

## KENT COUNTY COUNCIL

---

### CABINET

MINUTES of A meeting of the Cabinet held in the Darent Room, Sessions House, County Hall, Maidstone on Monday, 17 March 2008.

PRESENT: Mr M J Angell, Mr P B Carter (Chairman), Mr N J D Chard, Mr M C Dance, Mr K A Ferrin, MBE, Mr G K Gibbens, Mr R W Gough, Mr P M Hill, OBE, Mr A J King, MBE and Mr C T Wells

IN ATTENDANCE: Mr G Badman (Managing Director of Children, Families and Education), Mr Gilroy (Chief Executive), Ms A Honey (Managing Director Communities), Ms L McMullan (Director of Finance), Mills (Managing Director - Adult Social Services), Ms M Peachey (Kent Director Of Public Health) and Mr Wilkinson (Managing Director - Environment and Regeneration)

### UNRESTRICTED ITEMS

**1. Minutes of the Meeting held on 6 February 2008**  
(Item. 2)

Subject to the clarification made by Mr Carter in respect of paragraph 2 (2); the Minutes of the meeting held on 6 February 2008 were agreed as a true record.

**2. Revenue & Capital Budgets, Key Activity and Risk Monitoring**  
(Item. 3)

(1) Mr Chard said that the net projected variance against the combined portfolio revenue budgets was an underspend of £7.5m. There were however, two projected overspends, these being £4.3m in respect of the Asylum Service and schools were projecting a draw down of their reserves of some £1.5m, further details of which were provided in the report. Mr Chard said that the report also identified the variances in the actual over and underspends of Capital Schemes and the main areas of under and overspending in 2007/08.

(2) During the course of discussion, Mr Carter updated Cabinet on the actions which continued to be taken in order for the Council to secure from Government the unmet costs relating to Asylum. The Council together with Birmingham City Council and Hillingdon London Borough Council continued to have robust discussions with the Government aimed at bringing this matter to a satisfactory conclusion.

(3) Following further detailed discussion, Cabinet noted the latest monitoring position on both the revenue and capital budgets; the additional revenue grant income as identified in Table 2, and throughout the annexes of the report and the changes to the Capital Programme as detailed in Section 4.1 of the report.

**3. Select Committee: Alcohol Misuse**  
(Item. 4)

(1) Mr Hirst said that the work of the Select Committee had been conducted against a backdrop of change and the continuing process of gathering evidence and information. This work was therefore still in many ways ongoing and had links across to other areas of activity. Mr Hirst spoke about the links that existed between alcohol and drug abuse and the links they in turn had with other social problems. One important way forward was to urgently put in place a wider programme of education highlighting the damaging effects alcohol misuse can have on people's lives. Mr Hirst said that it became very apparent during the work of the Select Committee that young people themselves recognised that alcohol misuse was a major problem, even more so than drugs. Mr Hirst also spoke about the apparent increase in the number of parents who do not seem to be able to cope and this had associated links to other social problems, including the effect alcohol misuse by adults has on children. These links and issues needed to be looked at further. Mr Hirst also said he was disappointed that the recent national budget had failed to make any relationship between taxation and the levels of alcohol in drink. He believed that such a link should be established so that there were higher taxes on drinks containing higher levels of alcohol. In conclusion, Mr Hirst, commended the reports recommendations and thanked his fellow Committee Members and the officers who had supported the Select Committee in its work.

(2) Mrs Dean referred to the links which this report had to other items on the Cabinet agenda for this particular meeting and spoke of the support which this report had from partners involved in this area of work. She said the alcohol industry should be included in the list of partner groups set out in the Action Plan because the marketing policies of the drinks industry had a direct effect on the drinking habits of and those young people in particular. Therefore it was essential that the industry was made part of the partnership approach to dealing with these problems. Mrs Dean spoke about the health agenda and said that there was an apparent reluctance shown by some GP's to engage in these issues. That may be something to do with the fact that there was not a readily identified service that GP's could refer patients onto. However, the result was that people in need of help were not being identified early enough and this was making it more difficult to provide intervention measures at an early state. Part of the Action Plan was to improve the effectiveness of GP's and Primary Care staff by offering a rolling training programme in the early identification and referral of alcohol misusers. Mrs Dean also spoke about the meeting with young people and the message that alcohol was more dangerous than drugs was very powerful and must not be ignored. Also some pupils had said that the teaching of PSHE would be better done by someone not directly associated with the teaching staff and the Select Committee had made some recommendations aimed at bringing a more consistent approach to PSHE education. In conclusion, Mrs Dean said she hoped that the launch of the Select Committee's report would very much be focussed on involving young people.

