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Scrutiny Committee Agenda

Date: Thursday, 16th March, 2023

Time: 10.30 am

Venue: Committee Suites 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 top of each report.

It should be noted that Part 1 items of Cheshire East Council decision making meetings are audio recorded and the recordings will be uploaded to the Council's website

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. Apologies for Absence

To note any apologies for absence from Members.

2. 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.

3. **Minutes of Previous Meeting** (Pages 3 - 8)

To approve as a correct record the minutes of the previous meeting held on 8 December 2022.

4. Public Speaking/Open Session

There is no facility to allow questions by members of the public at meetings of the Scrutiny Committee. However, a period of 10 minutes will be provided at the beginning of such meetings to allow members of the public to make a statement on any matter that falls within the remit of the committee, subject to individual speakers being restricted to 3 minutes.

For requests for further information

Contact: Katie Small **Tel**: 01270 686465

E-Mail: katie.small@cheshireeast.gov.uk

5. Flood Risk Management Functions by Flood Risk Management Agencies (Pages 9 - 46)

To receive presentations by flood risk management agencies (Cheshire East Highways, Cheshire Fire Authority, United Utilities, Environment Agency).

6. Violence & Intimidation against Women & Girls (presentation to follow)

To receive a presentation on Cheshire East's response to violence and intimidation against Women and Girls.

7. **Pharmacy Provision in Rural Communities** (Pages 47 - 60)

To receive a report from Public Health on the Pharmacy Provision in Rural Communities.

8. Work Programme (Pages 61 - 64)

To consider the Work Programme and determine any required amendments.

Membership: Councillors L Anderson, R Bailey, L Crane, A Gregory, B Murphy, D Murphy (Vice-Chair), M Simon, L Smetham, R Vernon and L Wardlaw (Chair)

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Scrutiny Committee** held on Thursday, 8 December, 2022 in the Committee Suite 1, 2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor L Wardlaw (Chair)
Councillor D Murphy (Vice-Chair)

Councillors L Anderson, S Carter, L Crane, B Murphy, M Simon, L Smetham, R Vernon and P Redstone (substituting).

OFFICERS IN ATTENDANCE

Jill Broomhall, Director of Adult Social Care
Sandra Murphy, Head of Adult Safeguarding
Richard Christopherson, Locality Manager – Community Safety
Nichola Thompson, Director of Commissioning
Brian Reed, Statutory Scrutiny Officer
Katie Small, Democratic Services Manager

ALSO PRESENT

Clare Little, Home Office Regional Advisor for NW/NE England Fiona Walton, Deputy Director of Operations, East Cheshire NHS Trust Adele Gatley, General Manager, East Cheshire NHS Trust Mark Wilkinson, Cheshire East Place Director - NHS Cheshire and Merseyside

53 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor R Bailey (Councillor P Redstone substituting), Councillor D Marren and Councillor A Gregory.

54 DECLARATIONS OF INTEREST

In the interest of openness, Councillor L Wardlaw declared that she occasionally worked for the Cheshire and Wirral Partnership NHS Trust.

55 PUBLIC SPEAKING/OPEN SESSION

There were no members of the public registered to speak.

56 MINUTES OF PREVIOUS MEETING

RESOLVED:

That the minutes of the meeting held on 1 September 2022 be approved and signed by the Chair.

57 PREVENT & CHANNEL

Clare Little, Home Office Regional Advisor for NW/NE England attended the Committee meeting and provided a joint presentation with officers on the national Prevent strategy. Members received an overview of how this national agenda works locally across Cheshire East and how Elected Members can raise awareness within their communities. Committee Members noted that:

The current national terrorism threat in the United Kingdom was 'substantial' which meant that an attack was highly likely. There had been over a dozen terrorist attacks in the UK since 2015 which had led to over 40 fatalities. Since 2017, the Home Office had been able to foil over 30 late-stage terrorist plots. It was highlighted that the financial impact of the attacks on the economy had been significant, with attacks in 2017 costing £137m in direct costs and nearly £2bn in indirect costs.

Sandra Murphy, Head of Adult Safeguarding and Chair of the Prevent Channel Panel in Cheshire East provided the Committee with an overview of the Channel Panel process and also the Dovetail Programme which covered nine Local Authorities in the Northwest.

Richard Christopherson, Locality Manager (Community Safety), provided some key headlines from the Annual Channel Panel report. Committee Members noted the following:

- The main referral source came from the education sector (53%), and the age profile of those referrals ranged between 12-43.
- 86% of the referrals were male.
- A number of the referrals of young people often had autism and/or mental health conditions.
- There were an increasing number of referrals from within the Congleton area.

Committee Members were updated on the future of the Dovetail Programme. It was confirmed that the pilot project may come to an end – a formal decision had not yet been made. A decision was expected to be taken by Ministers early in the New Year.

Committee Members were invited to ask questions. Key discussions were noted as follows:

• Members queried how success would be measured, how much Cheshire East spent on Prevent, and where the funding came from.

Officers confirmed that the work of Prevent was part of 'business as usual' duties under safeguarding procedures. It was confirmed that Cheshire East received £160k annually from the Police and Crime Commissioner Fund to support all priorities through SCEP. Funding for Intervention Providers came directly from the Home Office. There was no other dedicated funding from national Government to Cheshire East for the Prevent programme. It was highlighted that success could be measured through the action and self-assessment plans which were overseen by the Home Office and rated as 'Good' overall.

• Members queried the use of percentage figures, and requested the total number of individuals being referred, rather than percentages.

Officers agreed to provide a written response to all Committee Members.

 Members queried the overall number of individuals that had accessed support in Cheshire East.

Officers agreed to provide a written response to all Committee Members.

Jill Broomhall, Director of Adult Social Care, provided Committee Members with an overview of the roles and responsibilities of Elected Members in supporting the Prevent programme. Section 26 of the Counterterrorism and Security Act 2015 placed a duty on Local Authorities to have due regard to the need to prevent people from being drawn into terrorism as part of their day-to-day work.

