

Health and Adult Social Care and Communities Overview and Scrutiny Committee

Agenda

Date: Thursday, 15th June, 2017

Time: 10.00 am

Venue: Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and at the foot of each report.

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT 1. Apologies for Absence

2. **Minutes of Previous meeting** (Pages 3 - 8)

To approve the minutes of the meeting held on 11 May 2017.

3. **Declarations of Interest**

To provide an opportunity for Members and Officers to declare any disclosable pecuniary and non-pecuniary interests in any item on the agenda.

4. Declaration of Party Whip

To provide an opportunity for Members to declare the existence of a party whip in relation to any item on the Agenda

5. Public Speaking Time/Open Session

A total period of 15 minutes is allocated for members of the public to make a statement(s) on any matter that falls within the remit of the Committee.

Individual members of the public may speak for up to 5 minutes, but the Chairman will decide how the period of time allocated for public speaking will be apportioned, where there are a number of speakers.

Note: in order for officers to undertake and background research, it would be helpful if members of the public notified the Scrutiny Officer listed at the foot of the Agenda at least one working day before the meeting with brief details of the matter to be covered.

6. Update on the Potential Relocation of Outpatient Clinics from Handforth

To consider an update on the potential relocation of Outpatient Clinics from Handforth by East Cheshire NHS Trust.

7. Update on North West Ambulance Services Spotlight Review Report

To consider the progress made in respect of the recommendations made by the Committee in July 2016 following the spotlight review.

8. Delayed Transfer of Care- Final Report

The Chairman to update the Committee on the Delayed Transfer Of Care report following a spotlight review in January 2017.

9. **People Live Well For Longer Report and 3 year Commissioning Plan** (Pages 9 - 16)

To consider the People Live Well For Longer Report and three year commissioning plan from the Director of Commissioning.

10. Work Programme (Pages 17 - 22)

To review the current Work Programme.

11. **Forward Plan** (Pages 23 - 30)

To note the current forward plan, identify any new items, and to determine whether any further examination of new issues is appropriate.

Agenda Item 2

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Health and Adult Social Care and Communities Overview and Scrutiny Committee** held on Thursday, 11th May, 2017 at Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor J Saunders (Chairman) Councillor B Dooley (Vice-Chairman)

Councillors Rhoda Bailey, G Baxendale, S Brookfield, E Brooks, L Jeuda, M Warren, G Merry, A Moran, J Rhodes and L Smetham

28 APOLOGIES FOR ABSENCE

Councillors C Chapman, S Edgar and S Pochin.

29 MINUTES OF PREVIOUS MEETING

RESOLVED- That the minutes of the meeting held on the 6 April 2017 be confirmed as a correct record and signed by the Chairman.

30 DECLARATIONS OF INTEREST

There were no declarations of interest.

31 DECLARATION OF PARTY WHIP

There were no declarations of the existence of a party whip.

32 PUBLIC SPEAKING TIME/OPEN SESSION

There were no members of the public present who wished to speak.

33 QUALITY ACCOUNTS PRESENTATION: CHESHIRE AND WIRRAL PARTNERSHIP

The Quality Account 2016/17, was presented by Dr. Anushta Sivananthan, Medical Director at Cheshire and Wirral Partnership (CWP).

Dr. Sivananthan advised the Committee that for the context of the Account, the definition of Quality was that used by the Department of Health (DH), the Institute for Healthcare Improvement (IHI), and the World Health Organisation (WHO).

CWP had three areas of Quality to assess, (Patient Safety, Clinical Effectiveness and Patient Experience) and within that there were goals and outcomes.

In the area of Patient Safety, the completion and quality of handovers had improved from 55% to 75%. For Clinical Effectiveness, teams had been able to see their outcomes every quarter as part of their team information packs which

helped to identify and further improve effectiveness. The Patient Experience data showed that 70% of patients responded that they would be likely or extremely likely to recommend CWP's services.

CWP had received 3500 compliments across the Trust, CWP had increased their Patient Advice and Liaison Service (PALS) by 300% from 20-80.

