

**SUPPLEMENT TO THE AGENDA FOR**

# **Health & Social Care Overview and Scrutiny Committee**

**Friday 6 December 2013**

**10.00 am**

**The Council Chamber, Brockington, 35 Hafod Road, Hereford**

	<b>Pages</b>
<b>8. PUBLIC HEALTH CORE OFFER</b>	17 - 42
To provide an update on the Council's Public Health Core Offer to the Herefordshire Clinical Commissioning Group (HCCG).	
<b>9. TASK &amp; FINISH REVIEW REPORT - ADULT SOCIAL CARE NEXT STAGE INTEGRATION PROJECT</b>	43 - 50
To report the Executive's response and action plan in respect of the report of the Task and Finish Group on Adult Social Care - Next Stage Integration (Phase 1).	
<b>10. WORK PROGRAMME</b>	51 - 70
To consider the Committee's work programme.	





<b>MEETING:</b>	<b>HEALTH &amp; SOCIAL CARE OVERVIEW &amp; SCRUTINY COMMITTEE</b>
<b>MEETING DATE:</b>	<b>6 DECEMBER 2013</b>
<b>TITLE OF REPORT:</b>	<b>LA Public Health Core Offer to the HCCG</b>
<b>REPORT BY:</b>	<b>Dr Arif Mahmood</b>

### **Classification**

Open

### **Key Decision**

This is not a key decision.

### **Wards Affected**

County-wide

### **Purpose**

The report aims to provide an update to the Committee on the LA Public Health Core Offer to the HCCG.

### **Recommendation(s)**

**THAT:**

- (a) To note the contents of the report.

## Alternative Options

Nil

## Reasons for Recommendations

Statutory function of LA Public Health

## Key Considerations

- 1 Herefordshire Clinical Commissioning Group (HCCG) is required, under section 14W of the NHS Act 2006, inserted by the Health and Social Care Act 2012, to “obtain advice appropriate for enabling it effectively to discharge its functions from persons who (taken together) have a broad range of professional expertise in (a) the prevention, diagnosis or treatment of disease, and (b) the protection or improvement of public health.”
- 2 The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2012 require local authorities to provide a public health advice service to any clinical commissioning group whose area falls wholly or partly within the authority’s area.
- 3 This service will consist of such information and advice to a clinical commissioning group as the local authority considers necessary or appropriate, with a view to protecting and improving the health of the people in the authority’s area.
- 4 The level of advice will be determined by agreement between the Herefordshire Council (HC) and HCCG or, in default of such agreement, by the HC.
- 5 The LA Public Health and HCCG signed a MoU ad SLA (Appendices 1 & 2). The SLA sets out the agreed level of advice to be provided in Herefordshire, funded via the public health ring-fenced grant, and provided by appropriately trained and accredited public health professionals, as defined by the Faculty of Public Health.
- 6 Appendix 2 contains the agreed work plan 2013-14, which is on the trajectory.
- 7 The work plan 2014-15 is being developed.

## Community Impact

- 8 Central to the Health and Wellbeing Strategy
- 9 Central to the HCCG priority setting process
- 10 Central to the commissioning of health and social care services

## Equality and Human Rights

- 11 None identified

## **Financial Implications**

12 To be financed by the Public Health ring-fenced grant.

## **Legal Implications**

13 Statutory function of LA Public Health

## **Risk Management**

14 Due to limited capacity of the LA Public Health, it may fail to deliver the work plan. Therefore, it may need to outsource certain elements of the work plan.

## **Consultees**

15 HCCG Board, H&WB Board, Council Management Team

## **Appendices**

Appendix 1. LA PH and HCCG MoU

Appendix 2. LA PH and HCCG SLA

## **Background Papers**

- None identified



## **Herefordshire CCG/Public Health**

### **Memorandum of Understanding**

#### **Introduction**

This Memorandum of Understanding (MoU) between Herefordshire Clinical Commissioning Group (HCCG) and Herefordshire Public Health (Public Health) outlines the working relationship, local core offer, relationships and responsibilities for each organisation to develop and maintain a collaborative and supportive relationship between the CCG and Public Health.

#### **Memorandum of Understanding**

Both organisations agree to:

1. Maintaining a strong level of strategic senior leadership engagement through monthly meetings between the Director of Public Health (DPH) and Chief Operating Officer (COO).
2. Collaborative working to progress the sustainability of the local health economy, maximise effectiveness and efficiency, champion the prevention agenda and offer support during serious untoward incidents.
3. Collaborative commissioning between public health and the CCG.
4. Joint responsibility for progressing education and training opportunities for staff, members and wider where appropriate.
5. Collaborative working to ensure population health campaigns and education are relevant and timely
6. Improving outcomes for patients and residents within HCCG boundaries
7. Contributing to building a strong, strategic and proactive Health and Wellbeing Board that acts on behalf of the best interests of the population
8. Implementing and strengthening strategies that reduce inequalities, addressing variation in care provision across the local health economy

9. Remaining inclusive and supportive of all agencies both voluntary and public sector within the local health economy and strengthening their impact and role in improving health and wellbeing locally.

**Specifically HCCG agrees to:**

1. Prioritising and championing the work of and its role within the Health and Wellbeing Board and as part of its vision maintain prevention as a core value and link with public health to achieve this.
2. Linking closely with Public Health through designation of a clinical board member to the portfolio area of public health and prevention.
3. Jointly assuring the implementation of the prevention agenda within Primary Care and its commissioning intentions
4. Supporting Public Health in achieving its target outcomes related to services such as childhood immunisation, sexual health services, health checks and smoking cessation.
5. Ensuring Public Health is adequately represented within the CCG through formal board membership of the DPH on the CCG governing body board and attendance and membership of a public health representative at other relevant panels and committees.
6. Work collaboratively with Public Health staff on developing the JSNA, ensuring commissioning plans have clear links to it
7. Ensuring access to data and information under the CCG's information governance policy so that public health advice can be given and health needs and health equity audits can be undertaken.

**Specifically Public Health agrees to:**

1. Ensure that the JSNA reflects the needs of the whole population and support the CCG to demonstrate clear links to commissioning plans
2. Support the development of commissioning strategies that meet the needs of vulnerable people and the reduction of health inequalities and variations in care provision
3. Support the development of evidence-based care pathways and service specifications, and offer advice on effective/cost-effective services.
4. Provide advice on evidence-based prioritisation policies and processes, including governance and best practice.
5. Produce as necessary health needs assessments and health equity audits, and other data analysis and health intelligence as appropriate, and effectively



utilise the advice and support from Public Health England to support the clinical commissioning agenda.

6. Prioritise key CCG committees, sub committees and other groups where public health expertise is essential.
7. Provide public health advice and direction to the CCG for which they will have due regard as outlined in legislation. Provide advice and support to the CCG in relation to health protection plans and arrangements, including immunisation and screening.

## **Summary**

The CCG and the Public Health Department are committed to improving the health and well being of the population of Herefordshire through the development of an innovative and dynamic partnership.

**Ms C Gritzner**  
**Chief Operating Officer**  
**Herefordshire CCG**

**Ms E L Shassere**  
**Director of Public Health**  
**Herefordshire PCT/**  
**Herefordshire Council**

14 March 2013



**PUBLIC HEALTH CORE OFFER**  
**SERVICE LEVEL AGREEMENT**  
**BETWEEN**  
**HEREFODRSHIRE COUNCIL**  
**AND**  
**HEREFORDSHIRE CLINICAL COMMISSIONING GROUP**

Signed on behalf of Herefordshire Council:

Date:

Signed on behalf of Herefordshire CCG:

Date:

## **SECTION 1: INTRODUCTION**

1.0 Since 1974, within the NHS, specialist public health staff have assumed the lead for the three core public health responsibilities on behalf of the NHS and local communities:

- Health improvement e.g. lifestyle factors and the wider determinants of health.
- Health protection e.g. preventing the spread of communicable diseases, the response to major incidents, and screening
- Population healthcare e.g. input to the commissioning of health services, evidence of effectiveness, care pathways.

1.1 With the implementation of the Health and Social Care Act in April 2013, primary responsibility for health improvement and health protection will transfer at the national level from the NHS to Public Health England, and at local level from PCTs to local authorities. Responsibility for strategic planning and commissioning of NHS services will transfer to the NHS Commissioning Board and to Clinical Commissioning Groups.

Currently, at a senior level NHS Herefordshire employs a Director of Public Health plus 2 wte public health consultants, all of whom are joint appointments with the Council. One consultant is a medical appointment. There is a number of other staff of different grades and functions (see Appendix 1).

## **SECTION 2: THE CORE OFFER**

2.0 Herefordshire Clinical Commissioning Group (HCCG) is required, under section 14W of the NHS Act 2006, inserted by the Health and Social Care Act 2012, to “obtain advice appropriate for enabling it effectively to discharge its functions from persons who (taken together) have a broad range of professional expertise in – (a) the prevention, diagnosis or treatment of disease, and (b) the protection or improvement of public health.”<sup>1</sup> In parallel to this, draft regulations currently before Parliament will require local authorities to provide a public health advice service to any clinical commissioning group whose area falls wholly or partly within the authority’s area.<sup>2</sup> This service will consist of such information and advice to a clinical commissioning group as the local authority considers necessary or appropriate, with a view to protecting and improving the health of the people in the authority’s area. The level of advice will be determined by agreement between the Herefordshire

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<sup>1</sup> Health and Social Care Act 2012, section 26

<sup>2</sup> The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2012

Council (HC) and HCCG or, in default of such agreement, by the HC. This agreement sets out the agreed level of advice to be provided in Herefordshire, funded via the public health ring-fenced grant, and provided by appropriately trained and accredited public health professionals, as defined by the Faculty of Public Health.