RESOLVED:

- a) An update on the Prevent Programme, including the future of the Dovetail Programme be added to the Committee Work Programme.
- b) The Prevent Annual Report and Self-Assessment to be added to the Committee Work Programme.
- c) The Prevent and Channel presentation and update be received and noted.

58 WAITING LIST UPDATE FROM EAST CHESHIRE NHS TRUST

Fiona Walton, Deputy Director of Operations East Cheshire Trust and Adele Gatley, General Manager for Planned Care attended Committee (virtually) and provided a presentation on the Waiting List at East Cheshire NHS Trust.

The Committee noted that:

Elective recovery targets:

- No patients waiting more than 104 weeks for elective treatment this target was achieved in June 2021.
- Next target was to ensure that no patients were waiting more than 78 weeks by March 2023.

There were three key risk areas:

- Gastroenterology currently at 28 potential breaches reduced from 174 from 1 August.
- General surgery currently at 13 breaches reduced from 74 from August.
- Orthopaedics currently at 37 breaches reduced from 309.

Productivity was being continually reviewed to maintain health services. Members received an overview of the GIRFT national programme (getting it right first time) and the Patient Initiated Follow Up pathway (PIFU). Recent data highlighted that:

- East Cheshire Trust had the third highest rate of theatre utilisation within the Northwest region at 83%.
- A review by the Cheshire and Merseyside Elective Productivity team also showed that the Trust had the third highest undertaking day case rate (86%) in the ICS which indicated a highly productive surgical service.

- Cheshire and Merseyside data showed that the Trust had the third highest rate of patients referred to PIFU.
- Outpatient data demonstrated that at 5%, the Trust had the second lowest 'did not attend' rate.

RESOLVED:

- a) That the presentation from East Cheshire Trust be received and noted.
- b) Presentation slides to be circulated to all Committee Members.

59 INTEGRATED CARE SYSTEMS AND WORKING WITH SCRUTINY

Mark Wilkinson, Cheshire East Place Director, attended the Committee meeting and provided a presentation on Integrated Care Systems (ICS) and Working with Scrutiny. Committee Members noted the following:

An overview was provided on the NHS structures in England since 1 July 2022. Historically, a single Cheshire CCG served the Cheshire area. CCGs were abolished and replaced with Integrated Care Boards (ICBs) – statutory organisations commissioned to meet the health needs of Cheshire and Merseyside residents.

Another key element of the ICS was the Integrated Care Partnership (ICP) which brought together key organisations (Local Authorities, NHS, Healthwatch etc) to look at effective partnership working.

Members received an update on plans to return maternity services to Macclesfield District General Hospital. Services at Macclesfield were suspended at the start of the COVID pandemic. It was highlighted that whilst there had been a clear focus to return services, there were four factors that needed to be achieved before this could be done:

- The Trust needed a partner to work with and this had been identified in the form of Stockport NHS Foundation Trust.
- Funding was needed higher staffing standards and levels were required as a result of several maternity scandals across the NHS. There was a reasonable expectation of additional investment.
- Additional staffing would be needed additional recruitment of midwives, consultants, and anaesthetists would be required in order to safely bring back maternity services. There were concerns around the ability to recruit sufficient anaesthetists as there was a general shortage across the NHS.
- Beds on the Macclesfield site would need to be made available as maternity beds had been reused for those attending A&E. Work was underway to resolve this.

Committee Members were invited to ask questions.

• Members queried why the staff from Macclesfield Maternity Unit couldn't return to Macclesfield hospital.

It was confirmed that staff would return to Macclesfield Hospital, when the services returned. Additional staff were needed to meet higher NHS wide standards on staffing maternity units. No decision had yet been made as to

whether it would be possible for maternity services to return – the current suspension remained in place and would expire in April 2023. A decision would need to be taken before this date to determine if the suspension needed to be extended further or another option identified The NHS were fully committed to returning maternity services to Macclesfield however there was key criteria that needed to be met before services could safely return. It was noted that those members of staff who worked within the Maternity Unit pre-COVID had been temporarily relocated to other hospitals.

Cllr M Simon left the meeting at 12.33pm.

 Members queried at what point the issue of maternity services at Macclesfield hospital became a significant variation and require full consultation and formal discussion at Scrutiny Committee.

It was confirmed that the next stage of decision making on maternity services would be early in the New Year. It was suggested that should the NHS make a decision to not return maternity services to Macclesfield Hospital, there would need to be a formal briefing to Scrutiny, but that stage had not yet been reached.

RESOLVED:

- a) An update on Maternity Services at Macclesfield Hospital to be added to the Committee Work Programme.
- b) Underlying delivery of the new ICS from a local point of view / update on success of Winter Plan to be added to the Work Programme.
- c) That the Integrated Care Systems and Working with Scrutiny presentation be received and noted.

60 WORK PROGRAMME

Katie Small, Democratic Services Manager, updated the Committee on the Work Programme. The Committee was advised of the following update to the Work Programme since the last meeting.

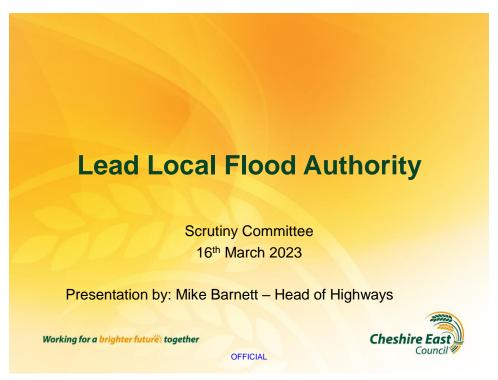
• Flood Risk Management – there would be a representative from the Fire Authority and United Utilities attending.

RESOLVED:

- a) That the Committee Work Programme be received and noted.
- b) Update on the return of maternity services to Macclesfield Hospital to be added to the Committee Work Programme.
- c) Update on the delivery of the ICS and the impact on residents to be added to the Committee Work Programme.
- d) Update on the Prevent Programme (including the Dovetail Project) to be added to the Committee Work Programme.