CWP have scored above the required threshold in line with the national key performance indicators. Notably early intervention in psychosis showed a new and big improvement at 85.7% on a required threshold of 50%.

Other areas of positive performance showed that a Care Quality Commission (CQC) re-inspection rated all services as 'Good', an achievement of 97% for Care Quality Innovation Schemes (CQUINS) and the successful recruitment of 1530 people to participate in mental health research.

Areas for improvement were to increase the overall incident reporting numbers including near misses, Dr. Sivananthan advised that currently the Trust was aware that there were more incidents than were reported. The Trust also needed to increase patient feedback, particularly compliments and the Friends and Family Test (FFT).

Quality Improvement reports were completed every trimester.

Examples of Quality Improvement included a partnership initiative by CWP Forensics department and the National Autistic Society (NAS) to improve screening for Autism at Cheshire's custody suites to prevent those with learning difficulties from re-offending.

The Committee was then invited to ask any questions relating to the Quality Account. Dr. Sivananthan was asked how feedback was given to complainants to ensure similar issues and problems did not happen again. The Committee was advised that CWP staff were encouraged to report all incidents. Incident reporting across CWP was seen as a positive thing to help build the culture to try to minimise misses and mistakes. When things did go wrong CWP learned from the experience.

The Committee thought that the initiative to improve screening for Autism at Cheshire's custody suites was excellent. Members requested that an outcomes based review be presented to Scrutiny in the future to report on the progress of this.

RESOLVED:

- (a) That the report on Cheshire and Wirral Partnership Quality Account for 2016/17 be noted.
- (b) That CWP be invited back to the Committee to present an outcomes based review on the improved screening for Autism at Cheshire's custody suites.

34 QUALITY ACCOUNTS PRESENTATION: MID CHESHIRE HOSPITAL FOUNDATION TRUST

The Quality Account 2016/17, was presented by Kate Daly-Brown, Deputy Director of Nursing and Quality at Mid Cheshire Hospital.

Kate began by talking through some of the achievements and challenges of the previous year. Challenges included the performance in the Emergency Department, Finances and Staffing. Achievements included 8% reduction in falls, 60% reduction in pressure ulcers, the opening of a Surgical Ambulatory Care Unit and Medical Ambulatory Care Unit and sustainability and continuous 'Good' rating by the Care Quality Commission (CQC).

Priorities for 2017/18 were split into three categories:

- Experience;
- Effectiveness; and
- Safety.

Under these heading, priorities included supporting patients with dementia and their carers, a zero tolerance to never events (serious incidents that are entirely preventable), and a reduction in pressure ulcers, inpatient falls and mortality figures.

The Committee heard about feedback gathered from 1250 adult inpatients (discharged in July 2015), compiled following a national inpatient survey between August 2016-January 2017. 57% of inpatients responded and noted improvements in the communication style of doctors and nurses and patients having enough help from staff to eat their meals.

The Friends and Family Test (FFT) showed that out of 22,000 patients 93% were likely to recommend services or treatment to their friends and family.

MCHFT received 1,872 formal compliments and 263 formal complaints. Kate explained that patients and families were offered meetings rather than a formal written reply.

MCHFT dealt with 250,000 patients per year, 85,000 of them via the Emergency Department.

Part 2 of the Quality Account was mandated information and Part 3 looked at performance against quality indicators and targets, the choice of the Governors and the review of Quality performance.

The Committee heard examples of performance, notably a zero tolerance to 'never events' through ensuring all staff were briefed to raise awareness; the development of a local safety standard and improvements with checks relating to implants in theatres and standardisation of orthopaedic markings.

Kate then talked about safety reducing in-patient falls, mortality rates and pressure ulcers. Notable points were that local leadership had the biggest impact on reducing in-patient falls and that pressure ulcers had reduced due to ongoing work photographing and monitoring wounds.

The Committee commented that the patient choice seemed to impact the NHS more unnecessarily so. For example in phlebotomy cases where patients were attending the hospital site to give blood when this was a function that could be carried out at the GP surgery.