2.1 HCCG will require a range of information and intelligence support via both the HC and Staffordshire Commissioning Support Unit (SCSU). It is important to note that although there are some similarities in the nature of these services (i.e. public health population healthcare advice and the work of SCSU), they do have a different focus. It is expected that HC public health team will provide advice particularly in relation to the following:<sup>2</sup>

- A summary of the overall health of the population to guide the HCCG in the commissioning of appropriate health services;
- Assessments of the health needs of groups of individuals with particular conditions or diseases;
- Advice on the development of commissioning/service re-design plans;
- Advice on how to reduce health inequalities.

2.2 SCSU will have more of a focus on commissioning processes and clinical systems, including detailed analysis of referrals and activity, procurement and business processes. Both are essential for driving improvements in services.

2.3 The provision of the core service set out in this service agreement is based on the following principles:

**Core service principles:**

The basis of the core service is to ensure collaboration between public health professionals based in the HC and HCCG officers to:

- Improve population health outcomes and reduce health inequalities;
  - Improve the individual patient experience and outcome;
  - Do this within the HCCG allocated budget;
- In order to put the core offer into practice the following will be provided:
- A mechanism for public health specialists/analysts to access the relevant NHS data. (**see Section 3**);
  - A mechanism to define the amount of public health capacity available from the HC to the HCCG through the core offer (**see Section 4**);
  - An annual workplan agreed between the HC and HCCG, specifying public health inputs and outputs, within the capacity envelope (**see Section 5**).

### SECTION 3: ACCESS TO RELEVANT NHS DATA

3.0 Guidance from the Department of Health advises directors of public health to “agree arrangements on public health information requirements and information governance”<sup>3</sup> and to ensure that there are “plans in place to ensure access to IT systems, sharing of data and access to health intelligence in line with information governance and business requirements during transition and beyond”<sup>4</sup>.

3.1 Access to NHS data for the HC staff (including public health team) is an essential part of the service the HCCG requires from the SCSU, and any costs incurred by the SCSU in providing it need to be covered by the HCCG, not the HC.<sup>5</sup> The cost of information and intelligence support to secondary care commissioning was specifically excluded in the process used to estimate the public health budget that would transfer to local authorities.<sup>5</sup>

- Information governance

3.2 To enable the HC to provide population health advice to the HCCG, there must be appropriate information governance architecture in place. Where required, this architecture will allow the HC to receive, store and analyse patient identifiable and record-level data. As part of the assurance process, the HC will demonstrate compliance with level 2 of the Hosted Secondary Use Team/Project version of the NHS IG toolkit, and the presence of a safe haven arrangement.<sup>6</sup>

3.3 HC already has N3 connection in place and will continue to enter into agreement with NHS Connecting for Health for access to NHS data via this link.

3.4 NHS e-mail is the national email and directory service available to NHS staff. It is the only NHS e-mail service secure enough for the transmission of confidential patient information. Arrangements for the ongoing access to NHS e-mail accounts for local authority staff is currently being explored nationally.

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<sup>3</sup> Integrated Approach to Planning and Assurance between DH and the NHS for 2012/13.

<sup>4</sup> Public health transition planning support for primary care trusts and local authorities.

<sup>5</sup> Factsheet: local public health intelligence.

<sup>6</sup> <http://www.connectingforhealth.nhs.uk/systemsandservices/infogov/igsoc/non-nhs>

3.5 Public Health England (PHE) is producing a national checklist for information governance arrangements, which will form the basis for an information sharing protocol between the Council and the local NHS.

#### **SECTION 4: PUBLIC HEALTH CAPACITY & GOVERNANCE**

4.0 The public health capacity to provide the core offer will be based within the Health and Wellbeing Services of the Peoples Directorate of the Herefordshire Council. An organisational chart showing the Health and Wellbeing Service is shown in Appendix 1. More specifically, the core offer will be delivered primarily by the following posts:

##### Post

Consultant in Public Health (Healthcare Commissioning)  
Consultant in Public Health (Health Intelligence)  
Health Intelligence Officer (1WTE)  
Clinical Evidence Reviewer (1WTE)

4.1 Population healthcare advice will be given by a team led by a Faculty of Public Health accredited Consultant in Public Health and an appropriately qualified and experienced multi-disciplinary public health team. Any concerns that the HCCG have regarding these arrangements should in the first instance be brought to the attention of the Consultant in Public Health. Any performance concerns will be discussed at quarterly CCG and HC meetings (see Section 7).

4.2 Public health consultants leading delivery of the core offer will be required to have Faculty of Public Health membership and GMC/UKPHR registration (defined or generalist). Analytical and managerial support will be provided by specialist staff who have knowledge in their specialist area to the level of diploma/masters or equivalent qualification and who demonstrate Level 6 Public Health Intelligence and Level 6 Academic Research PH skills and competencies as defined by the Public Health Skills and Careers Framework.

4.3 In addition, capacity to support development of the Integrated Needs Assessment (INA) process in 2013/14 will be provided by Research Team of the HC.

## **SECTION 5: THE CORE OFFER AGREEMENT**

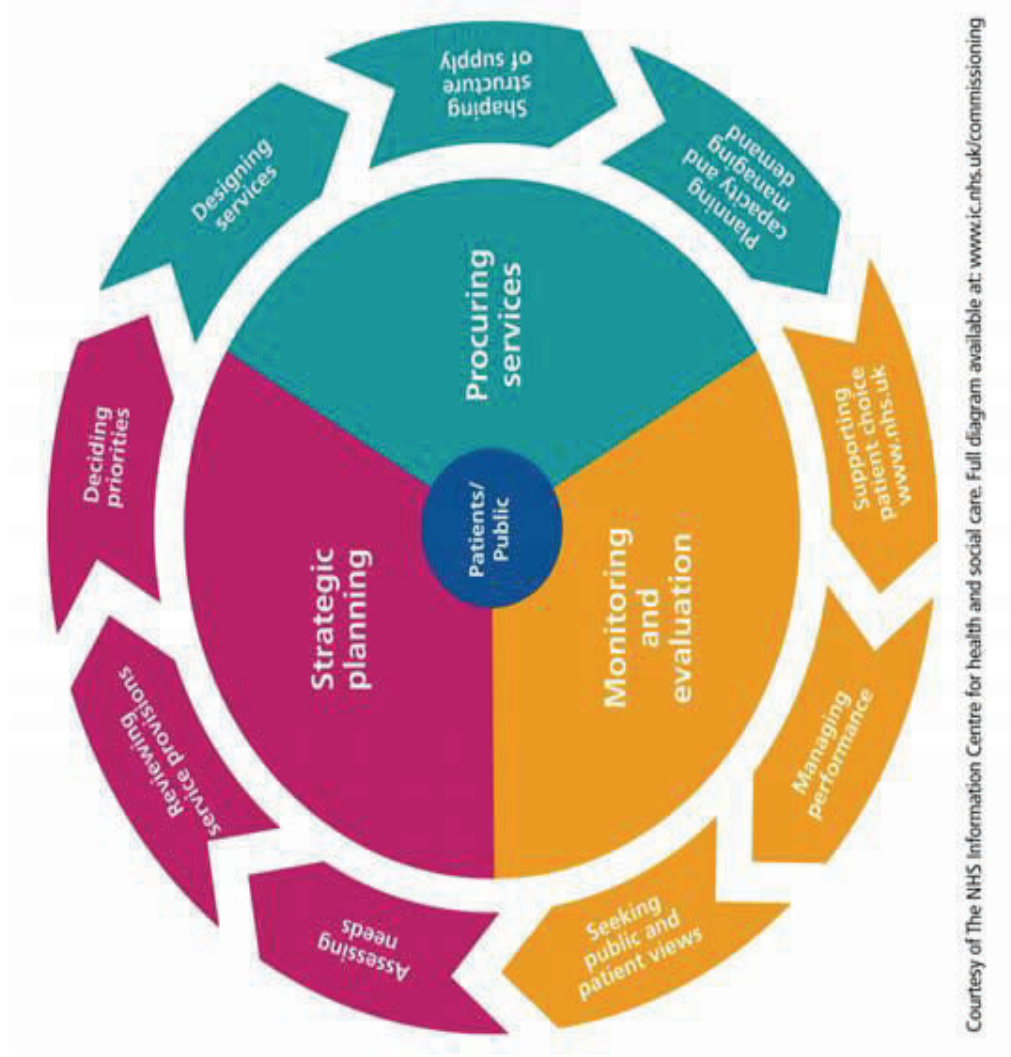
5.0 Effective commissioning makes the best use of resources to:

- improve health and wellbeing and reduce health inequalities and social exclusion;
- secure access to a comprehensive range of services;
- improve the quality, effectiveness and efficiency of services; and
- increase choice for patients and ensure a better experience of care through greater responsiveness to people's needs.

5.1 Supporting this are a range of separate but related processes that collectively make up commissioning, which together can be thought of as a commissioning cycle. Figure 1 overleaf illustrates the main components of the commissioning cycle, while the subsequent tables detail the core offer agreement for 2013/14 mapped to more detailed elements of the commissioning cycle.