The meeting commenced at 10.30 am and concluded at 12.58 pm

Councillor L Wardlaw (Chair)



1

Risk Management Authorities

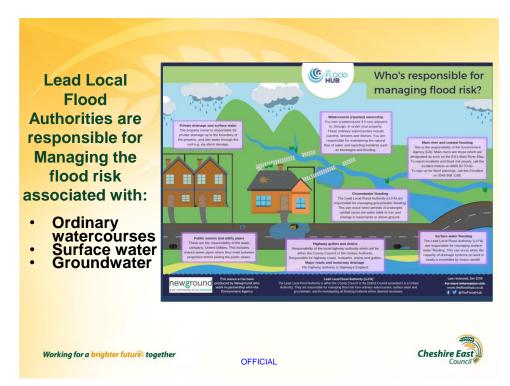
The Canal & River Trust are not a Risk Management Authority under the Flood and Water Management Act 2010

Flood Source	Environment Agency	LLFA	United Utilities	Cheshire East Highways	Highways England
Main River	х				
Ordinary Watercourse		x			
Surface water from other sources		х			
Groundwater flooding		х			
Sewer flooding			х		
Water supply infrastructure			х		
Surface water from highway				х	х

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Lead Local Flood Authorities

Stats

- Produce a Local Flood Risk Management Strategy published 2017, revisit 2023
- Investigate internal property / business flooding 56 new and ongoing investigations, with 2 properties confirmed to have internal property level funding
- Report on significant flood events (S19) 2
- Consent activities on ordinary watercourses 43
- Provide planning advice as a statutory consultee (flooding, drainage and SUDS) 599
- Maintain an Asset Register Ongoing
- Enforce the Land Drainage Act 1991 where applicable No formal/legal, various ongoing investigations. 8x Formal letters issued re. LDA 1991

Other work

- Contribution to SUDs guide internal consultation due in March before final eternal consultation with key stakeholder
- Adoption of CEC SUDs guide in 2013 ahead of implementation of Schedule 3 of the Flood and Water Management Act in 2014
- Macclesfield FRMP ongoing project led by EA

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Lead Local Flood Authorities

Key Schemes to Mitigate Flood Risk:

- Giantswood Lane, Congleton (July 2022)
- Castle Mill Lane, Ashley (October 2022)
- Waterloo Road, Poynton (June 2022)
- London Road South, Poynton (August 2022)
- Bowes Gate Road, Bunbury Road and Bunbury Common, Bunbury (November 2022)
- Pool View, Winterley (December 2022)
- Moss Lane, Leighton (January 2023)

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Lead Local Flood Authorities

How does LLFA work with other agencies

- Collaboration
- Investigations
- Consultations
- Sharing of Information
- Partnership Working
- Flood exercises
- Real life events

How successful is this

- Continual Improvement
- Building Relationships
- Look for opportunities to demonstrate joined up working and educate about flood risk

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Lead Local Flood Authorities

Continual Improvements

- Oversight and direction from CEC Client team
- Clarity about roles and responsibilities
- Creating capacity and resource
- Build the team and resilience
- Develop communications on the service externally
- Re-establish and build on relationships with external partners
- Changes to funding splits through business planning process
- LLFA specific reports through Highways and Transport Committee

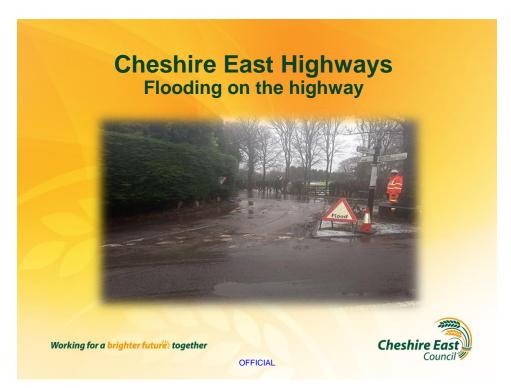


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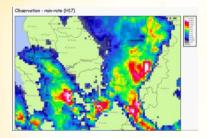


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Highways role during flooding

- Adverse Weather Plan
- Monitor weather forecasts Strategic Partners Met Office & Environment Agency
- Adverse Weather desk management of flooding events
 - operational response of the highway service dealing with the immediate threat
 - Introduction of staff rosters to cover 24/7 response
 - Working with specialist supply chain partner to deal with effects of flooding
 - Effective communication
 - Working alongside CEMART to ensure continuity





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3

Multi Agency Working Approach

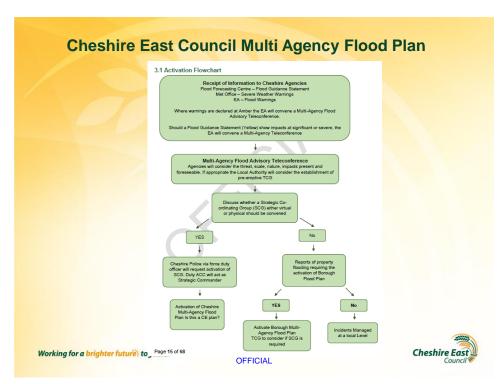
- Work closely to develop emergency response arrangements for any incidents that may arise with:
 - Cheshire East Council Emergency Planning Team
 - Emergency services
 Many other agencies
- Response to flooding emergencies requires quick-thinking and cooperation between multiple departments
- Provide a 24/7, 365 day-a-year service, where keeping residents safe is our number one priority
- During flooding events we have an emergency work incident plan which we follow
- We assist with the recovery operation, working with our partners and following our emergency planning procedures



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5

Post - Severe Weather Event

Formal Debrief

Incident response and recovery – Storms 'Dudley', 'Eunice' and 'Franklin' – Major incident standby – East Cheshire (covering period 15-21 February 2022)

- To review the Council's response to, and recovery from, the incident
- To identify any lessons learnt in order to assist in the planning of and response to similar incidents in the future
- To assist personal, team, service and/or organisational understanding and learning
- To be consistent with our professional responsibilities
- To identify recommendations for consideration by the Council
- An Incident Debrief Report will be circulated for review by the Corporate Leadership Team

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Continual Improvements

- Collaboration / Mediation
- Technology Kaarbontech
- Intelligent Data
- Targeted Cleansing Programmes
- Service Plan Allocation of budgets
- Communication

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16th March 2023

Cheshire Fire & Rescue Service (CFRS)
Response to Flood Related Incidents
ACO Neil Griffiths & GM Matt Barlow



1

Introduction

Aim

- Provide an overview of CFRS flood response capability
- Explain how CFRS responds to flood related incidents
- Outline how CFRS works with partner agencies in its response through the Cheshire Resilience Forum (CRF)





CFRS Capability

- All operational staff trained in water and flood awareness.
- All fire engines carry a water safety pack*.
- Swift Water Rescue (SWR) Fire Stations, based at:
- Chester
- Powey Lane
- Ellesmere Port
- Widnes
- Warrington
- Penketh
- Lymm
- Rescue boats based at Powey Lane and Warrington.





