in the Keighley area. Those activities included 48 performances of a play touring around schools and some community groups in Keighley regarding CSE and related issues of child safety. The vast majority of the performances had taken place in secondary schools. Positive feedback had been received and an example of which was that prior to the performance 57% of pupils could describe behaviour which they felt made people vulnerable to CSE. Following the performances that statistic had increased to 98%. To complement the play pupils were provided with pre performance and post performance lesson plans. The number of pupils indicating concerns following the performance was also discussed and it was believed that those concerns were attributable to the information gained from the production. It was planned to provide a revised version of the play and materials to be piloted to primary school pupils in Year 6 commencing in the summer term. A Member who was a governor at a local secondary school reported the positive feedback he had received about the performances.

Following a very detailed presentation of the report a number of issues were raised to which the following responses were provided:-

- Negotiations had been held with the company providing the play to provide additional performances at a reduced cost. Two schools in Keighley had requested additional performances to be held for parents and positive responses had been received. The parents did not have the benefit of pre and post performance lesson plans but feedback had indicated a raised level of awareness following the performances.



- CSE awareness sessions in the district included meetings with women and young people at the Keighley Association Women and Children’s Centre; support provided through the Hand in Hand project; informal education work with young people provided by the Youth Service and ‘United Keighley’ a grass-roots community based campaign led by the Keighley Town Chaplain and a multi-faith advisory group.
- Responses from awareness sessions were being used to facilitate a week of action planned for March 2016. Places where CSE could be discussed in a safe way would be provided during that week.
- The statistics provided were correct as of 10 February 2016. There had been a steady rise in reports of CSE since the establishment of “the Hub” as a single point of contact for all agencies to refer concerns they had about children who may be at risk or to share information about potential offenders. The effectiveness of information sharing was attributed to the rise in those figures.
- There had been an increased number of people reporting they were previous victims of CSE who now felt that they were able to disclose that abuse. There were currently a number of ‘live’ investigations into historic cases across the district and it was felt that the number of victims may increase as those investigations progressed and people who had come forward identified others.
- A number of the adults reporting historic CSE were people whose concerns may not have been adequately considered in the past. It was explained that ‘victimless’ prosecutions had not been considered at that time. Differing approaches taken more recently had resulted in more successful outcomes.
- Funding from the West Yorkshire Police and Crime Commissioner to strengthen the District’s response to CSE had provided resources for an additional analyst to focus on the issue; examine missing children data and provide preventative work in schools which would be used to develop a primary school play regarding CSE and related issues of child safety. The funding had been for an initial one year period and discussions were being held to extend that funding into a second year. Whilst short term funding was welcomed it was aimed to develop funding streams to provide more sustainable support.
- The number of Looked After Children (LAC) who were identified at risk of CSE was provided. It was explained that there were some children who had become LAC because they were at risk of CSE and those children were not included in the figure provided.
- Each week there were operational meetings to monitor development on high risk cases. Cases were monitored at a strategic level and each person at risk would be the subject of a multi-agency plan which would be reviewed on a regular basis. Some children were subject to Child Protection Plans and some would have a Child in Need Plan. Assurances were provided that each child’s risk rating would be regularly reviewed.



- In response to questions about the involvement of the Strategic or Assistant Directors it was felt that those questions would be most accurately answered by the directors and it was agreed to provide a direct response after the meeting. Assurances were provided that areas of concern were brought to the attention of the Assistant Director, Children's Specialist Services. In addition the Chief Executive received regular reports on CSE and she had raised matters with the Strategic Director to ascertain progress.
- A large number of voluntary groups were involved in preventative work across the Keighley district; however, guaranteed could not be provided that all groups were engaged. Engagement was increasing with groups from Black and Minority Ethnic (BME) backgrounds and relationships with emerging groups representing people from Eastern European backgrounds were being developed. It was believed that engagement with voluntary groups in Keighley was further advanced than in other parts of the district.