It was noted that delays to discharge were not specifically restricted to one ward or area of the hospital, it happened across all wards and this issue required registered nurses to support this.

There was no baseline data for pressure ulcers at this present time, however it was known that the 2015/16 figures were lower than 2016/17, this could be because more reporting had happened but following the piece of work around photographing and monitoring, there had been a big drop from Nov 2016- March 2017.

RESOLVED: That the 2016/17 Quality Account be noted.

35 QUALITY ACCOUNTS PRESENTATION: EAST CHESHIRE NHS TRUST

Carol Seddon, Deputy Director of Nursing and Quality, East Cheshire NHS Trust presented the Quality Account 2016/17.

Carol briefly covered the month-by-month successes and achievements over the past year including respiratory medicine being ranked number one in the country by the General Medical Council (GMC) and the launch of Cheshire Care Recordan IT system that allowed hospitals, GP's and community staff to have access to a single record of patient information.

The Committee then heard a number of achievements against priorities for the Trust with evidence of significant improvement. Achievements included a reduction in stage 2 pressure ulcers from 754 to 589, a reduction in unplanned admissions to the Intensive Care Unit (ICU) and the development of new pathways to support joint assessment in patients homes.

The Commissioning for Quality and Innovation (CQUIN) last year had national and local goals, this year the goals were local only. Most of the goals had been achieved however there were some areas still achieving these were:

- Sepsis Screening: Timely identification and treatment for sepsis in the Emergency Department (ED)
- Sepsis Timely identification and treatment for sepsis in inpatient setting
- National Antimicrobial Resistance (AMR): Empiric review of prescriptions
- Pressure Ulcer Prevention

The Committee heard about some of the initiatives ongoing at the Trust to improve patient care including the national React to Red campaign, a drive to offer information, resources and training to work to promote best practice and prevent pressure ulcers wherever possible.

Moving into 2017/18, priorities for the Trust included Harm Free Care, Integrated Care (soon to be called Joined Up Care), Improved Outcomes and Listening and

Responding. Implementation of WiFi across Macclesfield District General Hospital.

Following the presentation, the Committee asked for further explanation about the AMR review. Carol advised this related to a certain type of antibiotic that was being monitored.

There was a question asked about the cost of providing patients with iPads. Carol advised this was significant and where possible patients were able to take their own iPads into hospital, there were iPad covers that were in line with infection controls.

There was some work to be done integrating the Cheshire Care Record, but it was noted by Carol that interdisciplinary working had worked better than multidisciplinary working.

RESOLVED: That the 2016/17 Quality Account be noted.

36 WORK PROGRAMME

The Committee Reviewed its Work Programme.

RESOLVED-

- (a) That the item for Mental Health Reablement be brought to Committee on the 12 October 2017;
- (b) That the item for the South Cheshire Mental Health Gateway be brought to Committee on the 6 July 2017;
- (c) That the item on the Bed Based Review (now called the Home First Model) be brought to Committee on the 9 November 2017;
- (d) That the CWP draft redesign consultation proposal be brought to Committee on the 15 June 2017;
- (e) That Healthwatch be invited to attend the Committee meeting to provide an update in May 2018;
- (f) That the 'People Live Well and For Longer' report be added to the Work Programme to be brought to Committee on the 15 June 2017; and
- (g) That Private Enforcement be brought to Committee on the 6 July 2017.

37 FORWARD PLAN

The Committee reviewed the Forward Plan.

RESOLVED- That the Forward Plan be received and noted.