Figure 1: The commissioning cycle



## CORE SERVICE AGREEMENT 2013/14

### STRATEGIC PLANNING:

- Assessing needs

Core Requirement	HC Public Health will:	HCCG will:	Workplan outputs in 2013/14
SP1. Support HCCG to make inputs to the integrated needs assessment (INA) and to use it in their commissioning plans.	<ol style="list-style-type: none"> <li>Provide the analysis, interpretation and commentary of NHS derived data included in INA;</li> </ol>	<ol style="list-style-type: none"> <li>Provide representation on the Health &amp; Wellbeing Board and the INA steering group</li> <li>Facilitate access to NHS derived data for inclusion in INA (e.g. via honorary contract arrangements);</li> <li>Consider INA findings when developing commissioning plans.</li> </ol>	<i>Integrated Needs Assessment for Herefordshire by June 2013</i>
SP2. Develop and interpret neighborhood/locality/practice health profiles, in collaboration with the HCCG and HC.	<ol style="list-style-type: none"> <li>Produce an annual health profile for HCCG ahead of the autumn planning round;</li> <li>Provide summative reports on the findings of any externally produced local area health profiles (e.g. APHO local authority profiles).</li> </ol>	<ol style="list-style-type: none"> <li>Facilitate access to NHS derived data required for health profiles;</li> <li>Provide a contents list for each annual profile at the start of each financial year.</li> </ol>	<p>CCG Annual Health Profile(October 2013);</p> <p>Director of Public Health Annual Report (September 2013)</p>
SP3. Provide specialist public health input to the development, analysis and interpretation of health related data sets including the determinants of health, monitoring of patterns of disease and mortality.	<ol style="list-style-type: none"> <li>Provide an interpretation of the validity and findings of health service datasets as requested;</li> <li>Advise on the use of specific indicators and datasets for monitoring service outcomes as requested.</li> </ol>	<ol style="list-style-type: none"> <li>Engage public health at the start of any service redesign projects where advice on evaluation is being sought.</li> </ol>	<i>Public Health Outcomes indicators performance reports (Quarterly: Apr, Jul, Oct, Jan)</i>
SP4. Provide health needs	<ol style="list-style-type: none"> <li>Produce up to 2 needs assessments</li> </ol>	<ol style="list-style-type: none"> <li>Agree health needs assessment</li> </ol>	<i>Needs Assessment Reports</i>

assessments for particular conditions/disease groups – including use of epidemiological skills to assess the range of interventions from primary/secondary prevention through to specialised clinical procedures.	each year; 2. Publish needs assessments on Facts & Figures website according to a consistent format using agreed methodology.	topics for each year as part of the preceding autumn planning round; 2. Identify a lead contact for each needs assessment to coordinate CCG input; 3. Facilitate access to NHS derived data as required.	(as commissioned by the HCCG)
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- *Reviewing service provision*

<b>Core Requirement</b>	<b>HC Public Health will:</b>	<b>HCCG will:</b>	<b>Workplan outputs in 2013/14</b>
SP5. Identify vulnerable populations, marginalised groups and local health inequalities and advise commissioners on how to meet their health needs. Geo-demographic profiling to identify association between need and utilisation and outcomes for defined target population groups, including the protected population characteristics covered by the equality duty.	1. Include specific analysis and recommendations relating to inequalities in outcomes and access to care in all needs assessments and health profiles; 2. Report the distribution of determinants of health (e.g. deprivation) and variations in key health outcomes in health profiles; 3. Provide specific recommendations to the CCG on addressing health inequalities where identified in any analysis.	1. Consider any recommended actions for addressing health inequalities published in public health reports.	HCCG Annual Health Profile(October 2013)
SP6. Support the HCCG to interpret and understand data on clinical variation in both primary and secondary care. To include public health support to discussions with primary and secondary care clinicians if requested	1. Support the process of commissioning policy development with activity analysis, evidence review and clinical engagement; 2. Include analysis by practice and locality in any reports produced by public health; 3. Investigate the validity of any external intelligence reports as requested by the HCCG; 4. Provide a public health analysis and interpretation of any datasets used in	1. Involve public health in a timely manner when seeking interpretation of externally produced reports and data.	HCCG Commissioning Policies (as commissioned by the HCCG)

	discussion with clinicians as requested by the HCCG.		
SP7. Provide public health support and advice to the HCCG on appropriate service review methodology	1. Provide professional advice to the HCCG on appropriate techniques for evaluation as part of service re-design/review as requested.	1. Involve public health at the start of any service re-design/review projects to allow any evaluation to be properly established.	Service redesign evaluation reports (as commissioned by the HCCG)

- Deciding priorities

Core Requirement	HC Public Health will:	HCCG will:	Workplan outputs in 2013/14
SP8. Apply health economics and a population perspective, including programme budgeting, to provide a legitimate context and technical evidence base for the setting of priorities.	<ol style="list-style-type: none"> <li>1. Include an analysis of DoH programme budgeting data in annual HCCG health profiles;</li> <li>2. Benchmark expenditure and outcomes in any needs assessment reports;</li> <li>3. Provide written evidence-reviews as requested to support service redesign projects;</li> <li>4. Provide guidance on frameworks and methodologies for allocating resources (i.e. PBMA) within health profiles.</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work.</li> <li>2. Properly consider the findings of any public health reports.</li> </ol>	<p>Programme Budgeting Reports for HCCG (<b>subject to capacity of the public health intelligence team</b>)</p> <p>HCCG Annual Health Profile(October 2013) HCCG Commissioning policies (as Commissioned by the HCCG)</p>
SP9. Advising HCCG on prioritisation processes – governance and best practice	<ol style="list-style-type: none"> <li>1. Provide ongoing public health support to the HCCG individual funding review (IFR) procedures;</li> <li>2. Support the process of commissioning policy development with activity analysis, evidence review and clinical engagement;</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work.</li> <li>2. Properly consider the findings of any public health reports.</li> </ol>	<p>Presentations at the HCCG Named Patient Panel (ongoing throughout the year) HCCG Commissioning policies (as commissioned by the HCCG).</p>
SP10. Work with HCCG to identify areas for disinvestment and enable the relative value of competing demands to be assessed	<ol style="list-style-type: none"> <li>1. Annually review the HCCG Low Priority Treatment Policy;</li> <li>2. Provide evidence-reviews as part of commissioning policy development;</li> <li>3. Provide evidence reviews for IFR requests.</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work.</li> <li>2. Properly consider the findings of any public health reports.</li> </ol>	<p>Low Priority Treatment Policy paper to the HCCG Board (December 2013)</p> <p>Presentations at the HCCG Named Patient Panel (ongoing throughout the year)</p>

				HCCG Commissioning policies (as commissioned by the HCCG).
SP11. Critically appraising the evidence to support development of clinical prioritisation policies for populations and individuals	1. Provide evidence-reviews as part of commissioning policy development; 2. Provide evidence reviews for IFR requests.		1. Provide a named link person when commissioning specific pieces of work. 2. Properly consider the findings of any public health reports.	Presentations at the HCCG Named Patient Panel (ongoing throughout the year) HCCG Commissioning policies (as commissioned by the HCCG).
SP12. Horizon scanning: identifying likely impact of new National Institute for Health and Clinical Excellence guidance, new drugs/technologies in development and other innovations within the local health economy and assist with prioritisation	1. Provide an annual impact assessment of NICE's future workplan for any new <u>technologies</u> . <sup>7</sup>		1. Properly consider the findings of any public health reports.	NICE technologies horizon scanning report to the HCCG (October 2013)

## PROCURING SERVICES:

- *Designing shape and structure of supply*

Core Requirement	HC Public Health will:	HCCG will:	Workplan outputs in 2013/14
PS1. Provide public health specialist advice on the effectiveness of interventions, including clinical and cost-effectiveness (for both commissioning and de-commissioning).	1. Annually review the HCCG Low Priority Treatment Policy; 2. Provide evidence-reviews as part of commissioning policy development; 3. Provide evidence reviews for IFR requests.	1. Provide a named link person when commissioning specific pieces of work. 2. Properly consider the findings of any public health reports.	Low Priority Treatment Policy paper to the HCCG Board (December 2013)  Presentations at the HCCG Named Patient Panel (ongoing throughout the year)

<sup>7</sup> Horizon scanning of new medicines to be undertaken by the HCCG Medicines Management Team



				HCCG Commissioning policies (as commissioned by the HCCG).
PS2. Provide public health specialist advice on appropriate service review methodology.	1. Provide professional advice to the HCCG on appropriate techniques for evaluation as part of service re-design/review as requested.	1. Involve public health at the start of any service re-design/review projects to allow any evaluation to be properly established.		Service redesign evaluation reports (as commissioned by the HCCG)
PS3. Provide public health specialist advice to the medicines management function of the HCCG.	1. Provide public health expertise to support the HCCG medicines management function if required. <sup>8</sup> 2. Provide a lead contact for public health advice to the Medicine Management Team of the HCCG as required.	1. Ensure that medicines management insight is included when commissioning and reviewing public health analytical products.		Contribution to the HCCG prescribing policies

- *Planning capacity and managing demand*

Core Requirement	HC Public Health will:	HCCG will:	Workplan outputs in 2013/14
PS4. Provide specialist input to the development of evidence-based care pathways, service specifications and quality indicators to improve patient outcomes.	1. Provide written evidence-reviews as requested to support service redesign; 2. Provide suggested population-based outcome indicators to include in service specifications.	1. Provide a named link person when commissioning specific pieces of work; 2. Properly consider the findings of any public health reports.	Evidence reviews to support service redesign projects (as commissioned by the HCCG)
PS5. Provide public health advice on modelling the contribution that interventions make to defined outcomes for locally designed and populated care pathways and current and future health needs.	1. Extrapolate published evidence to estimate the effect of proposed service redesign interventions in a CCG context; 2. Support the development of the HCCG performance targets through the analysis and population modelling of local data.	1. Provide a named link person when commissioning specific pieces of work; 2. Properly consider the findings of any public health reports; 3. Provide any NHS derived data as necessary.	Evidence reviews to support service redesign projects (as commissioned by the HCCG)

<sup>8</sup> Medicines policy development is to be undertaken internally by CCG's medicines management function.