(3) Mr Newman spoke about the resources available to tackle alcohol misuse and the week on week costs which partners such as the NHS and the Police have to bear in dealing with these issues. Mr Newman said that that there is a sub culture of excessive drinking which was in danger of making alcohol misuse something which was common place. He also spoke about the meeting with young people and said that they had demonstrated a knowledge of the dangers of alcohol misuse which went beyond what one might expect, so it was important that their views were listened to. Mr Newman said that the report was very comprehensive and believed it spoke for itself.

(4) Mr Gilroy said this report was excellent and should be referred onto the Government for its consideration. Alcohol had always been an issue but in the past 20 years, it had become much more readily available and there was more opportunities for it to be misused. The problems associated with alcohol misuse cut across social classes and it was up to the County Council to put energy and focus into the recommendations which the Select Committee had put forward.

(5) Members of Cabinet spoke in support of the work of the Select Committee and its findings. Mr Gibbens placed on record his thanks to the Select Committee and the County Council's partners for this report. He said this was an excellent example of how the County Council worked both with its partners and across Directorates in order to achieve positive outcomes. He endorsed what had been said about ensuring young people were included in the launch of the Select Committee's Report and arrangements would be made to liaise with the Kent Youth County Council to achieve that. Mr Gibbens said he would wish to see regular feedback on progress to Members through the relevant Policy Overview Committees and to Cabinet and also spoke about the fact the National Budget had not taken the opportunity to link tax to the strength of alcoholic drinks. He wished Cabinet to record its disappointment at that fact.

(5) Mr Carter concluded the debate by saying that alcohol misuse was a growing problem which had to be addressed at both a local and national level. The findings of the Select Committee emphasised the fact that prevention was better than cure and it was important to get an understanding of both the social and financial costs which alcohol misuse had on both individuals and communities. He thanked the Select Committee for its excellent work and said its report would also be discussed at a future meeting of the County Council. He also confirmed he would want the county-wide event which was to be arranged in order to launch the report to involve young people via the Kent Youth County Council.

(6) Cabinet then agreed that:-

- (a) the Select Committee be thanked for an excellent report and the witnesses and others who had provided evidence and made valuable contributions to its work also be thanked;
- (b) those partners and stakeholders who took part in the informal round table discussions be thanked for their professional commitment and support;
- (c) the reports, its recommendations and Actions Plans for taking the Select Committee's recommendations forward be commended; and
- (d) support be given to a county-wide event being arranged to launch the report and an event involving young people via the Kent County Council also be arranged.

#### **4. Integrated Youth Support Strategy** *(Item. 5)*

(1) In 2005 the Government published the green paper “Youth Matters” and this linked aspirations for young people to the Every Child Matters agenda. The Integrated Youth Support Strategy explained the process of implementing key elements of “Youth Matters” in Kent and had been developed within the context of current national requirements encompassing within it Kent’s approach to developing positive activities, targeted youth support and providing information and guidance. Mr Carter said that he very much welcomed this report and said that the messages within it should be given wide publicity using media such as Kent TV.

(2) Cabinet endorsed the report and noted the progress in developing the Integrated Youth Strategy.

## **5. Joint Strategic Needs Assessment for Adults (JSNA)**

*(Item. 6)*

(1) The Kent Joint Strategic Needs Assessment for Adults summarised the future health, social care and wellbeing needs for Kent residents. Mr Angell said that this was the first time a Joint Needs Assessment had been produced and it underpinned a considerable amount of local data. The work of the Joint Strategic Needs Assessment had started to influence budget setting and decisions within KCC and the Primary Care Trusts. It was therefore important this continued and that commissioners were supplied with solid research evidence upon which to base their future commissioning decisions. Mr Gilroy said he welcomed this report but there was a need to look at the integration of future commissioning services and look beyond just health and social services and to link these with housing, transport and town planning. Debra Exall said that the needs assessment document was a starting point and work would be undertaken to build and use information to underpin the development of the wider strategic strategies. Oliver Mills said that this was an ongoing process and this was the first time that the range of information set out in the Strategy had been brought together in this way. The development of the Strategy was very much to be seen as an ongoing process and its development and scope would be built upon and expanded in order to form a basis for future actions.