The meeting commenced at 10.00 am and concluded at 12.41 pm

Councillor J Saunders (Chairman)

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Cheshire East Council

Cabinet

Date of Meeting:	12 September 2017
Report of:	Mark Palethorpe, Acting Executive Director of People
Subject/Title:	People Live Well for Longer (Adult Social Care and Public Health Three Year) Commissioning Plan
Portfolio Holder:	Cllr Janet Clowes – Adult Social Care and Integration Cllr Liz Wardlow - Health

1. Report Summary.

- 1.1 The purpose of this report is to ask Cabinet to endorse the Adult Social Care and Public Health Three Year Commissioning Plan (2017/2020), entitled People Living Well for Longer.
- 1.2 Our vision is for responsive and modern care and support in Cheshire East promoting people's independence, choice and wellbeing. We will, through People *Live Well for Longer*, enable people to live well, prevent ill health and postpone the need for care and support. This puts people in control of their lives so they can pursue opportunities, including education and employment, and realise their full potential.
- 1.3 The three year commissioning plan enables Cheshire East residents as a population, to understand how important resources are in the delivery of preventative change over the next three years, working with a wide range of private and third sector providers, partners from across the health and social care economy, with a specific focus on the voluntary community and faith sector taking a significant role in the delivery of prevention.
- 1.4 Commissioning is the whole process through which Cheshire East Council "As a Commissioning Council" identify and deliver services. It involved ensuring that Cheshire East residents have services in place that are high quality, affordable and value for money.

2. Recommendations:

That Cabinet will endorse People Live Well for Longer (Adult Social Care and Public Health) Three Year Commissioning Plan.

3. Other Options Considered.

People Live Well for Longer is a Care Act 2014 requirement under market shaping therefore there is no other option.

4 Reasons for Recommendation.

- 4.1 The Directorate requires Cabinet's endorsement to undertake a formal consultation exercise regarding People Live Well for Longer. The Commissioning Plan has been developed to fulfil statutory duties, meet efficiency targets and provide a basis for planning, joint commissioning and delivering Adult Social Care and Public Health preventative services for the next three years.
- 4.2 The views of people who use services and health and social care stakeholders are necessary to inform People Live Well for Longer to determine how best we can collaborate together in the delivery of the plan.

5 Background / Chronology.

- 5.1 High-quality, personalised care and support can only be achieved where there is a vibrant, responsive market of service providers with the clear ability to respond to the changing needs of Cheshire East residents. The role of Cheshire East Council is critical in achieving this, through People Live Well or Longer.
- 5.2 The Care Act (2014) introduced new duties for local authorities to facilitate and shape a diverse, sustainable and quality market, emphasising that local authorities have a responsibility for promoting the wellbeing of the whole local population, not just those whose care and support they currently fund.
- 5.3 Post the Care Act (2014), the local authority has been required to move from being an influence on the care market solely through its own purchasing to one where, with providers and people who use services, it seeks to shape, facilitate and support the whole care and support market. This requires a step change in approach for local authorities from a position of 'control' to one of influencing, coproduction and collaboration.
- 5.4 The ambition therefore changed to one that is to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost-effective outcomes that promote the wellbeing of people who need care and support.

- 5.5 This new role underpinned by the Care Act calls for a different understanding of the care and support market therefore the Council is required to set out its adult social care and public health commissioning priorities over the next three years making clear the resources we have available against the changing Cheshire East population of needs.
- 5.6 People Live Well for Longer sets out Cheshire East Council's three years of commissioning priorities supporting the acceleration of adult social care prevention underpinned by clear commissioning principles which support and drive market shaping. The purpose of market shaping is to stimulate a diverse range of appropriate services, both in terms of the types of services and the types of provider organisation, and ensure the market as a whole remains vibrant and sustainable.
- 5.7 The new approach is based on collaborative commissioning, being an approach that puts people and outcomes at the centre of commissioning and creates stronger relationships between all key stakeholders. It puts greater emphasis on the social costs and benefits of different ways to run services.

6 Wards Affected and Local Ward Members

6.1 People Live Well for Longer applies across the whole of Cheshire East Wards.

7 Implications of Recommendation

7.1 **Policy Implications**

This report for Cabinet outlines the national requirements for the implementation of the Care Act 2014 which puts market development on a statutory footing, supports the delivery of the outcomes set out in the Corporate Plan and empowers all adults to Live Well for Longer.

In this challenging financial context the successful implementation of People Live Well for Longer is a key component to supporting the financial position of the Council in addition to the undoubted benefits that will accrue from the development of a diverse, effective and high quality local adult care market which is geared more towards supporting people to manage their own care through personalisation, early help and prevention of needs escalating, therefore there are no policy implications.