CFRS Specialist Capability

 Swift Water Rescue (SRW) and Water Incident Units (WIU)

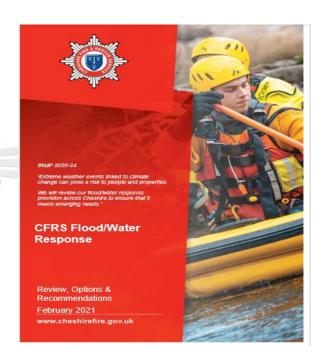


High Volume Pump (HVP)









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Met Office
Hadley Centre
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Review of Risk and Climate Change Predictions

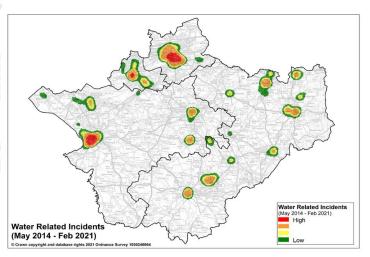
United Kingdom Climate Predictions 2018 (UKCP 18 2.2) are based on the latest developments in climate science and have been produced by the Meteorological Office. This work has produced local 2.2km charts which provide the most physically realistic projections of weather extremes in local areas for the coming decades. The latest report shows several indicators which are consistent with the expected effects of a warming climate, alongside evidence of considerable natural variability on annual to multi-decadal timescales.

Funded by BEIS and Defra

The chart above shows the expected changes in mean level of rainfall during between December and February between June and August up to 2100.



Density map of Water/Flood incidents by location



9





CFRS response to widescale Flooding Events

- A dedicated External Planning Manager
- · Works closely with CRF Partners
- · Attend incidents based on requests through NWFC
- Proactive with forecasts of extreme weather/heavy rainfall
- Cheshire LRF Flood Advisory Service Teleconference
- · Information is shared internally to ensure all staff are aware
- · CFRS publish weather warning/alerts on our Social Media



Multiagency response to widescale Flooding Events

- Dictated by the intelligence and anticipated impacts
- Major Incident or Major Incident Stand-by
- · Mult-agency teleconference
- Joint Tactical Co-ordination Centre(JTCC) at Police HQ
- Cascade message sent to all Category 1 and 2 responders
- · Regular meetings to implement CRF Flood Response Plans
- · Contribute to the Recovery phase of the incident



Summary

- Enhanced the capability of firefighters to respond to flood events
- CFRS works closely with Cheshire Resilience Forum partners
- Not a statutory requirement BUT, we do take responsibility
- We train regularly with other Category 1 and 2 responders
- The development of the Cheshire Safer Water Partnership

Notifications

• Alerts (cheshirefire.gov.uk)





Thank You for listening

Any Questions?





Introductions

Sam Sloan	Network Business Manager	
Emma Birch	Area Engagement Lead	

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Flood Risk Management Responsibilities

Flood & Water Management Act 2010: We all have a duty to co-operate

Lead Local Flood Authority

Public body

Highway Authorities Water and sewerage companies

Riparian Owners











Developing, maintaining

and applying a strategy for local flood risk management

Managing the risk of flooding from surface water, groundwater and ordinary watercourses **Responsible** for taking a strategic overview of all sources of flooding

Managing the risk of flooding from main rivers and the sea

Regulating reservoir safety

lead responsibility for providing and managing highway drainage and roadside ditches

co-operate with the other RMA's to ensure their flood management activities are well coordinated

Managing the risk of flooding from wastewater and water infrastructure

Work with developers, landowners and LLFAs to understand and manage risks Maintain the watercourse within the boundary of their land so it freely flows and has no obstructions

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United Utilities: Wastewater Services



UU is essentially split into two operating areas; water and wastewater



From sewers to treatment works, we operate, maintain and manage an extensive range of assets