(2) In concluding the discussion, Mr Carter said that along with the other issues which had been identified it was also important for the County Council to address within this process the transitional needs of young people with special needs and provide them with support to help them achieve independent living. Mr Carter also spoke about the need to think now about how the County Council was going to meet the long term challenges as described in the Strategy and discussed during the course of debate.

(3) Cabinet then noted and endorsed the Joint Strategic Needs Assessment for Adults.

## **6. Valuing People Now - From Progress to Transformation**

*(Item. 7)*

(1) Mr Sowerby said that the document “Valuing People” was first published in 2001 and had since been seen as a ground breaking strategy with a clear focus on rights and inclusion. However, it had not – so far – achieved the transformation that

was hoped for of providing “an ordinary life in the community alongside fellow citizens as described by Human Rights Legislation and the Disability Discrimination Act”. Mr Sowerby said possibly the biggest challenge was making sure that the “Valuing People” policy was delivered across all of England and to help achieve this, “Valuing People Now” identified five big priorities that government wished local people (and government itself) to concentrate on. (2) Dawn Johnston and Stephen Chapman then gave a presentation detailing what people have said about the Voice 4 Kent Group and what they would like to see provided in terms of services and support. They had spoken to a wide range of people with learning difficulties at District Partnership Groups, day centres and Speaking – Up Groups over the past few months. The priorities which have now been identified in ‘Valuing People Now’ for the next three years include personalisation – so that people have real choice and control over their lives and services; what people do during the day (and evenings and weekends) – helping people to be properly included in their communities, with a particular focus on paid work; better health – ensuring that the NHS provides full and equal access to good quality healthcare; access to housing – housing that people want and need with a particular emphasis on home ownership and tenancies; and, making sure that change happens and the policy is delivered.

(3) During the course of discussion, Oliver Mills said that there needed to be change across the board and helping people to lead independent lives. Stephen Chapman said that people can find it difficult to find suitable accommodation or to get help in adapting their existing accommodation to meet their individual needs. He also said that some care managers were not always aware of what was available in the way of help. In answer to a question about what one thing he would want to see improved, Stephen said that helping people into employment was a key issue. On another point, he agreed that there was now more educational choice than had once been the case.

(4) Oliver Mills referred to paragraph 2 (3) of the report which set out the proposed response to the consultation. Mr Carter said that the County Council needed to put forward a robust response and he would wish to speak further with Cabinet colleagues before this was finalised. Mr Carter then thanked the Members of the Voice4 Kent Group for attending the meeting. He said he found their views very enlightening and they raised issues which the County Council needed to consider very carefully. He said he would like the Group to come back to a meeting of Cabinet in about 12 months’ time to an update on these issues and what changes had the Group seen in that time.

(5) In noting the recommendations set out in paragraph 4 of the report Mr Carter said he wish to speak further with Cabinet colleagues before a response to the consultation was finalized.

## **7. Kent Health Watch** *(Item. 8)*

(1) In introducing this item, Mr Carter read out a letter which he had received from a Kent resident expressing support for the County Council’s initiative to establish a Kent Health Watch.

(2) Mr Gibbens said that a proposal to establish Kent Health Watch (KHW) built upon KCC’s policy to provide “signposting” and information about the mechanisms

whereby the public can make representations, complaints or compliments about the NHS. Kent Health Watch would provide information and assistance in ensuring the public and patients were aware of what avenues were available to them in order to make their views known. The Service would also monitor the number and type of complaints that it received and report on these to the relevant NHS bodies and County Council's Health Overview and Scrutiny Committee. Mr Gibbens said that in developing KHW the County Council had worked very closely with colleagues in the NHS and in particular the PCTs. He referred to a letter from Ann Sutton, Chief Executive of the East Kent and Coastal PCT in which she said she looked forward to working in partnership with the County Council to make sure that Kent Health Watch provided added value for the people of Kent. Mr Gibbens said he very much welcomed the support expressed in this letter and said that the County Council would be working closely with the PCTs as this initiative was rolled out.

