

## **CABINET**

RECORD OF DECISIONS of the meeting of the Cabinet held on Tuesday, 9 July 2019 at 12pm at the Guildhall, Portsmouth

### **Present**

Councillor Gerald Vernon-Jackson CBE (in the Chair)  
Steve Pitt  
Dave Ashmore  
Suzy Horton  
Darren Sanders  
Lynne Stagg  
Matthew Winnington  
Rob Wood

#### **70. Apologies for Absence (AI 1)**

Apologies were received from Councillors Lee Hunt and Jeanette Smith.

#### **71. Declarations of Interests (AI 2)**

No interests were declared.

#### **72. Record of Previous Decision Meetings - 11 and 17 June 2019 (AI 3)**

**RESOLVED** that the minutes of the meetings held on 11 and 17 June 2019 were approved as correct records.

#### **73. Additional appointments to Outside Bodies (AI 4)**

### **DECISIONS**

Further appointments were made to outside organisations as nominated by the Conservative Group. These can be viewed at the link below:

<https://democracy.portsmouth.gov.uk/documents/s23252/Conservative%20Nominations%20to%20outside%20bodies%209%20July%202019.pdf>

#### **74. City of Sanctuary (AI 5)**

Caroline Hopper, Armed Forces Covenant Program, Human Resources introduced the report.

Councillor Steve Pitt proposed the following additional decision:

Agreed that the HIVE be the strategic lead at no cost in liaison with PCC and the £16,000 identified for establishing the scheme be allocated both to provide officer liaison and to take this work forward within the council.

Councillor Vernon-Jackson noted that updates on this matter would be considered by the Cabinet Member for Resources in future.

### **DECISIONS**

- 1. Noted that there is local appetite for Portsmouth to become a recognised City of Sanctuary and that Portsmouth City Council has already openly pledged support for the agenda.**

2. Agreed that it is important that the Council responds to this agenda as one body.
3. Agreed that the cost of establishing the scheme at £16,000 in 2019/20 for coordinating this activity and making sure the Council fulfils its obligation the City of Sanctuary are funded by a contribution from the Environment & Community Safety portfolio reserve.
4. Agreed that the HIVE be the strategic lead at no cost in liaison with PCC and the £16,000 identified for establishing the scheme be allocated both to provide officer liaison and to take this work forward within the council.

**75. Southsea Coastal Scheme (AI 6)**

Guy Mason, Coastal, Highways and Drainage Team Manager introduced the report.

**DECISION**

**The Cabinet delegated authority to the Director of Regeneration to enter into the construction contract for the Southsea Coastal Scheme, subject to prior approval by the Procurement Gateway Board.**

**76. Merger of Coroner Areas in Hampshire (AI 7)**

Peter Baulf, City Solicitor introduced the report.

**DECISIONS**

**The Cabinet:**

1. Approved the option 1 to pursue a merger of coronial areas in Hampshire.
2. Delegated to the Director of Culture, Leisure and Regulatory Services the management of merger process.

**77. Portsmouth Youth Offending Team (PYOT) Annual Youth Justice Strategic Plan 2019-20 (AI 9)**

Lisa Morgan, YOT Service Leader introduced the report.

**DECISION**

**The Cabinet approved the plan and the priorities set out within it.**

**78. The City Council's Response to the Aquind Proposal (AI 8)**

Paddy May, Corporate Strategy Manager introduced the report.

The Cabinet discussed the proposals and expressed concern regarding the potential environmental impact and the fact that the council was only a consultee and not a decision-maker.

**DECISIONS**

**The Cabinet:**

1. Noted that Aquind are seeking to develop an electricity Interconnector between the UK and France with a converter station in Lovedean. They are proposing to "land" the high voltage DC (HVDC) electricity cable at Eastney and run it up through Portsmouth to the converter station at Lovedean.

2. **Noted that despite representations from Portsmouth City Council that the Aquind proposal should be determined by the relevant local planning authorities (including Portsmouth City Council), the Government has decided that the proposal was a 'Nationally Significant Infrastructure Project' that should be determined by the Secretary of State through the Development Consent Order process.**
3. **Agreed to seek the support of Full Council to reinforce the Cabinet's objection to the route of the HVDC cable whilst also working constructively with Aquind and other stakeholders.**
4. **Agreed that the Council responds to this proposal in a coordinated way and where possible works with neighbouring councils on any common approaches.**
5. **Noted that any additional external costs incurred in the current year associated with the need to make an informed and considered response to the proposal will be met from the Council's Corporate Contingency.**

**79. Health and Care Operating Model (AI 10)**

Mr Jerry Brown gave a deputation in favour of the report but also expressing concerns regarding the transparency of the Sustainable Transformation Plan (STP).

The Leader noted that a separate report might be requested to come to the Cabinet regarding the STP and how it's progressing.

David Williams, Chief Executive introduced the report and explained the hierarchy of Health & Care tiers in Hampshire & Isle of Wight, of which there are four. At the top is the STP, which covers the whole of Hampshire and the Isle of Wight. Whilst this currently has no statutory standing, it is developing to become an 'Integrated Care System' (ICS).

The 'Integrated Care Partnership' (ICP) is the geographic area below and covers Portsmouth and South East Hampshire, equating to the catchment area of the Queen Alexandra Hospital and the three Clinical Commissioning Groups of Portsmouth, Fareham and Gosport, and South East Hampshire.

The NHS refers to the third tier as 'Place'. This covers the city boundary - shared by the council, the Portsmouth Clinical Commissioning Group and the Portsmouth Health & Wellbeing Board.

At the most local tier are the 'clusters', with populations of between 30,000 and 50,000 people. In Portsmouth, clusters have been developed for the North, Central and South of the city. More work is planned to accommodate the introduction of Primary Care Networks (PCNs) by the NHS, of which it is anticipated there will be five for Portsmouth.

Today's report relates to the work carried out in Portsmouth.

The Leader noted that the operating model in Portsmouth is different to those in the rest of Hampshire in that the council works very closely with the Clinical Commissioning Group and the key posts are shared.

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Councillor Winnington questioned the role of the STPs generally and noted that the lack of transparency referred to in the deputation has proved very difficult to deal with. He also commented that he was very pleased with the way the council and CCG have worked together.

Councillor Rob Wood noted that the proposal in the report offered robust solutions to the pressures caused by cost increases relating to Looked After Children and Families.

Councillor Sanders added that the proposals addressed the need for increased transparency and going forward he hoped that all the targets would be achievable.

## **DECISIONS**

### **The Cabinet:**

- 1. Noted the progress so far on the integration of PCC and PCCG functions in support of the Health and Care Portsmouth operating model.**
- 2. Agreed the proposals for further integration set out at section 13 of this report, including its preferred option of integration of PCCG Accountable Officer and PCC Chief Executive functions into one post.**

The meeting concluded at 12.45 pm.

Councillor Gerald Vernon-Jackson CBE  
Leader of the Council