## MONITORING & EVALUATION

- *Supporting patient choice, managing performance and seeking public and patient views*

Core Requirement	HC Public Health will:	HCCG will:	Workplan outputs in 2013/14
ME1. Provide public health advice on the design of monitoring and evaluation frameworks, and establishing and evaluating indicators and benchmarks to map service performance	<ol style="list-style-type: none"> <li>1. Provide guidance to the HCCG on frameworks for evaluating services;</li> <li>2. Advise HCCG on undertaking evaluation as part of specific service re-design projects;</li> <li>3. Undertake evaluation of service redesign projects as requested.</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work;</li> <li>2. Properly consider the findings of any public health reports;</li> <li>3. Provide any NHS derived data as necessary.</li> </ol>	<p><i>Public Health Outcomes indicators performance reports (Quarterly: Apr, Jul, Oct, Jan); Service redesign evaluation reports (as commissioned by the HCCG)</i></p>
ME2. Work with clinicians and draw on comparative clinical information to understand the relationship between patient needs, clinical performance and wider quality and financial outcomes	<ol style="list-style-type: none"> <li>1. Provide professional public health advice about clinical effectiveness and comparative performance in service redesign discussions with clinicians as requested;</li> <li>2. Provide a public health analysis and interpretation of any datasets used in discussion with clinicians as requested by the HCCG;</li> <li>3. Engage with clinicians as necessary as part of IFR procedures.</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work;</li> <li>2. Properly consider the findings of any public health reports;</li> <li>3. Provide any NHS derived data as necessary.</li> </ol>	<p><i>HCCG Commissioning policies (as required throughout year); Case reports and presentations for named patient panels (ongoing throughout year).</i></p>
ME3. Provide the necessary skills and knowledge, and population relevant health service intelligence to carry out health equity audits and to advise on health impact assessments	<ol style="list-style-type: none"> <li>1. Carry out health equity audits and health impact assessments where commissioned to do so by HCCG;</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work;</li> <li>2. Properly consider the findings of any public health reports;</li> <li>3. Provide any NHS derived data as necessary.</li> </ol>	<p><i>Health equity audits and health impact assessments (as commissioned by the HCCG); CCG Commissioning policies (as commissioned by the HCCG).</i></p>
ME4. Interpret service data outputs, including clinical outputs	<ol style="list-style-type: none"> <li>1. Provide a public health analysis and interpretation of any local service data as requested by the HCCG.</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide a named link person when commissioning specific pieces of work;</li> <li>2. Properly consider the findings of any public health reports;</li> </ol>	<p><i>HCCG Annual Health Profile(October 2013); HCCG Commissioning policies (as commissioned by the</i></p>

		3. Provide any NHS derived data as necessary.	HCCG).
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## SECTION 6: KEY OUTPUTS & ANNUAL WORKPLAN

6.0 Table 1 overleaf provides an annual timetable for the delivery of the key products contained within the service agreement. This timetable forms part of the formal agreement to ensure that public health capacity is pre-planned across an annual planning cycle to ensure resource is directed towards the key products in a timely, planned manner. The workplan spells out exactly what is to be produced under the requirements of the core offer. Significant additional work in-year is not expected and can only be added by mutual agreement.

6.1 The content and timing of some of the key outputs, e.g. needs assessments, are at the discretion of the HCCG. The size and scale of these outputs place significant demands on the public health intelligence function. **It is therefore expected that the HCCG will agree any topics for the following with the HC at the start of the financial year:**

- needs assessments;
- evaluations of service redesign initiatives;
- evidence reviews to support service redesign;
- health equity audits;
- health impact assessments.

6.2 This will provide for a planned approach to the delivery of population healthcare advice to the HCCG, and support the performance management and accountability in the delivery of this function.



Table 1: Core offer annual workplan 2013-14

Annual workplan	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
<b>Key products</b>												
Intergated Needs Assessment	Draft Report		Final Report									
Annual Public Health Report												
Public Health Outcome Performance Reports												
Health Needs Assessment (agreed topics)												
Service Review												
HCCG Annual Health Profile												
Low Priority Treatment Policy annual review												
NICE Technology Horizon Scanning Report												
Evidence Review reports for service redesign												
Health Equity Audit												
Health Impact Assessment												
<b>Ongoing work</b>												
HCCG Commissioning Strategy												
Supporting IFR process												

## **SECTION 7: REPORTING ARRANGEMENTS**

7.0 Progress with delivering the outputs described in this service agreement will be monitored via monthly meetings between Public Health CPH and Head of Clinical Objectives and Service Transformation (HCOST) and quarterly meetings between the HC Public Health Team (DPH and CspH) and HCCG Representatives (CO and HCOST).

In addition, public health representation will also be provided for the following groups:

- HCCG Primary Care Steering Group
- Every One Counts Meetings
- Named Patient Panels

7.1 Public health will also be in attendance at the HCCG Board meetings, if required.

7.2 HCCG will provide representation for the following groups:

- Herefordshire Health and Wellbeing Board
- Herefordshire Health Protection Committee
-







<b>MEETING:</b>	<b>HEALTH AND SOCIAL CARE OVERVIEW &amp; SCRUTINY COMMITTEE</b>
<b>MEETING DATE:</b>	<b>6 DECEMBER 2013</b>
<b>TITLE OF REPORT:</b>	<b>EXECUTIVE RESPONSE TO THE TASK AND FINISH GROUP REPORT ON: ADULT SOCIAL CARE - NEXT STAGE INTEGRATION (PHASE 1)</b>
<b>REPORT BY:</b>	<b>INTERIM DIRECTOR OF ADULTS WELLBEING</b>

**1. Classification**

Open

**2. Key Decision**

This is not a Key Decision

**3. Wards Affected**

County-wide

**4. Purpose**

- 4.1 To report the Executive's response and action plan in respect of the report of the Task and Finish Group on Adult Social Care - Next Stage Integration (Phase 1).

**5. Recommendations**

**THAT:**

- a) **The Committee notes the Executive response and contents of the action; and**
- b) **The Committee that the Committee receive an updated report in six months.**

**6. Alternative Options**

None.

**7. Reasons for Recommendations**

- 7.1 To ensure that the Committee is aware of the Executive's response to the Task and Finish Group report and to comply with the Council's Constitution (4.5.13.3).

**8. Key Considerations**

A Health & Social Care Overview & Scrutiny Committee Task & Finish Review has been undertaken into the Service user Engagement within the Next Stage Integration Project (Phase 1) for Adult Social Care.

The Executive's responses to the recommendations of the Review Group are contained within the Appendix of this report.

## **9. Community Impact**

- 9.1 Agreement to the recommendations maintains the current Corporate and Adult Wellbeing objectives that are in place to support the Health and Wellbeing Strategy and the Corporate Plan.

## **10. Equality and Human Rights**

- 10.1 An Equality Impact Assessment was undertaken in relation to the overarching Next Stage Integration Project (see Cabinet agenda 25 July 2013). As remaining elements of the programme are developed and implemented individual assessments are being maintained and used to inform decision-making.

## **11. Financial Implications**

- 11.1 The financial implications of the agreed recommendations is considered to be nil where action is already in place and resources are agreed as part of business as usual or project resource. New actions arising from the agreed recommendations, for example Task and Finish Recommendation 6 shown at Appendix 1 would need to be assessed for further consideration at the appropriate time.

## **12. Legal Implications**

There are no specific legal implications for this report.

## **13. Risk Management**

- 13.1 The responses of the Executive take into account identified risks. The response to Recommendation 18 is not accepted because the risks associated with carrying out the recommendation outweigh any perceived benefits at this time.

## **14. Consultees**

- 14.1 The Head of Commercial Services, the Communication Manager, the Equality, Human Rights and Partnership Manager and the Director of Adult Wellbeing have been consulted on the responses to the recommendations.