This includes over 79,000km of sewers, over 2,700 pumping stations and 567 WwTW



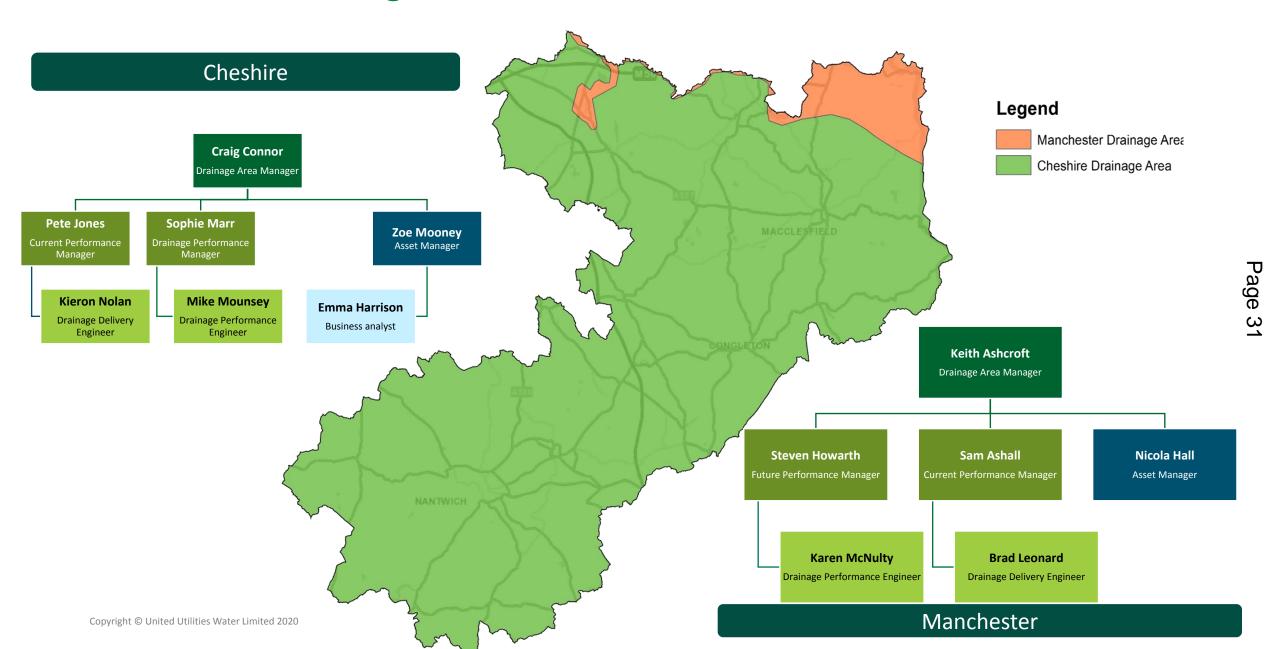
In response, we have 68 Resolution Units and 13 van packs ready to be deployed across the regional wastewater network operational area, 7 days a week, 365 days a year. This helps us respond to operational issues in a timely manner and support our partners



Within Cheshire East's area, UU cleanses over 77,000m of sewer every year.

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How we work - Drainage areas



Wastewater Sewer Network

Foul Sewers

Foul sewers carry used wastewater to a sewage works for treatment



Surface Water Sewers

Surface water sewers carry uncontaminated rainwater directly to a local river or stream.



Combined Sewers

csos act as a pressure relief valve when there is too much rainfall, allowing rain water, mixed with sewage, to rise inside the sewer and eventually enter a separate pipe which flows into a river or the sea. Sewers operate this way to help prevent the flooding of streets, homes and businesses



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How we manage the network

Dynamic Network Management (DNM)

Our goal is to create a smarter network, that enables us to truly understand how our drainage systems perform. We want to be proactive, identifying and responding to pinch points before they become problems experienced by customers. The key to achieving this is through Dynamic Network Management.

We are installing sensors around our network that will monitor levels and learn how that level changes in response to different factors. It will spot deviations to these levels and flag it to our integrated control centre for investigation and resolution before our customers know anything has happened.

To date, over **16,000** sensors have now been installed across the 64 'hot spot' areas which is **c. quarter** of the way through the total programme of installations – we are over 90% of the way through our programme.

We have an established **Alert Response Team** that are trained and out and about responding to any alerts that come into the Model Office.



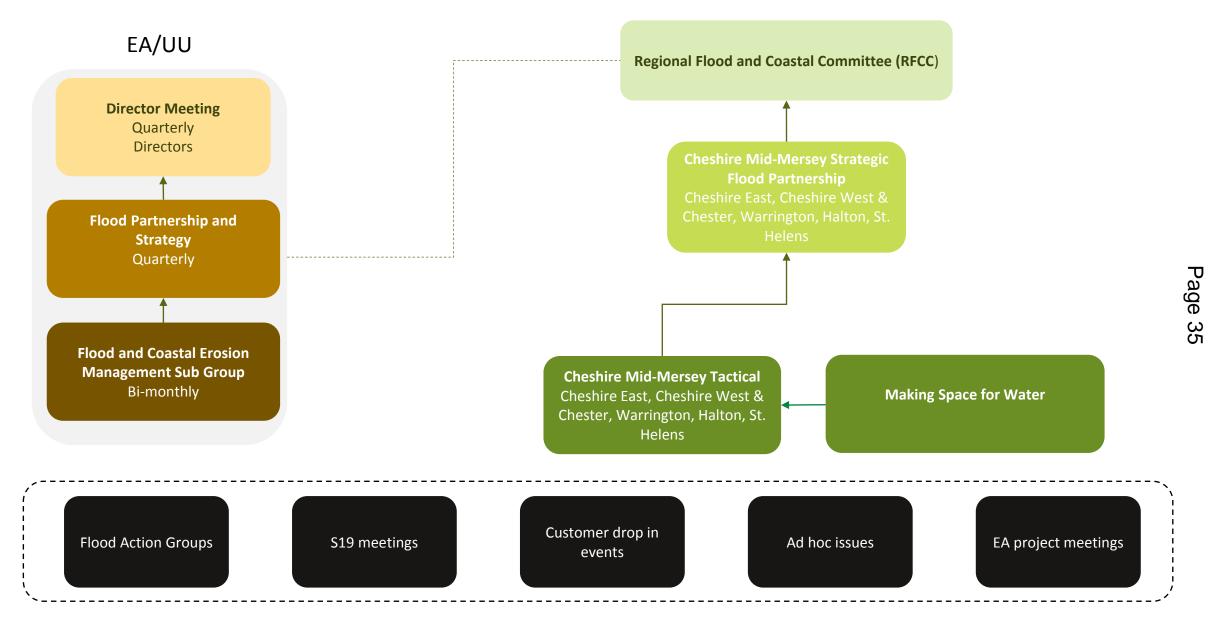
In Cheshire East, we have installed 699 monitors, a further 1,200 monitors are proposed to be installed by the end of the programme

DNM

Working with Cheshire East



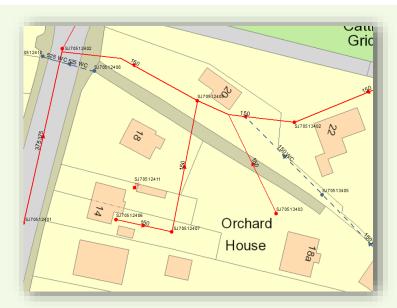
Meeting in Partnership



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Working Together: Watercourses

Watercourses are the source of the majority of partner flooding issues in Cheshire East



Crewe Road, Shavington

Issue raised to CE in 2016
Culverted watercourse connected into Combined Sewer.