People Live Well for Longer enables the council to respond to the changing needs of people and ensures we can meet the requirements underpinned by the corporate plan outcomes as detailed below:

Outcome 1 – Our local communities are strong and supportive.

 Individuals and families are self – reliant, taking personal responsibility for their quality of life.

- ✓ Communities are cohesive, with a strong sense of neighbourliness.
- ✓ There is genuine civic pride and mutual respect.
- ✓ Joint commissioning have a significant role in working with communities and a wide range of partners in ensuring people do feel part of the community where they live.

Outcome 2 – Cheshire East has a strong and resilient economy.

- Care and health work will be sustainably rewarded with recognition, investment, business support and guidance to ensure that good quality care really does pay in Cheshire East.
- ✓ The one in five people who work in care and health feel valued, acting as ambassadors encouraging others to choose care careers.
- \checkmark There is a stable and innovative care economy.
- ✓ Care providers are rewarded for delivering person centric outcomes.
- ✓ Joint commissioning have a significant role in ensuring that local plans support a robust and strong care career path that builds the best foundations in the retention of care staff.

Outcome 3 – People have the life skills and education they need in order to thrive.

- ✓ Whilst the focus on the outcome is in supporting children and younger people, we see great importance in adults throughout their life having the opportunity to learn and to continue to develop their life skills through access to supported employment opportunities.
- ✓ Joint Commissioning have a role to play in ensuring people are supported into employment.

Outcome 5 – People Live Well for Longer.

- Local people have healthily lifestyles and access to good cultural, leisure and recreational facilities. Care services focus on prevention, early interventions and physical health and mental wellbeing.
- ✓ Joint commissioning have a significant role to play in ensuring the market can respond to peoples changing needs and expectations.

National Policy - underpinning the development of prevention and community supporting people accessing health and care services including carers are defined under the Health and Social Care Act 2012, The Mental Health Act, The Care Act 2014 and Transforming the NHS.

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Partnership Policy is being developed with the South Cheshire Clinical Commissioning Group through the Connecting Care Programme and Eastern Cheshire Clinical Commissioning Group through the Caring Together Programme with a clear focus on prevention and community integration.

7.2 Legal Implications

There are no legal implications given this is a Care Act requirement.

7.3 Financial Implications

The scale of the financial challenges that the Council faces means that we need to reduce the transactional costs for the Council and the sector and bring even greater focus on efficiency, value for money, clear and measurable outcomes and partnership working.

People Live Well for Longer sets out the financial position regarding Adult Social Care funds now and looking forward against the Council's increased demand with a key focus on working in a Pan Cheshire way drawing both resources and skills together in the design of services looking forward.

7.4 Equality Implications

In making its decision, officers must have regard the public sector equality duty (section 149 Equality Act 2010), which places a duty on the Council, in the exercise of its functions, to have regard to the need to eliminate discrimination, harassment, victimisation or other prohibited conduct; advance equality of opportunity between persons who share a "protected characteristic" and those who do not, and foster good relations between persons who share a "protected characteristic" and those who do not.

There are no specific equality implications and due regard has been taken to our Equality Duty.

The scope of People Live Well for Longer covers how we will ensure that the views of groups with protected characteristics are afforded due regard in influencing strategy, policy and service delivery.

7.5 Rural Community Implications

People Live Well for Longer and its recommendations of this report have a significant positive impact on rural communities and are intended to raise standards of community support across partners and when working with a wide range of provider to address any gaps in market.

7.6 Human Resources Implications

There are no specific HR implications.

7.6 Public Health Implications

Public Health were consulted in the development of People Live Well for Longer and will influence commissioning plans by the best use of joint commissioning resources and in continuing to utilise the joint strategic needs assessment.

7.7 Other Implications

An underpinning purpose of the commissioning plan will be to review current commissioning services and some council internal services.

It recognises that while the council and our partners need to adjust to a world where public funding is reducing dramatically we need to develop a stronger working relationship with the third sector and wider community assets across Cheshire East to meet the significant challenges that we face.