## **15. Appendices**

- 15.1 Task and Finish Review Group – Adult Social Care - Next Stage Integration (Phase 1) Project – Recommendations and Executive Responses

## **16. Background Papers**

- 16.1 None

## Health and Adult Social Care Overview &amp; Scrutiny Task &amp; Finish Group Report on the Next Stage Integration Project

<b>Recommendation No. 1</b>	That, where possible, pre-consultation is undertaken with consultees.		
Executive's Response	This principle is agreed and where possible applied.  In Adult Social Care a key objective is <b>To ensure that service user needs inform service delivery and that service users, their families, carers and advocates know how to access the information and service that they need from us.</b> The service user engagement objective is <b>To interactively share information on Adult Social Care and new developments and potential changes in a way that enables service users to give their views on the service and what they feel works for them.</b>  A programme of service user engagement is in place that will enable ongoing engagement of service users in planning future service change and delivery including the pre planning of any consultation tasks.		
Action	Owner	By When	Target/Success criteria
Continue to implement the agreed Service user engagement programme.	Laura Ferguson – Service Manager ASC	Sept 13 – March 14	Progress
<b>Recommendation No. 2</b>	That a process should be considered prior to commencement of any consultation. This process should include a full equality assessment. The equality assessment should identify a range of ways in which the Council should engage with consultees.		
Executive's Response	This principle is agreed and applied within the NSI Project. There is a whole council approach to this in place. Officers have recently undertaken a review and as a result have drafted a toolkit that is available on the intranet <a href="http://blogs/communications/Lists/Posts/Post.aspx?ID=9">http://blogs/communications/Lists/Posts/Post.aspx?ID=9</a> and it will be launched for use by mid- November 2013.		
Action	Owner	By When	Target/Success criteria
Launch of Toolkit	Ben Proctor	Mid Nov 2013	Use and impact of toolkit – feedback from officers and consultees
			Progress

## Health and Adult Social Care Overview &amp; Scrutiny Task &amp; Finish Group Report on the Next Stage Integration Project

<b>Recommendation No. 3</b>	That any consultation process should make use of all available user databases.		
Executive's Response	This principle is agreed where appropriate as information held about individuals can only be shared in accordance with data protection principles and therefore the council makes use of information available to it within that framework. Broader community information can be accessed from. <i>Understanding Herefordshire</i> and there is a procedure in place whereby all requests for research, engagement or communication support to undertake consultation can be requested via an intranet form to improve co-ordination and encourage the requestor to think about what they need in advance.		
Action	Owner	By When	Target/Success criteria
N/A	N/A	N/A	N/A
<b>Recommendation No. 4</b>	That the Executive conduct research to identify a common approach to consulting with Members, Town and Parish Councils on change affecting their constituents.		
Executive's Response	Not accepted. There are already existing mechanisms for both formal consultation with local councils and for more general communications with both local councils and Herefordshire Council Ward Members. Whilst it is accepted that there may on occasion be inconsistent use of these mechanisms (both by those feeding information in and by recipients not reading the information or attending briefings), in light of pressures on financial and staff resources it is not felt that commissioning further research in this area at this time is a priority.		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 5</b>	That the engagement model including reference groups is reviewed in six months time to ensure that it is still robust and efficient.		
Executive's Response	This is a matter for the Health & Social Care Overview & Scrutiny Committee to determine in light of its overall work programme.		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 6</b>	That a task and finish group is commissioned by the Health and Social Care Overview and Scrutiny Committee to		



Health and Adult Social Care Overview & Scrutiny Task & Finish Group Report on the Next Stage Integration Project

	review the consultation process adopted by Herefordshire Council		
Executive's Response	This is a matter for the Health & Social Care Overview & Scrutiny Committee, in consultation with the General Overview & Scrutiny Committee to determine in light of their overall work programmes .		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 7</b>	That a Council Member shall be named as an advocate for those with learning difficulties. This individual Member shall be named within three months.		
Executive's Response	Agreed. The Constitution makes provision for the appointment of individual members to champion a particular issue across the Council, with its partners, and in communities. In consultation with the Leader and Chief Executive Councillor Chris Chappell has agreed to act as member champion for people with learning disabilities.		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 8</b>	That as part of the procurement exercise the Council should give consideration to facilitating community activities in order to build bridges into local communities.		
Executive's Response	Within each tender we are assessing tenderers (as part of the quality assessment of each bid), on their specific proposals to work in partnership with the wider community to enrich the quality of life for Service Users and members of the wider community in terms of social and economic well-being.		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 9</b>	That an outcome-based commissioning approach should be taken. This shall better meet service users' needs and give more control to users.		
Executive's Response	This is a fundamental principle underpinning the NSI programme. It is the council's aim to move towards an outcome based approach, combined with the appropriate input and output requirements, as part of our strategic commissioning plan.		
Action	Owner	By When	Target/Success criteria
			Progress

Health and Adult Social Care Overview & Scrutiny Task & Finish Group Report on the Next Stage Integration Project

<p><b>Recommendation No. 10</b></p>	<p>That equal opportunity shall be allowed in the procurement process for a 'mixed market' of small providers as for a single large provider</p>								
<p>Executive's Response</p>	<p>Agreed. Where appropriate the council actively seeks to commission services from a rich mix of suppliers including large and small providers. In particular the council undertakes a range of activities to support local suppliers to help increase their chances of being successful in the council's tendering activities such as:</p> <ul style="list-style-type: none"> <li>• Holding a range of 'Meet the Buyer' and 'How to Tender' workshops</li> <li>• Supply market development through supplier networking, soft market testing and consultation</li> <li>• more simplified and proportionate tender processes and documentation</li> <li>• where possible applying procurement strategies that breaks demands into smaller 'lots'</li> <li>• use a single, council-wide online e Tendering Portal to access tender opportunities</li> </ul> <p>The Council's Commissioning and Commercial Strategy endorsed by the Council's Commercial Board and available on the intranet for further information relating to this.</p>								
<p>Action</p>	<table border="1"> <thead> <tr> <th data-bbox="759 1308 810 1688">Owner</th> <th data-bbox="759 1128 810 1308">By When</th> <th data-bbox="759 555 810 1128">Target/Success criteria</th> <th data-bbox="759 179 810 555">Progress</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Owner	By When	Target/Success criteria	Progress				
Owner	By When	Target/Success criteria	Progress						
<p><b>Recommendation No. 11</b></p>	<p>That a task and finish group is commissioned by the Health and Social Care Overview and Scrutiny Committee within six months, to look at the support that is given to carers.</p>								
<p>Executive's Response</p>	<p>This is a matter for the Health &amp; Social Care Overview &amp; Scrutiny Committee to determine in light of its overall work programme.</p>								
<p>Action</p>	<table border="1"> <thead> <tr> <th data-bbox="1046 1308 1098 1688">Owner</th> <th data-bbox="1046 1128 1098 1308">By When</th> <th data-bbox="1046 555 1098 1128">Target/Success criteria</th> <th data-bbox="1046 179 1098 555">Progress</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Owner	By When	Target/Success criteria	Progress				
Owner	By When	Target/Success criteria	Progress						
<p><b>Recommendation No. 12</b></p>	<p>That a report is provided to the Health and Social Care Overview and Scrutiny Committee within three months as to the performance on initial assessments. This should include timescales for how long initial assessments are taking and identify strategies for improvement</p>								
<p>Executive's Response</p>	<p>Agreed. The percentage of adult assessments completed within agreed timescales is now a critical performance indicator in the corporate performance report received quarterly by Cabinet (latest performance included in the Cabinet agenda 21 November 2013).A report will be commissioned by the Director of Adult Wellbeing for delivery in the new year</p>								

## Health and Adult Social Care Overview &amp; Scrutiny Task &amp; Finish Group Report on the Next Stage Integration Project

Action	Owner	By When	Target/Success criteria	Progress
Draft Report	Director Adult Wellbeing Helen Coombes	February 2014	Delivery of Report	N/A
<b>Recommendation No. 13</b>	That a feasibility enquiry is undertaken by the Executive into provider staff undertaking initial assessments on service users. This should be undertaken within three months and the results reported back to Health and Social Care Overview and Scrutiny within one month of completion			
Executive's Response	This will be taken forward and the process for implementation and piloted with selected providers once contracts have been awarded			
Action	Owner	By When	Target/Success criteria	Progress
<b>Recommendation No. 14</b>	That the Council, Clinical Commissioning Group and Wye Valley NHS Trust ensure that the terminology used by the Council (social care) and Wye Valley Trust (for example, in the definition of re-ablement) is consistent. There must be a shared understanding of this terminology			
Executive's Response	Agreed – There is an agreed collaborative approach between partners at a strategic and operational level that enables a greater level of discussion and clarity around what current delivery really is and what future planning looks like and as a result terminology is regularly challenged and clarified. This will lead to the shared understanding recommended above. The Social Care Institute for Excellence has also produced a Social Care Jargon Buster publication that is regularly shared within and out with the council to assist with queries on terminology.			
Action	Owner	By When	Target/Success criteria	Progress
<b>Recommendation No. 15</b>	That a trial of locating social workers in Accident and Emergency on a Saturday and Sunday is considered.			
Executive's Response	Agreed. It is planned to trial this from the 1 <sup>st</sup> December 2013. The trial will be monitored until 31 <sup>st</sup> March 2014 and recommendations on future provision and benefits will be reported.			
Action	Owner	By When	Target/Success criteria	Progress
<b>Recommendation No. 16</b>	That a regular report be provided by all providers of adult social care to the Health and Social Care Overview and Scrutiny Committee every six months.			