Resolved –

That the Assistant Director be thanked for the provision of an informative report and be requested to consider the comments made by Members when undertaking future corporate scrutiny in this area.

OVERVIEW AND SCRUTINY COMMITTEE: Children's Services

ACTION: Strategic Director, Assistant Director, Children's Services

52. PUBLIC HEALTH FUNCTION IN BRADFORD METROPOLITAN DISTRICT COUNCIL

The report of the Director of Public Health, (**Document "Y"**) provided an update on the work of the Public Health Department over the previous twelve months.

The report detailed public health services for children; the work of the Public Health Obesity Team; Stop Smoking services; Sex and Relationships Education team; and actions taken to reduce harm from drug and alcohol misuse across the district. A summary was also provided of wider determinants of health and health service Improvement measures.

Members discussed the average Index of Multiple Deprivation (IMD) score contained at Appendix 1 to Document "Y" and noted that the Keighley Central Ward had the highest rating. In response to questions about IMD figures it was confirmed that the areas of highest deprivation were treated as a priority.

Members questioned the lack of data to reveal progress on the work of the Public Health Department. They requested that clear objectives and details of progress against performance be presented to allow the effectiveness and value for money of those objects to be assessed. In response they were advised that district wide data was available but it was difficult to break down the information on a ward basis. Services delivered in individual wards were, on occasions, used by residents not residing in that ward. It was agreed that, where possible, the information requested would be provided in future reports and that data for the previous three years would be provided to reveal any trends.



The report revealed that over the past 12 months uptake of the seasonal flu vaccine had varied. The rationale for that variation was queried. It was explained that the view of NHS England was that low take up was due to ineffectiveness of the vaccine against a new strain of the illness which had emerged last year. It was agreed that take up of the vaccine would need to be encouraged.

Resolved –

- (1) That the report be welcomed.**
- (2) That the Director of Public Health be requested to consider the comments and requests made by Members when producing future update reports on the work of the Public Health Department.**

**OVERVIEW AND SCRUTINY COMMITTEE: Health and Social Care
ACTION: Director of Public Health**

53. AIREDALE, WHARFEDALE AND CRAVEN CLINICAL COMMISSIONING GROUP

Previous reference: Minute 54 (2014/15)

The report of the Strategic Director, Environment and Sport (**Document “Z”**) informed Members of the objectives, performance and plans of the Airedale, Wharfedale and Craven Clinical Commissioning Group (CCG) and requested their views and comments.

Representatives of the CCG addressed the meeting and provided a detailed presentation including:-

- The CCG’s population and the geographical area covered
- Facts about the health of the CCG population and average spend per year on hospital; community and mental health services
- The structure, including decision making, of the CCG
- Patient and public engagement
- Strategic objectives
- Performance during 2014/15 and 2016 to date
- Commissioning
- Plans for the next two to five years

It was explained that the Airedale, Wharfedale and Craven CCG was one of the smallest and that the distinct geographical/social composition and diverse ethnic and cultural make up presented many challenges in the way services were delivered.

The structure of the CCG was discussed and Members were advised that changes to the decision making structure from 1 April 2016 would bring together a joint decision making body. The rationale for that change was questioned and it was explained that the CCG were unusual in their previous approach and the change would be more in line with the



way the Primary Care Trust had previously operated. The meetings would be held in public and provide a more open and transparent decision making structure. The potential for General Practitioners (GP's) to have a conflict of interest when making funding decisions was raised and assurances were provided that in those circumstances they would be removed from making those decisions. The scrutiny of the new arrangements was questioned and it was explained that there were lay member positions in post and scrutiny would be carried out by them. The meeting would be open to the public and, therefore, open to scrutiny by those attendees also. A lay member in attendance at the meeting provided assurances that processes were in place to deal with any conflict of interest. She felt that as a lay person she would scrutinise and contribute to better decision making. She clarified that her role was to engage with the public and ensure that they understood the CCG and could challenge the group. It was explained that the ability to scrutinise the CCG had to be demonstrated to NHS England.