8 Risk Management

8.1 A comprehensive adult social care and commissioning with care providers Risk Assessment has been undertaken and will continue to be reviewed.

8.2 Consultation Next steps

The document will go through the following consultation processes:

Corporate Leadership Team (CLT)	10 th May 2017
Informal Cabinet	16 th May 2017
Consultation	19 th & 21 st June 2017
Health, Social Care and Communities Overview and Scrutiny Committee	15 th June 2017
Health and Wellbeing Board	25 th July 2017
Cabinet	12 th September 2017

9 Access to Information/Bibliography

Appendix 1 – People Live Well for Longer – Adult Social Care and Public Health Three Year Commissioning Plan.

10 Contact Information

Contact details for this report are as follows:-

Name:	Nichola Glover-Edge
Designation:	Director for Commissioning, People Directorate
Tel. No.:	01270 371404
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CHESHIRE EAST COUNCIL

REPORT TO: Health and Adult Social Care Overview and Scrutiny Committee

Date of Meeting:	15 June 2017
Report of:	Director of Legal Services
Subject/Title:	Work Programme update

1.0 Report Summary

1.1 To review items in the 2016/17 Work Programme, to consider the efficacy of existing items listed in the schedule attached, together with any other items suggested by Committee Members.

2.0 Recommendations

2.1 That the work programme be reviewed and updated following actions from the meeting and other amendments.

3.0 Reasons for Recommendations

3.1 It is good practice to agree and review the Work Programme to enable effective management of the Committee's business.

4.0 Wards Affected

4.1 All

5.0 Local Ward Members

5.1 Not applicable.

6.0 Background and Options

- 6.1 In reviewing the work programme, Members must pay close attention to the Corporate Priorities and Forward Plan.
- 6.2 Following this meeting the document will be updated so that all the appropriate targets will be included within the schedule.
- 6.3 In reviewing the work programme, Members must have regard to the general criteria which should be applied to all potential items, including Task and Finish reviews, when considering whether any Scrutiny activity is appropriate. Matters should be assessed against the following criteria:
 - Does the issue fall within a corporate priority

- Is the issue of key interest to the public
- Does the matter relate to a poor or declining performing service for which there is no obvious explanation
- Is there a pattern of budgetary overspends
- Is it a matter raised by external audit management letters and or audit reports?
- Is there a high level of dissatisfaction with the service
- 6.4 If during the assessment process any of the following emerge, then the topic should be rejected:
 - The topic is already being addressed elsewhere
 - The matter is subjudice
 - Scrutiny cannot add value or is unlikely to be able to conclude an investigation within the specified timescale

7.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

Name:Helen DaviesDesignation:Scrutiny OfficerTel No:01270 686468Email:helen.davies@cheshireeast.gov.uk

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Health and Adult Social Care

Future Meetings

| Formal Meeting |
|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| Date: 15 June 2017 | Date: 6 July 2017 | Date: 14 Sept 2017 | Date: 12 Oct 2017 | Date: 9 Nov 2017 | Date: 7 Dec 2017 | Date: 18 January |
| Time: 10:00am | 2018 |
| Venue: Committee | Time: 10:00am |
| Suites, Westfields | Venue: Committee |
| | | | | | | Suites, Westfields |

Essential items

<u>ltem</u>	Description/purpose of report/comments	Outcome	Lead Officer/ organisation/ Portfolio Holder	Suggested by	Current position	Key Dates/Deadlines	Page
Delayed Discharges from Hospital	To undertake a spotlight review of the effect of delayed discharges in Cheshire East.	People live well and for longer	Director of Adult Social Care	Chairman's 1:1	Report pending	15 June 2017	19
Mental Health Reablement	To establish the future delivery of mental health reablement services	People live well and for longer	Council, SCCCG and ECCCG	Committee	Update from Commissioners + Linda Couchman On hold until the Better Care Fund paper is completed.	12 October 2017	
South Cheshire Mental Health Gateway	To provide Committee's view on proposals relating to a new Mental Health Service	People live well and for longer	South Cheshire CCG	South Cheshire CCG	Presentation considered on 6 July. South CCG agreed to come back to Committee	6 July 2017	