The sewer is not designed to accept watercourses, surcharge occurs out of the manhole causing flooding to four properties.

Need CE to enforce the removal of connection and reinstate to the culvert further downstream.

The customer referred to the Ombudsman and a formal report has been written which CE & UU have been working through. MP involvement and several escalated customer complaints.



Hobson St. / Ryle St.

Worked with CE since June 2018 Culverted watercourse collapsed on Ryle St.

This was left unresolved due to ownership issues. Exfiltration caused a secondary culvert collapse on Hobson St in Feb 2020. This was underneath the highway exposing the combined sewer and causing the watercourse to enter the combined system.

Now a permanent connection has been made by CE between the culvert and UU combined sewer. UU have incurred extensive costs as a result which we had agreed to recharge CE in line with CE recharge approach. The collapsed culvert remains with further risk to UU assets and regular customer complaints.

Poynton

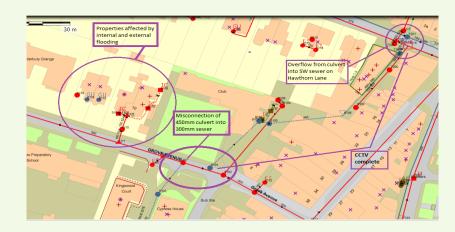
We work very well with Cheshire East in Poynton as this is a common and large scale issue for both parties.

We have installed DNM sensors to monitor inundation to the drainage network, third party and our own.

We have examples of where we have worked together to achieve SW separation and we will continue these discussion in our regular operational meetings.

There is more to be done as a partnership with SW management in this area. We will continue to support these investigations with the EA and CE.

Working Together: Watercourses Continued



Grove Avenue, Wilmslow

Working with CE since 2016

Culverted watercourse has been severed and diverted into the public combined sewer.

There have been internal flooding incidents to a number of nearby properties and the threat of potential internal flooding to Wilmslow Prep School.

Downstream of this misconnection there is a storm overflow. The additional surface water flows passing through from the culvert posing a greater risk of unnecessary pollution to the River Bollin.

UU agreed to CCTV culvert on behalf of CE to confirm it is viable to reconnect. CE was then to reconnect. UU completed in 2017.

CCTV was sent at the time but CE have requested more copies. At the most recent Operational Meeting (03.03.23) It was discussed with CE that they will need to resurvey the culvert themselves as the CCTV will be long out of date and the condition may well have worsened considerably.



Calveley

Worked with CE since 2015 Culvert running under the cheese factory blocked.

This causes higher levels in the watercourse which locks UU's outfall and floods a customers property.

CE and UU have jointly met the customer, local MP and factory on several occasions.

Need CE enforcement on riparian owner to CCTV and clean the culvert. They have attempted but with limited success. CE are still reluctant to enforce the cleaning here and the position remains the same.

Where Needs Improvement?

Cheshire East can obtain GiA and Levey funding to carry our such works. However, the more properties protected, the more cost beneficial. Each of the cases demonstrated here are minimal properties, therefore funding via these mechanisms is unlikely.

For UU, the number of properties does not matter, we prioritise on incidents. Each of these issues costs UU a significant amount every year. The timescales for CE to resolve these issues is unacceptable as is the financial and resource burden on UU.

We would like to see the LLFA receive more internal funding dedicated to resolving flood risk issues, especially when there are partner contributions. The flooding experienced by these residents is severe.

We would like to see CE LLFA:

- Utilise their enforcement powers
- Improve their timescales for resolving issues
- Receive more internal support

Despite consistent communications from a strategic and partnership perspective, better communication between CE and UU is needed when dealing with reactive incidents. That is for both the LLFA and Highways teams.

There are outstanding charges that UU have incurred as a result of issues which are the responsibility of Cheshire East.

We need to work to resolve how we can work better as partners.



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Environment Agency

Roles and Responsibilities

The Environment Agency is responsible for taking a **strategic overview** of the management **of all sources of flooding** and coastal erosion and are responsible for managing the risk of flooding from main rivers, reservoirs estuaries and the sea

Strategically: this involves **working with partners** to assess and determine flood risk and to identify and deliver solutions to mitigate that risk.

We provide **information on areas at risk** of river, surface water and coastal flooding through flood risk maps.

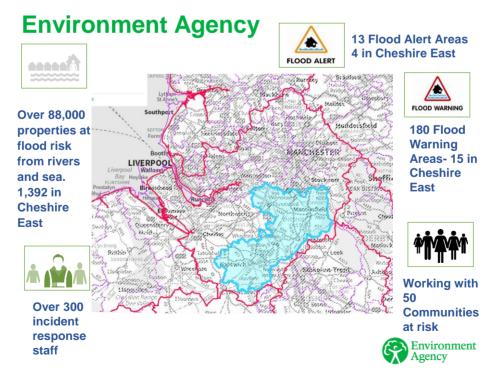
Operationally: We issue **flood warnings** for main river flooding, our operations team **maintain assets** and clear blockages.

We conduct post-flood investigations to understand what occurred..

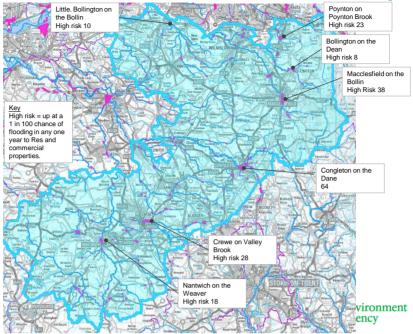
Our Resilience team **work with the community** to help the community respond to the event.