Health and Adult Social Care Overview & Scrutiny Task & Finish Group Report on the Next Stage Integration Project

Executive's Response	Adult Social Care key performance indicators are included in the quarterly corporate performance report to Cabinet. The Director of Adult Wellbeing and the Cabinet Member Health & Wellbeing will of course be happy to attend any meeting of the Committee to account for performance.		
Action	Owner	By When	Target/Success criteria
			Progress
<b>Recommendation No. 17</b>	That an update is provided to the Health and Social Care Overview and Scrutiny Committee in six months on the development of virtual wards		
Executive's Response	Reports on the Virtual Ward project will be presented to CCG Board and the Health and Wellbeing Board and this information will be available to HSCOSC.		
Action	Owner	By When	Target/Success criteria
Share Reports with HOSC	Director Adult Wellbeing	As they become available	N/A
			Progress
			N/A
<b>Recommendation No. 18</b>	That a complete overhaul of the Integrated Community Equipment Store is completed within three months.		
Executive's Response	Not agreed. This service is currently subject to a tendering exercise which will ensure that a new Community Equipment Store provider is in place as of the 1 <sup>st</sup> April 2014. The service is being commissioned on an outcome basis which will mitigate some of the concerns identified by the Task & Finish Group; to undertake a service review at this point of the process would be counter-productive.		
Action	Owner	By When	Target/Success criteria
			Progress



<b>MEETING:</b>	<b>HEALTH AND SOCIAL CARE OVERVIEW &amp; SCRUTINY COMMITTEE</b>
<b>MEETING DATE:</b>	<b>6 DECEMBER 2013</b>

<b>TITLE OF REPORT:</b>	<b>COMMITTEE WORK PROGRAMME</b>
<b>REPORT BY:</b>	<b>HEAD OF GOVERNANCE</b>

## 1. Classification

Open

## 2. Key Decision

This is not an executive decision

## 3. Wards Affected

County-wide

## 4. Purpose

4.1 To consider the Committee's work programme.

## 5. Recommendation

**THAT: The work programme as appended be noted, subject to any comments the Committee wished to make.**

## 6. Alternative Options

It is for the Committee to determine its work programme as it sees fit to reflect the priorities facing Herefordshire. Any number of subjects could be included in the work programme. However, the Committee does need to be selective and ensure that the work programme is focused on the key issues, realistic and deliverable within the existing resources available.

## 7. Reasons for Recommendations

7.1 The Committee needs to develop a manageable work programme to ensure that scrutiny is focused, effective and produces clear outcomes.

## 8. Key Considerations

The Committee is asked to note its work programme and to note progress on current work.

## **9. Community Impact**

- 9.1 The topics selected for scrutiny should have regard to what matters to the County's residents.

## **10. Equality and Human Rights**

- 10.1 The topics selected need to have regard for equality and Human rights issues.

## **11. Financial Implications**

- 11.1 The cost of the work of the Scrutiny Committee will have to be met within existing resources. It should be noted the costs of running scrutiny will be subject to an assessment to support appropriate processes.

## **12. Legal Implications**

The Council is required to deliver an Overview and Scrutiny function.

## **13. Risk Management**

- 13.1 There is a reputational risk to the Council if the Overview & Scrutiny function does not operate effectively. The arrangements for the development of the work programme should help mitigate this risk.

## **14. Consultees**

- 14.1 Following initial consultations on topics for scrutiny with Directors and Members of the Cabinet, all members of the Council were invited to suggest items for scrutiny.

## **15. Appendices**

- 15.1 An outline work programme for the Committee.

Executive Rolling Programme (To follow).

## **16. Background Papers**

- 16.1 None identified.

**HEALTH AND SOCIAL CARE OVERVIEW & SCRUTINY COMMITTEE  
ITEMS IDENTIFIED FOR INCLUSION IN THE WORK PROGRAMME**

**DRAFT WORK PROGRAMME**

<b>14 February 2013</b>	
New health organisations – 12 months on.	To review the work of the following organisations 12 months since integration: Clinical Commissioning Group, NHS Arden, Public Health, Health and Wellbeing Board and Healthwatch
Work Programme	To consider the Committees Work Programme
<b>4 April 2013</b>	
Accountability Session	To hold a public accountability session for organisations within the health sector. To include Wye Valley NHS Trust, 2gether NHS Trust and West Midlands Ambulance Service
Work Programme	To consider the Committees Work Programme

<b>UNALLOCATED ITEMS</b>
Children’s health and wellbeing (a focus on Childhood obesity)
National Health Policies
On-line bullying

**The following issues are suggestions from the public for inclusion**

the impact of housing developments in Herefordshire on Hereford hospital and other social services
--





**Health and Social Care Overview & Scrutiny Committee**

<b>REVIEWS IDENTIFIED FOR FEASIBILITY STUDY</b>	
<b>Proposed Review</b>	<b>Status</b>
Accident and Emergency Department at Wye Valley Trust	The Chairman has requested that a feasibility study is undertaken into a review of the accident and emergency department at Hereford County Hospital. Feasibility shall be undertaken by the end of November 2013.
Leisure Services for children within Herefordshire	This topic was suggested by a Member of Health and Social Care Overview and Scrutiny Committee in October 2013. Initial discussions are underway and a feasibility study shall be undertaken by December 2013.
Budget Task and Finish Group	As adult social care is the significant overspend within the budget then a joint scrutiny task and finish group shall convene in November-December 2013 to identify the risks and pressures prior to a joint scrutiny committee in late January.
Children Who Go Missing From Care	Feasibility Study completed during scrutiny training event. Scoping to be confirmed by December 2013
Next Stage Integration – 2gether Trust	Further to the task and finish group into next stage integration of Wye Valley Trust, the group shall reconvene to review the arrangements for integration of 2gether NHS Foundation Trust.
Oral Health Promotion	Currently undergoing feasibility study, group to commence in January.

<b>REVIEWS IN PROGRESS</b>	
<b>Review</b>	<b>Comment</b>
Open Book Review	The task and finish group was set up in August 2013. In line with the Committee's recommendation, further consultation is underway with the relevant department and nursing and residential care providers. The task and finish group shall reconvene after the consultation takes place. It is envisaged that this will be around December time.
Access to out of hours Services	Feasibility study and scoping statement completed. However, due to work currently being undertaken by Herefordshire Clinical Commissioning Group, the task and finish group shall wait until this work has been completed before commencing the review.

Together with committee meetings and task and finish groups, other matters are being dealt with by the Health and Social Care Overview and Scrutiny Committee through briefing notes. Once these briefing notes are distributed, Members are given the opportunity to feedback or ask relevant questions from officers. If, after the questions and answers, Members are concerned about specifics from within these areas then a feasibility study shall be undertaken to determine the most appropriate next steps for dealing with the matter.

The topics identified for this process are:

- Public Health- health checks
- National Child Measurement Programme
- Alcohol service charges
- 6 month review of Multi Agency Safeguarding Hub
- 3 monthly updates on Care and Support Bill

Executive Rolling Programme: December 2013

Executive Decisions to be taken – December 2013

<b>DECISION MAKER CABINET</b>				
<b>Meeting / Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Portfolio Holder</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
12/12/13  (deferred from 4/10/13)	<b>KEY</b>	Waste Management Contract  <i>To consider concluding a variation to the waste management contract with Mercia Waste to enable the construction of an Energy from Waste Plant at Hartlebury and other ancillary matters.</i>	Contracts & Assets – Councillor H Bramer	Economy, Communities & Corporate / Andy Tector  <a href="mailto:aet@herefordshire.gov.uk">aet@herefordshire.gov.uk</a>
<b>DECISION MAKER CABINET</b>				
<b>Meeting / Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Portfolio Holder</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
19/12/13	<b>KEY</b>	Open Book Review of Residential and Nursing Home Fees for Older People	Health & Wellbeing – Cllr G Powell	Adults Wellbeing / Helen Coombes  <a href="mailto:helen.coombes@herefordshire.gov.uk">helen.coombes@herefordshire.gov.uk</a>
19/12/13	Non Key	Budget Monitoring Report  <i>To report the financial position for both Revenue and Capital.</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council	Economy, Communities & Corporate / Peter Robinson  <a href="mailto:Peter.Robinson@herefordshire.gov.uk">Peter.Robinson@herefordshire.gov.uk</a>
19/12/13	<b>KEY</b>	Changes to Herefordshire Schools and Post 16 Transport Policy  <i>To consider changes to the Council's home to school transport policy such that it provides the statutory minimum requirement of free transport and;</i>  <i>To consider changes to the Council's school transport policy such that post 6 SEN students pay the same charge as all other students</i>	Young People and Children's Wellbeing – Councillor JW Millar	Children's Wellbeing / Andy Hough

19/12/13	<b>KEY</b>	European Structural and Investment Fund Strategy 2014-2020 <i>To obtain Cabinet approval for the final draft submission of the Marches European Structural and Investment Fund Strategy 2014-2020.</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader	Economy, Communities and Corporate / Nick Webster
19/12/13	<b>KEY</b>	Adult Social Care Next Stage Integration – Commissioning of Day Opportunities <i>To gain agreement to the underpinning principles, the specification, process and transition plans to support the procurement and implementation plan for the day opportunities that are part of the Next Stage Integration programme.</i>	Health & Wellbeing – Councillor GJ Powell	Adults' Wellbeing / Helen Coombes

**DECISION MAKER  
CABINET MEMBER CONTRACTS & ASSETS  
COUNCILLOR H BRAMER**

Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
TBC	<b>KEY</b>	Managed and Secure Printing for Multi-Functional Devices (Printers) <i>To obtain approval for new contractual arrangements for the supply of Multi-Functional Devices (Printers)</i>	Economy, Communities and Corporate / Wayne Welsby <a href="mailto:wwelsby@herefordshire.gov.uk">wwelsby@herefordshire.gov.uk</a>
12/12/13	<b>KEY</b>	Countryside Service Review <i>To agree proposals to generate income and move towards a financially sustainable service.</i>	Economy, Communities and Corporate / Steve Burgess <a href="mailto:sburgess@herefordshire.gov.uk">sburgess@herefordshire.gov.uk</a>
12/12/13	<b>KEY</b>	Withdrawal of Arts Commissioning Grants <i>To consider the withdrawal of Commissioning Grants for arts organisations</i>	Economy, Communities and Corporate / Mick Ligema
12/12/13	<b>KEY</b>	Funding for Lady Hawkins and Wigmore Leisure Centres <i>To consider the withdrawal of funding for Lady Hawkins and Wigmore Leisure Centres</i>	Economy, Communities and Corporate / Mick Ligema
13/12/13	<b>KEY</b>	Future Trust Arrangements for Museum Services	Economy, Communities and Corporate / Mick Ligema

		<i>To consider the proposal for moving Museum Services into Trust status</i>	
13/12/13	<b>KEY</b>	Closure of public facing Museum Services	Economy, Communities and Corporate / Mick Ligema / Elizabeth Semper O'Keefe
19/12/13	<b>KEY</b>	<i>To consider further service reductions for the public facing Museums Service</i> Disposal of Brockington	Economy, Communities and Corporate / Tony Featherstone
<b>DECISION MAKER</b> <b>CABINET MEMBER CORPORATE SERVICES</b> <b>COUNCILLOR PM MORGAN</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
<b>DECISION MAKER</b> <b>CABINET MEMBER CORPORATE STRATEGY &amp; FINANCE:</b> <b>COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
19/12/13	<b>KEY</b>	Approval for the construction of business units within the Enterprise Zone  <i>To seek approval for the construction of new business units on Plot C21 of the Hereford Enterprise Zone to facilitate business investment and job creation.</i>	Economy, Communities and Corporate / Mark Pearce, Enterprise Zone Managing Director
<b>DECISION MAKER</b> <b>CABINET MEMBER HEALTH &amp; WELLBEING</b> <b>COUNCILLOR GJ POWELL</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
<b>DECISION MAKER</b> <b>CABINET MEMBER INFRASTRUCTURE</b> <b>COUNCILLOR PD PRICE</b>			
<b>Decision Date</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>

(on or after)									
TBC	<b>KEY</b>	Increasing income from parking – On Street Charging in Hereford							Economy, Communities & Corporate / Steve Burgess <a href="mailto:sburgess@herefordshire.gov.uk">sburgess@herefordshire.gov.uk</a>
6/12/13	Non Key	Development Management – Review of charging for pre-application advice							Economy, Communities and Corporate / Marc Willimont
17/12/13	Non key	<i>To review the operation of the system for the charging of pre-application planning advice including the level of charges</i> Local Development Scheme – Annual Review							Economy, Communities and Corporate
		<i>To seek approval the annual review of the Local Development Scheme, September 2013 prior to its submission to the Secretary of State.</i>							
Cabinet Member									
<b>Decision Date</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>							
(on or after)		<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>							
Dec 13	Non Key	Children's Services /							

Scrutiny Work Programmes – December 2013

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### GENERAL OVERVIEW AND SCRUTINY COMMITTEE ITEMS – DECEMBER 2013

MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:	
			A&G Committee Cabinet Council	Meeting Date
9 December 2013	Financial Inclusion	To consider how payday loans and changes to the council tax regime are affecting financial inclusion. To include an update on Moneybox Credit Union.		
9 December 2013	School Examination Performance	To consider the examination performance in Herefordshire Schools.		
9 December 2013	Task and Finish Review	To consider the findings and recommendations from the task and finish group review into cultural services.		
<b>HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ITEMS – DECEMBER 2013</b>				
MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:	
			A&G Committee Cabinet Council	Meeting Date
6 December 2013	Work Programme	To consider the Committee's Work Programme		

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Executive Rolling Programme: January 2014

Executive Decisions to be taken – January 2014

DECISION MAKER CABINET				
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
23/1/14		Budget proposals		
23/1/14	<b>KEY</b>	Transport and Travel Review – Preferred Network Option <i>To agree a preferred arrangement for public transport and education transport service integration.</i>	Health & Wellbeing – Councillor GJ Powell	Economy, Communities & Corporate / Steve Burgess <a href="mailto:sburgess@herefordshire.gov.uk">sburgess@herefordshire.gov.uk</a>
23/1/14	<b>KEY</b>	Libraries and Customer Services	Corporate Services – Councillor PM Morgan & Contracts & Assets – Councillor H Bramer	Economy, Communities & Corporate / Natalia Silver

DECISION MAKER CABINET MEMBER CONTRACTS & ASSETS COUNCILLOR H BRAMER			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
16/1/14	<b>KEY</b>	Halo Leisure Prudential Borrowing Programme  <i>To support Halo Prudential Borrowing for investment programme at Hereford Leisure Centre, Hereford Leisure Pool, Leominster Leisure Centre, Ledbury Swimming Pool, Ross-on-Wye Swimming Pool and Photo-voltaic investment. To approve in principle the allocation of capital expenditure funded by prudential borrowing for a capital investment and improvement programme at leisure facilities managed by Halo Leisure.</i>	Economy, Communities & Corporate / Mick Ligema  <a href="mailto:mligema@herefordshire.gov.uk">mligema@herefordshire.gov.uk</a>

DECISION MAKER CABINET MEMBER CORPORATE SERVICES COUNCILLOR PM MORGAN			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
13/1/14	<b>KEY</b>	Herefordshire County Public Services Network Provision <i>To approve proposal for provision of network services from March 2014 to serve Herefordshire Council and Partners</i>	Economy, Communities and Corporate / Jenny Lewis & Dominic Latham



<b>DECISION MAKER CABINET MEMBER CORPORATE STRATEGY &amp; FINANCE: COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
On or after 6 January 2014	<b>KEY</b>	Revision to the Current Council Tax Reduction Scheme Provides an update on the current CTRS and recommends further changes to the current Scheme that will achieve additional revenue for the Council	Peter Robinson – Chief Officer Finance
On or after 6 January 2014	Non Key	Council Tax Discount Scheme <i>To agree revisions to the current scheme.</i>	
<b>DECISION MAKER CABINET MEMBER HEALTH &amp; WELLBEING COUNCILLOR GJ POWELL</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
TBC	Non Key	Preventing Homelessness Strategy 2013-2016 <i>To focus on preventing homelessness in Herefordshire</i>	Economy, Communities & Corporate / Richard Gabb <a href="mailto:rgabb@herefordshire.gov.uk">rgabb@herefordshire.gov.uk</a>
9/1/14	<b>KEY</b>	Integrated Community Equipment Store (ICES) <i>To award the contract for ICES</i>	Adults Wellbeing / Jacky Edwards
24/1/14	<b>KEY</b>	Day Opportunities <i>To award the contracts</i>	Adults Wellbeing / Jacky Edwards
<b>DECISION MAKER CABINET MEMBER INFRASTRUCTURE COUNCILLOR PD PRICE</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
Jan 14	Non Key	Off-Street Car Parking Charges <i>To consider and agree a schedule of revised charges for council controlled and managed off-street car parks</i>	Economy, Communities and Corporate – Shane Hancock
<b>DECISION MAKER CABINET MEMBER YOUNG PEOPLE &amp; CHILDREN'S WELLBEING: COUNCILLOR JW MILLAR</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
17/1/14	Non Key	National School Funding Formula 2014/15 <i>To approve the provisional school funding formula submitted to the Education Funding Agency</i>	Children's Wellbeing / Malcolm Green



Other Meetings – January 2014

Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
17/01/14	BPF	Revision to the Current Council Tax Reduction Scheme Provides an update on the current CTRS and recommends further changes to the current Scheme that will achieve additional revenue for the Council		Peter Robinson – Chief Officer Finance
17/01/14	BPF	Council Tax Discount Scheme and NNDR Discretionary Relief To agree revisions to the current schemes.		Peter Robinson – Chief Officer Finance
17/01/14	Non Key	Leader's Report To receive the Leader's report, which provides an overview of the Executive's activity since the last Council meeting.	Corporate Strategy & Finance/Leader – Councillor AW Johnson	Economy, Communities & Corporate / Annie Brookes <a href="mailto:ab1@herefordshire.gov.uk">ab1@herefordshire.gov.uk</a>
17/01/14	B&PF	Review of Gambling Act Policy		Economy, Communities & Corporate / Claire Corfield
17/01/14	N/A	To consider implementing new policy Review of Licensing Act Policy		<a href="mailto:clcorfield@herefordshire.gov.uk">clcorfield@herefordshire.gov.uk</a>
17/01/14	N/A	To consider implementing new policy Introduction of a Sex Establishment Policy		Economy, Communities & Corporate / Claire Corfield <a href="mailto:clcorfield@herefordshire.gov.uk">clcorfield@herefordshire.gov.uk</a>
17/01/14	N/A	To consider implementing new policy Review of Gypsy and Traveller Policy		Economy, Communities & Corporate / Claire Corfield <a href="mailto:clcorfield@herefordshire.gov.uk">clcorfield@herefordshire.gov.uk</a>
17/01/14	N/A	To consider implementing new policy Waste Contract	Contracts & Assets – Councillor H Bramer	Economy, Communities & Corporate / Andy Tector <a href="mailto:aet@herefordshire.gov.uk">aet@herefordshire.gov.uk</a>
17/01/14	Non Key	Appointments to Council Committees	Corporate Services – Councillor PM Morgan	Economy, Communities & Corporate / John Jones <a href="mailto:jjones4@herefordshire.gov.uk">jjones4@herefordshire.gov.uk</a>
17/01/14	N/A	Designation and appointment of Monitoring Officer, and Returning Officer		Deputy Monitoring Officer – Annie Brookes <a href="mailto:ab1@herefordshire.gov.uk">ab1@herefordshire.gov.uk</a>

<b>AUDIT &amp; GOVERNANCE COMMITTEE</b>			
Meeting Date	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information
14/1/14	Scrutiny Work Programmes – January 2014		

Scrutiny Work Programmes – January 2014

<b>GENERAL OVERVIEW AND SCRUTINY COMMITTEE ITEMS – JANUARY 2014</b>				
MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:	
			A&G Committee Cabinet Council	Meeting Date
6 January 2014	Fire Service Consultation	To receive the task and finish group responses to the fire service consultation and to approve those recommendations for submission to the fire service.		

<b>HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ITEMS – JANUARY 2014</b>				
MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:	
			A&G Committee Cabinet Council	Meeting Date
17 January 2014				

Executive Rolling Programme: February 2014

Executive Decisions to be taken – February 2014

<b>DECISION MAKER CABINET</b>				
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
13/2/14	Non Key	Budget Monitoring Report <i>To report the financial position for both Revenue and Capital</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council	Economy, Communities & Corporate /
13/2/14	Non Key	Integrated Corporate Performance Report	Corporate & Assets – Councillor PM Morgan	Organisation Development Team / Jenny Lewis <a href="mailto:jlewis3@herefordshire.gov.uk">jlewis3@herefordshire.gov.uk</a>

13/2/14	NNDR Discretionary Relief <i>To agree revisions to the current scheme</i>	Corporate Strategy & Finance – Councillor AW Johnson	Economy, Communities & Corporate / Peter Robinson
<b>DECISION MAKER</b>			
<b>CABINET MEMBER CONTRACTS &amp; ASSETS</b>			
<b>COUNCILLOR H BRAMER</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact</b> information for documents/report to be submitted to Decision Maker
<b>DECISION MAKER</b>			
<b>CABINET MEMBER CORPORATE SERVICES</b>			
<b>COUNCILLOR PM MORGAN</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact</b> information for documents/report to be submitted to Decision Maker
<b>DECISION MAKER</b>			
<b>CABINET MEMBER CORPORATE STRATEGY &amp; FINANCE:</b>			
<b>COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact</b> information for documents/report to be submitted to Decision Maker
<b>DECISION MAKER</b>			
<b>CABINET MEMBER HEALTH &amp; WELLBEING</b>			
<b>COUNCILLOR GJ POWELL</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact</b> information for documents/report to be submitted to Decision Maker
13/2/14	<b>KEY</b> Home and Community Support <i>To award the Home and Community Support Contracts</i>		Adults Wellbeing / Jacky Edwards
<b>DECISION MAKER</b>			
<b>CABINET MEMBER INFRASTRUCTURE</b>			
<b>COUNCILLOR PD PRICE</b>			
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact</b> information for documents/report to be submitted to Decision Maker
<b>DECISION MAKER</b>			

<b>CABINET MEMBER YOUNG PEOPLE &amp; CHILDREN'S WELLBEING: COUNCILLOR JW MILLAR</b>		
Decision Date (on or after)	Issue Type	Purpose & Report Title
		Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
Other Meetings – February 2014		

<b>DECISION MAKER COUNCIL</b>			
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder
7/2/14	<b>B&amp;PF</b>	Medium Term Financial Strategy	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council
7/2/14	<b>B&amp;PF</b>	Pay Policy Statement	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council
<b>AUDIT &amp; GOVERNANCE COMMITTEE</b>			
Meeting Date	Purpose & Report Title		Directorate, Lead Officer & Contact information
18/2/14			

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Scrutiny Work Programmes – February 2014

<b>GENERAL OVERVIEW AND SCRUTINY COMMITTEE ITEMS – FEBRUARY 2014</b>			
MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:
			A&G Committee Cabinet Council
10 February 2014	Budget	<ul style="list-style-type: none"> <li>To receive the recommendations of the task and finish group on the 2014/2015 Budget</li> <li>To receive and comment on the 2014/15 Budget</li> </ul>	

<b>HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ITEMS – FEBRUARY 2014</b>			
MEETING/ BRIEFNG DATE	ITEM	PURPOSE	O&SC PRE-DECISION PRIOR TO:
			A&G Committee Cabinet Council
14 February 2014			

Executive Rolling Programme: March 2014

Executive Decisions to be taken – March 2014

<b>DECISION MAKER CABINET</b>			
<b>Meeting / Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Portfolio Holder</b>
13/3/14	Non Key	Budget Monitoring Report <i>To report the financial position for both Revenue and Capital</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council
13/3/14	Non Key	Integrated Corporate Performance Report – 2013/14 Delivery Plan	Corporate & Assets – Councillor PM Morgan
13/3/14	<b>KEY</b>	NNDR Discretionary Relief <i>To consider changes to the policy.</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council
<b>DECISION MAKER CABINET MEMBER CONTRACTS &amp; ASSETS COUNCILLOR H BRAMER</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
			Organisation Development Team / Jenny Lewis <a href="mailto:jlewis3@herefordshire.gov.uk">jlewis3@herefordshire.gov.uk</a>
<b>DECISION MAKER CABINET MEMBER CORPORATE SERVICES COUNCILLOR PM MORGAN</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
<b>DECISION MAKER CABINET MEMBER CORPORATE STRATEGY &amp; FINANCE: COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL</b>			
<b>Decision Date (on or after)</b>	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>

<b>DECISION MAKER</b>		
<b>CABINET MEMBER HEALTH &amp; WELLBEING</b>		
<b>COUNCILLOR GJ POWELL</b>		
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>
17/3/14	<b>KEY</b>	Re-ablement <i>To award the contracts</i>
<b>DECISION MAKER</b>		
<b>CABINET MEMBER INFRASTRUCTURE</b>		
<b>COUNCILLOR PD PRICE</b>		
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>
<b>DECISION MAKER</b>		
<b>CABINET MEMBER YOUNG PEOPLE &amp; CHILDREN'S WELLBEING:</b>		
<b>COUNCILLOR JW MILLAR</b>		
<b>Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>

Other Meetings – March 2014

<b>Meeting / Decision Date</b> (on or after)	<b>Issue Type</b>	<b>Purpose &amp; Report Title</b>	<b>Portfolio Holder</b>	<b>Directorate, Lead Officer &amp; Contact information for documents/report to be submitted to Decision Maker</b>
7/3/14	Non Key	Council Tax Resolution  <i>To calculate the Council's Council Tax Requirement and set the Council Tax amounts for each category of dwelling in Herefordshire for 2014/15.</i>	Corporate Strategy & Finance / Leader – Councillor AW Johnson	Economy, Communities & Corporate / Peter Robinson  <a href="mailto:Peter.Robinson@herefordshire.gov.uk">Peter.Robinson@herefordshire.gov.uk</a>
7/3/14	Non Key	Leader's Report  <i>To receive the Leader's report, which provides an overview of the Executive's activity since the last Council meeting.</i>	Corporate Strategy & Finance / Leader – Councillor AW Johnson	Economy, Communities & Corporate / Annie Brookes  <a href="mailto:ab1@herefordshire.gov.uk">ab1@herefordshire.gov.uk</a>

7/3/14	Non Key	ANNUAL REPORTS TO COUNCIL: Report of Executive Decisions taken under the Urgency Provisions Report of the Audit and Governance Committee Report of General Overview and Scrutiny Committee Report of Health and Social Care Overview and Scrutiny Committee Report of the Planning Committee Report of the Regulatory Committee	Economy, Communities & Corporate / Annie Brookes <a href="mailto:ab1@herefordshire.gov.uk">ab1@herefordshire.gov.uk</a> Economy, Communities & Corporate / Heather Donaldson <a href="mailto:hdonaldson@herefordshire.gov.uk">hdonaldson@herefordshire.gov.uk</a> Economy, Communities & Corporate / Gemma Dean <a href="mailto:gdean@herefordshire.gov.uk">gdean@herefordshire.gov.uk</a> Economy, Communities & Corporate / Gemma Dean <a href="mailto:gdean@herefordshire.gov.uk">gdean@herefordshire.gov.uk</a> Economy, Communities & Corporate / Tim Brown <a href="mailto:tbrown@herefordshire.gov.uk">tbrown@herefordshire.gov.uk</a> Economy, Communities & Corporate / Tim Brown <a href="mailto:tbrown@herefordshire.gov.uk">tbrown@herefordshire.gov.uk</a>
7/3/14	Non Key	Hereford and Worcester Fire and Rescue Authority Report	External Report
<b>AUDIT &amp; GOVERNANCE COMMITTEE</b>			
<b>Meeting Date</b>	<b>Purpose &amp; Report Title</b>		<b>Portfolio Holder</b>
18/3/14	Biannual forecasts of revenue and capital outturn		<b>Directorate, Lead Officer &amp; Contact information</b> Corporate Services / Peter Robinson
Scrutiny Work Programmes – March 2014			

<b>HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ITEMS – MARCH 2014</b>				
<b>MEETING/ BRIEFNG DATE</b>	<b>ITEM</b>	<b>PURPOSE</b>	<b>O&amp;SC PRE-DECISION PRIOR TO:</b>	
			<b>A&amp;G Committee Cabinet Council</b>	<b>Meeting Date</b>
14 March 2014	Six month update on Director of Public Health's Annual Report			