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					March/April 2017*		
Home First Model	No definitive report yet, the Terms	People live	Linda	Portfolio	Mark Palethorpe	9 Nov 2017	
(prev, Bed Based	of Reference underwent significant	well and for	Couchman	Holder	refresh the Terms		
Review)	change as a result of DTOC work.	longer			of Reference		
Cheshire and Wirral	Draft Redesign Consultation	People live	CWP/ECCCG/	CWP Working	Awaiting update on	14 September	
Partnership NHS	Proposal- Mental Health	well and for	SC&VRCCG	Group	original proposal	2017	
Trust		longer		-	and business case		
					by		
					CWP/ECCCG/SC		
					&VRCCG		
East Cheshire NHS	SDV- Potential Relocation of	People live	East Cheshire	East Cheshire	Update to	15 June 2017	
Trust	Outpatient Clinics from Handforth	well and for	NHS Trust	NHS Trust	Committee		
		longer			following Purdah		
South Cheshire &	Connecting Care Recovery Plan	People live	Tracy Parker-	SC&VRCCG	Tracy Parker-	14 September	σ
Vale Royal CCG	(Update)	well and for	Priest		Priest to update	2017	ag
		longer			the Committee		_ ge
Cheshire & Wirral	Review of Autism screening at	People live	CWP	Committee	Awaiting date for	May 2018	
Partnership	Cheshire's custody suites.	well and for			Committee-		20
		longer			subject came via		
					Quality Account.		

Monitoring Items

Item	Description/purpose of report/comments	Outcome	Lead Officer/ organisation/ Portfolio Holder	Suggested by	Current position	Key Dates/Deadlines
Local Safeguarding Adults Board	(Peer Review expected in May 2017, potential to become one board with Cheshire West and Chester Council.) The Committee wishes to receive a presentation	People live well and for longer	Business Manager LSAB	Committee	Robert Templeton invited to present Annual report	12 October 2017

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	from the Board at an informal meeting as part of it's scrutiny role to monitor the adult safeguarding					
ESAR	To monitor the performance of the Charitable Trust set up to run the Council's leisure facilities	People live well and for longer	Corporate Commissionin g Manager: Leisure	Committee	Most recent item received in sept 2015	12 th October 2017
North West Ambulance Services (NWAS)	Monitor progress made in respect of the recommendations made by this committee in the 2016 spotlight review.	People live well and for longer		Committee		15 th June 2017
Healthwatch	A representative of Healthwatch be invited to attend to the Committee with an outcomes led 12 months progress review	People live well and for longer		Committee	Last update May 2017	May 2018
People Live Well for Longer Report	To review the report written by the Interim Director of Commissioning, Adult Social Care Commissioning.	People live well and for longer	Lorraine Goude	Adult Social Care	Report due to go to Cabinet in July.	15 June 2017

Possible Future/ desirable items

• Mental Health Services

The Committee to have a tour of Limewalk House (CWP). Forward Plan- CE 16/17-21 Commissioning a Community, Voluntary Faith Infrastructure Service.

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Forward Plan

Key Decision and Private Non-Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-41 Procurement of Housing Repairs and Adaptations	To procure domestic repairs and adaptations for the benefit of supporting vulnerable residents to live independently in their own homes, and authorise officers to take all necessary actions to implement the proposal.	Cabinet	13 Jun 2017		Karen Whitehead	N/A

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-46 Procurement of Translation and Interpretation Services	To grant delegated authority to the Chief Operating Officer in consultation with the Portfolio Holder for Corporate Policy and Legal Services to award a contract to the successful tenderers for the procurement of translation and interpretation services.	Cabinet	13 Jun 2017		Peter Bates, Chief Operating Officer	N/A
CE 16/17-51 Ansa Joint Venture Opportunity	To approve Ansa entering into a joint venture agreement for waste collection services with High Peak and Staffordshire Moorlands District Councils.	Cabinet	13 Jun 2017		Kevin Melling, Head of Environmental Protection and Enhancement	N/A