(3) Mr Gibbens said that Kent Health Watch would be independent of any other process but that there was connections between it and the introduction during 2008 of the Local Involvement Network (LINK) which was being established on a national basis. He also confirmed that LINKs was not primarily a complaints driven process. Mr Gibbens said that KHW would play a significant role in improving the procedures through which the Kent residents could make complaints or comments about the services that they received from the NHS and Social Care Services. Meredin Peachey said the Kent PCTs had said they wanted to see people to have better access to complaints procedures and they have been working closely with the County Council in helping to shape the Kent Health Watch service.

(4) Cabinet then agreed the implementation of Kent Health Watch as proposed in the Cabinet report.

## **8. Consultation on Local Petitions and Call for Action** *(Item. 9)*

(1) The Department of Communities and Local Government has published a consultation document, Local Petitions and Call for Action. This report commented on the consultation and suggested a draft response which had been formulated by a cross-party Informal Member Group. Mr Angell and Mr Parker, as members of the Informal Member Group, both spoke and highlighted some of the key points of the proposed response which arose from the meeting of the IMG held on 20 February 2008.

(2) Mr Gilroy said that the consultation raised a number of important issues on which he would, as Chief Executive, wish to comment direct. Mr Carter proposed and Mr Chard seconded that where the suggested response it referred to Call for Action powers being extended to cover quangoes such as SEEDA, this should also include Central Government Policy.

(3) Subject to this amendment and noting that the Chief Executive would write separately to Government, Cabinet agreed the response to the consultation on Local Petitions and Call for Action for submission to the Department of Communities and Local Government.

**9. Other items which the Chairman decides are relevant or urgent**  
(Item. 10)

**A21 and East Kent Access Phase 2 – Cost Increases**

(Item 10 – Report by Mr Keith Ferrin, Cabinet Member for Environment, Highways & Waste and Mr Adam Wilkinson, Managing Director for Environment and Regeneration) (The Chairman declared this item to be urgent as a response needed to be given to the outcomes arising from the meeting of the Regional Transport Board held on Wednesday, 12 March 2008. (Mr Mick Sutch, Head of Planning and Transport Strategy was present for this item)

(1) This report set out the implications of the recent announcement of cost increases of two trunk road schemes on the A21 – Pembury By-Pass to Tonbridge By-Pass and Kippings Cross to Lamberhurst and of the KCC scheme East Kent Access Phase 2.

(2) Following criticism that the actual cost of the many completed trunk road schemes was significantly higher than the estimated costs, the Department of Transport commissioned the Nicholls report to recommend changes in procedures. The Nicholls report has led to the re-estimation of some Highway Agency Schemes which have reached a key stage in their delivery and, as a result, the Regional Transport Board had considered three schemes in the South East at a meeting held on 12 March 2008, two of which are in Kent. These are the A21 Tonbridge By-Pass – Pembury By-Pass duelling which has risen to an estimated cost of £64m to £112m and the A21 Kippings Cross – Lamberhurst Improvement which has risen from £40m to £103m. The Regional Transport Board has agreed that the A21 Tonbridge By-Pass – Pembury By-Pass duelling scheme should remain a regional priority and that the Highway Agency should proceed with its development. The A21 Kippings Cross – Lamberhurst Improvement Scheme continues to be a priority but the DfT has requested that the value for money of the scheme be reassessed due to the scale of the increase in costs. The Regional Transport Board has written to the Secretary of State of Transport emphasising its concern over the scale of these increases stating that it is looking to the DfT to make an appropriate contribution in order to meet these. Without such a contribution, or an increase in the Regional funding allocation the regional programme would be delayed and the delivery of the sustainable economy growth set out in the South East Plan and Regional Economic Strategy jeopardised.

(3) With regard to East Kent Access Phase 2, the cost has risen from £64m to £73m mainly due to construction inflation of around 6%. Of this £9m difference, KCC is already funding £2.5m to progress the scheme, leaving a £6.75m real shortfall. New draft DfT guidance states that KCC is expected, as the scheme promoter, to bear 25% of the shortfall – ie., something under £2m.

(4) During the course of discussion, Mr Chard said that these schemes are vital to Kent and it was an incredible situation that their projected costs had increased by

such a significant amount. Mr Gibbens said that any slippage or failure to provide the A21 schemes would seriously throw into doubt the effectiveness of the proposed new hospital at Pembury and therefore it was essential that both these schemes were built and on time.

(6) Following further discussion it was agreed that Mr Carter and Mr Ferrin would jointly write to the Government setting out the County Council's concerns in relation to these schemes as detailed in the report and also reflecting the points raised during the course of the Cabinet debate.