Concern was expressed that the new arrangements would not assist the personal development of members as much as the previous structure had done.

Members questioned why NHS England did not purchase care homes from providers who were going out of business to increase bed capacity for those patients 'bed blocking' in hospital. It was agreed that delayed transfer of care was a serious issue; however, the view of the CCG was that patients should be discharged to home. Much work was being undertaken to provide wrap around care.

The purchase of hospital services was discussed and the way those services were monitored and controlled was questioned. Assurances were provided that performance indicators had been established and financial penalties were imposed for under performance. The response times for the ambulance service was a national issue, however, meetings had been held and measures put in place to improve the service. There were a number of rapid response cars in the district. The target to respond to calls within eight minutes was a challenge because of the geography and volume of traffic in the area. It was agreed to provide details of performance to the Keighley Area Co-ordinator to provide Members with more information about the service in the area. Work was also required to address inappropriate emergency calls in the area.

Potential measures to address the number of patients who failed to attend hospital appointments were suggested by Members. The representatives of the CCG explained that engagement with the public would encourage them to take responsibility and use the service responsibly. It was agreed to provide statistics on the number of missed appointments in a future report.

The strategic objectives set out in Document "Z" were discussed and a Member requested that as three of the four of those objectives were reactive it would be helpful to see an analysis of the services commissioned broken down into preventive and reactive services together with details of self care contained in models of care.

The performance of GP surgeries in the Keighley area was discussed and it was explained that the performance of those surgeries was the responsibility of NHS England. Some aspects of the quality could be questioned but the CCG were not direct commissioners of those services.



Resolved –

- (1) That the representatives of the Airedale, Wharfedale and Craven Clinical Commissioning Group be thanked for their attendance and informative presentation.
- (2) That the Strategic Director, Environment and Sport, be requested to consider the comments and requests made by Members when producing future update reports on the work of the Airedale, Wharfedale and Craven Clinical Commissioning Group.

OVERVIEW AND SCRUTINY COMMITTEE: Health and Social Care **ACTION: Strategic Director, Environment and Sport**

54. DISTRICT PLAN AND COUNCIL PLAN DEVELOPMENT

The Assistant Director of Policy, Programmes and Change submitted **Document “AA”** which provided a summary of the approach taken in the development of the District Plan and Council Plan and sought member input at the drafting stage. It was explained that the District Plan would identify how partner organisations across the district would contribute to the delivery of shared outcomes. The Council Plan would identify the Council's contribution to the District Plan.

A Member referred to the principles of the New Deal and his belief that residents would have to become more involved in their local communities. It was explained that the plan would not be able to include all actions but would identify those actions which needed to occur to provide the biggest impact.

A Member suggested that the use of the word partnership was overused and implied a union which could easily be broken. The use of the phrase ‘team Bradford’ was also questioned and it was suggested that the use of platitudes would deter public interest.

In response to questions about public engagement on the new deal it was confirmed that this had begun 18 months previously. It was acknowledged that only certain people were engaged at that time and different types of engagement had since been developed. Initiatives such as the “have a natter” project were reported.

It was confirmed that the engagement work would continue and Members views from a Keighley perspective were requested. The ward planning process was also discussed and it was agreed that the information being provided in the draft reports would be useful input to the plans. The limitations in a 12 page document were discussed and it was agreed that the plans should include how the aspirations identified would be achieved.

Members were advised that a draft of the plans would be available within the next week and would be circulated to Members for information. The Plans would be finalised in April and then forwarded for approval to the Executive and Council.



Resolved –

- (1) That the report be welcomed and the Assistant Director of Policy, Programmes and Change be requested to take on board the comments raised during the meeting as part of the consultation process.**
- (2) That any further contributions which Members wish to be included as part of the consultation process be provided directly to the Assistant Director of Policy, Programmes and Change.**

***OVERVIEW AND SCRUTINY COMMITTEE: Corporate
ACTION: Assistant Director of Policy, Programmes and Change***

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Committee.

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THESE MINUTES HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER