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 17/18-2 Plus Dane - Transfer of Engagement	Plus Dane is consulting Cheshire East Council on its proposal to undertake a transfer of engagement which will merge Plus Dane Cheshire into Plus Dane Merseyside. The report will seek authority for officers to take all necessary actions to assist with the implementation of the proposal and set out Cheshire East Council's requirements for the Board.	Cabinet Member for Highways and Infrastructure	10 Jul 2017		Karen Carsberg	N/A
CE 16/17-11 Crewe HS2 Masterplan	To approve the HS2 masterplan for Crewe, and to authorise the Executive Director Place to enter into a public consultation on the masterplan in 2017.	Cabinet	11 Jul 2017		Andrew Ross	No

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-44 Conditional Sale of Land at Longridge, Knutsford	To authorise officers to advertise the intention to dispose of the land identified as open space in accordance with the Local Government Act, the consultations to be considered by the Portfolio Holder for Regeneration, and approve the freehold disposal of the Land at Longridge, Knutsford.	Cabinet	11 Jul 2017		Lee Beckett	Exempt - para 5
CE 16/17-45 Self-Build Register	To consider whether to charge a fee for entry onto the Council's Self-Build Register and also whether to set eligibility criteria.	Cabinet	11 Jul 2017		Karen Carsberg	N/A
CE 16/17-48 Asylum Seeker Dispersal	The report will set out the steps towards delivering asylum seeker dispersal within Cheshire East. The report will seek authority for officers to consider further with the Home Office asylum seeker delivery in the Borough over a three year period.	Cabinet	11 Jul 2017		Lucia Scally, Manager of strategic Commissioning	N/A

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-49 Housing Repairs and Adaptations for Vulnerable People Policy	To approve the Housing Repairs and Adaptations for Vulnerable People policy, and authorise officers to take all necessary actions to implement the proposal.	Cabinet	11 Jul 2017		Karen Whitehead	N/A
CE 16/17-50 Housing Enforcement Policy	To approve amendments to the Housing Enforcement policy and authorise officers to take all necessary steps to implement the proposal.	Cabinet	11 Jul 2017		Karen Whitehead	N/A
CE 17/18-3 Best 4 Business Oracle Replacement Programme	To enter into a contract with the preferred bidder to replace the current Oracle HR and finance system.	Cabinet	11 Jul 2017		Dominic Oakeshott	N/A

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
HS 17/18-1 Award of Contract to Preferred Bidder for the Organic Waste Treatment Solution	At is meeting on 9 th May 2017, the Cabinet authorised the Corporate Manager for Waste and Environment Services as the Senior Responsible Officer for the Organic Waste Treatment Procurement in consultation with the Chief Operating Officer and the Director of Legal Services to clarify, specify and optimise the Preferred Bidder's final tender to enable the Council to enter into a legally binding contract with the Preferred Bidder. Upon completion of the above clarification, specification and optimisation stage, Cabinet delegated to the Portfolio Holder for Regeneration the final decision to award the contract to the preferred bidder.	Cabinet Member for Regeneration	July 2017		Ralph Kemp	N/A

Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-34 Royal Arcade Redevelopment, Crewe - Reward of Contract to Development Partner	To approve that the Council enter into a development agreement with a named development partner selected following a recent procurement process, and to agree to fund those elements of the scheme as previously identified.	Cabinet	12 Sep 2017		Jez Goodman	N/A
CE 16/17-52 People Live Well for Longer (Adult Social Care and Public Health) Three Year Commissioning Plan	To endorse the People Live Well for Longer (Adult Social Care and Public Health) Three Year Commissioning Plan.	Cabinet	12 Sep 2017		Mark Palethorpe	N/A
CE 16/17-47 Medium Term Financial Strategy 2018- 21	To approve the Medium Term Financial Strategy for 2018-21, incorporating the Council's priorities, budget, policy proposals and capital programme.	Council	22 Feb 2018		Alex Thompson	N/A

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