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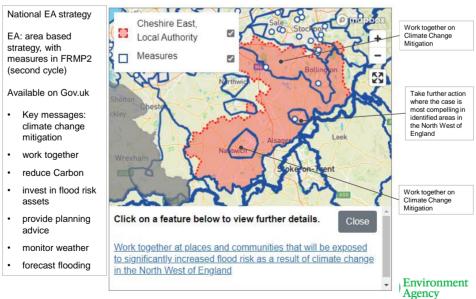


Environment Agency Main River risk map



3

Environment AgencyFlood Risk Management Plan 2



Environment Agency

Investigate main river flood risk solutions. Currently unviable schemes for Congleton, risk is in 3 separate locations, walled defence solution unviable. Looking instead at upstream Natural Flood Management (NFM). Working with Cheshire Wildlife Trust, some funding of 'Slow the Flow' interventions to reduce flood peak downstream. Provides habitat and climate resilience.





Strategically, EA administer Defra Flood Defence Grant in Aid (FDGiA) Schemes, and Local Levy funding for the Regional Flood and Coastal Committee. This means advising on schemes, and providing QA on business cases to turn indicative allocations into signed off business cases and deliverable schemes.



5

Environment Agency

During a Flood Event, we:

Receive Weather Warnings from the Met Office.

Run Forecast weather through Hydrological flood models to determine Best Estimate and Reasonable Worse case forecast scenarios

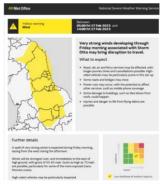
Hold Flood Advisory Service (FAS) Telecoms with Resilience forum to disseminate intelligence

Attend command structures and give technical advice on Flood Warnings and operational response and potential impacts

Issue Flood Alerts & Warnings using Flood Warning System - telephone system, text and internet, partners, media etc

Operate flood control structures and pumping stations

Clear debris from channels, screens and culverts on main rivers and monitor/repair stressed defences







Environment Agency

Post-Flood, we:

Undertake post-flood data collections.
Community Support Officers advise
communities on how to proceed, closely
liaising with Local Authorities.
Support Multi Agency Flood Drop-ins following
flooding

We have supported communities across Poynton, Little Bollington, Bollington, Wilmslow, Church Minshull and Nantwich

Advice ranges from insurance requests, possibly grants form Government, future flood risk, potential short-term mitigation.

Input to LLFA's section 19 Reports

Working collaboratively with partners on potential solutions







7

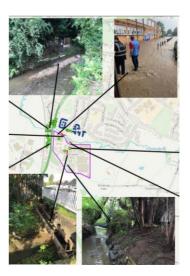
Environment Agency Poynton focus

Post Flood data collection highlighted that risk was combined from Ordinary Water courses and main river. Main river has had an embankment repaired which alleviated main river risk.

Surface water flood risk relates to limited capacity of culverts through town.

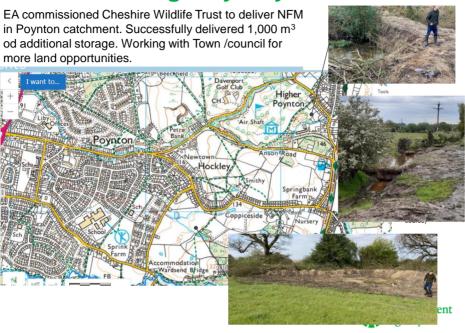
Worked with Cheshire East and UU on maintenance and specific solutions. Ce and UU have undertaken many improvements.

Identified NFM upstream as key for reducing risk. EA commissioned CWT to deliver NFM upstream of Poynton (and also Kettleshulme and Pott Shrigley)





Environment Agency Poynton focus







Working for a brighter future together

Scrutiny Committee

Date of Meeting: 16 March 2023

Report Title: Pharmaceutical Needs Assessment findings relating to

rural communities across Cheshire East

Report of: Dr Matt Tyrer, Director of Public Health

Report Reference No: SC/11/22-23

Ward(s) Affected: All

1. Purpose of Report

- **1.1.** The purpose of this report is to update members of findings from the finalised Pharmaceutical Needs Assessment (PNA) in relation to community pharmacy provision in rural communities within Cheshire East.
- 1.2. The production of the PNA supports three outcomes from the Health and Wellbeing Strategy 2018-21: Create a place that supports health and wellbeing for everyone living in Cheshire East; improving the mental health and wellbeing of people living and working in Cheshire East; and enable more people to live well for longer.
- 1.3. This report also outlines the initial approach to considering the implications for Cheshire East of Lloyds Pharmacy closures, which are planned nationwide, and also of newly published Census 2021 data.

2. Executive Summary

- 2.1 Cheshire East Health and Wellbeing Board has a statutory responsibility to publish an up-to-date statement of pharmaceutical needs every 3 years.
- 2.2 PNAs are used by the NHS to make decisions on which NHS funded services need to be provided by local community pharmacies. These

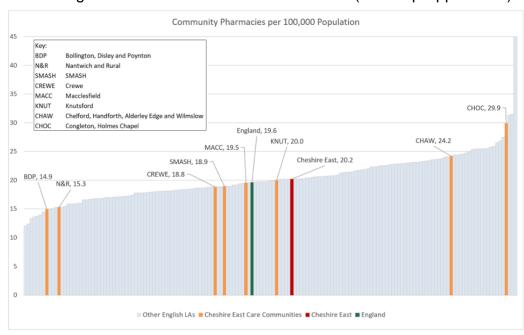
services are part of local health care and public health and affect NHS budgets.

- 2.3 The current final PNA was published in September 2022. This incorporated intelligence from the public consultation.
- 2.4 The overall conclusion of the PNA 2022 was that pharmaceutical provision in Cheshire East is adequate. This means that there are enough pharmacies across Cheshire East and that their opening hours and the services they provide are suitable. People can also seek support from pharmacies in other local authorities nearby. This is important—particularly in Bollington, Disley and Poynton, where there are fewer pharmacies.
- 2.5 We asked people to comment on the draft of the PNA through public consultation between 1 April 2022 and 10 June 2022. Scrutiny Committee members were invited to consult as part of this process at the start of the consultation period. After looking at the feedback, we added some more detail in the finalised document, to explain the purpose of the PNA and how we reached our conclusions. Appendix G of the published PNA describes the feedback received and any changes made in response. Many comments were about the performance in a single location in Cheshire East. Performance issues are not managed as part of the PNA, this responsibility sits with NHS England and any relevant comments were passed on to them to look into further. Details of how people can complain, if they are concerned about a pharmacy's performance were provided in the final full version of the PNA, in the plain English summary document, and as a separate document, on the Health and Wellbeing Board webpage of the Cheshire East Council website at: https://www.cheshireeast.gov.uk/council_and_democracy/your_council/heal th_and_wellbeing_board/health_and_wellbeing_board.aspx
- Why does rurality need to be considered? The Rural Urban Classification defines rural as areas "outside of settlements with more than 10,000 resident population". It is estimated that nearly two fifths of Cheshire East's total population (386,700), live in rural areas². This means that a large portion of our population may struggle to access conventional services easily without additional support.

¹ Gov.UK (2021) Rural Urban Classification. Available from: https://www.gov.uk/government/collections/rural-urban-classification#contents (Accessed 19 January 2023).

² Cheshire East (2022) Cheshire East Rural Action Plan. Available from: http://moderngov.cheshireeast.gov.uk/ecminutes/documents/s97674/Rural%20Action%20Plan%2020 http://moderngov.cheshireeast.gov.uk/ecminutes/documents/s97674/Rural%20Action%20Plan%2020 http://moderngov.cheshireeast.gov.uk/ecminutes/documents/s97674/Rural%20Action%20Plan%2020 https://moderngov.cheshireeast.gov.uk/ecminutes/documents/s97674/Rural%20Action%20Plan%2020 https://moderngov.cheshireeast.gov.

- **2.7** In terms of rural communities there were some specific findings, including:
 - There is a very strong correlation between population size and the number of local community pharmacies:
 - The areas of highest population density within the towns of Crewe, Macclesfield, Congleton have between eight and fifteen pharmacies.
 - Most of the main towns in Cheshire East are served by at least two pharmacies.
 - Several towns and villages have a single community pharmacy, including Audlem, Bollington, Disley, Goostrey, Haslington, Holmes Chapel, Mobberley, Prestbury and Shavington.
 - Cheshire East's rate of pharmacies per 100,000 population is above the England average (20.2 compared with 19.6 respectively). The care communities of Congleton and Holmes Chapel and Chelford, Handforth, Alderley Edge and Wilmslow (CHAW), both have a higher rate, i.e. have more pharmacies per 100,000 than the Cheshire East average. Macclesfield, Nantwich & Rural, Crewe, Sandbach, Middlewich, Alsager, Scholar Green and Haslington (SMASH), Knutsford and Bollington, Disley and Poynton care communities have fewer pharmacies per 100,000 (see graph below). The area with the lowest number of community pharmacies per 100,000 is Bollington, Disley and Poynton (14.9 per 100,000). This is less than half of the highest rate of 29.9 per 100,000 for Congleton and Holmes Chapel but the area is also served by several pharmacies outside the borough in Cheadle Hulme and Hazel Grove (see map Appendix A).



Data Source: National Pharmacy tables as at Nov 2021, ONS Population estimates: Persons by single

- The number of pharmacies required within an area cannot be based purely on the size of the local population. The population served by a particular pharmacy can be hard to determine as people choose to use a specific pharmacy for various reasons. The results from the public survey showed 63% used a pharmacy near to their home, 40% used the one near to their GP Practice, 40% used a pharmacy because it is easy to park nearby, and 29% used a pharmacy because it was near shops. Within the public survey free text comments, participants ranked knowledgeable staff, prescription availability and friendly staff as the most important aspect of pharmacy service.
- Pharmacies may not always be viable in more rural areas. This is
 where the services of dispensing doctors can play an important role in
 ensuring that patients receive their medicines promptly, efficiently,
 conveniently and to high standards. In order to qualify a patient must meet
 certain requirements in the regulations, which are:
 - They must live in a controlled locality (which is an area that has been determined by NHS England or a predecessor organisation to be "rural in character")
 - They must live more than 1.6km (measured in a straight line) from a pharmacy
 - The practice must have approval for the premises at which they will dispense to them
 - The practice must have the appropriate consent for the area the patient lives in.
- As at the 28 January 2022, there were six practice premises which offered dispensing doctor services to eligible patients in the Cheshire East Health and Wellbeing Board area. These are:
 - Bunbury Medical Practice, Bunbury (Whilst this dispensing doctor is associated with the Cheshire West and Chester local authority, it lies within Cheshire East boundary and serves some Cheshire East residents, therefore it has been included within the Cheshire East PNA)
 - Chelford Surgery, Chelford
 - Greenmoss Medical Centre, Scholar Green
 - Holmes Chapel Health Centre, Holmes Chapel
 - Knutsford Medical Patnership, Knutsford
 - Wrenbury Medical Practice, Wrenbury.
- Having analysed the data from the dispensing doctors survey, it is concluded that there is no significant gap in provision of Essential

pharmaceutical services for the population served by dispensing doctors.

- Dispensing Doctors are good at accommodating for protected characteristics, with nearly all practices with wheelchair ramp access, large print labels and leaflets, automatic door assistance, toilet facilities accessible to wheelchair users, hearing loops, disabled parking, and an ability to support patients whose first language is not English.
- The six dispensing practices in Cheshire East dispensed 401,488 items during 2020/21, accounting for 6% of all items prescribed and dispensed within the Borough. This is the equivalent of an average of 5576 items per month per dispensary.
- Most pharmacies (94%) offer a prescription collection service from patients' GP surgeries. All pharmacies answered the questions regarding delivery of dispensed medicines on the community pharmacy survey, 79.5% stated that they offer this service free of charge.
- In terms of coverage, free delivery services are available in all care community localities. Ten pharmacies (13%) do not offer delivery services. In the public survey, of the 48% of participants who answered the question, 5% stated that they value the prescription delivery service from pharmacies.
- The Electronic Prescription Service (EPS), allows a patient to choose or "nominate" a pharmacy to get their medicines or appliances from. The patient's GP sends the prescription electronically to the nominated pharmacy, giving more choice and saving time. Whilst all pharmacies should be signed up to the EPS, dispensing doctors do not send prescriptions electronically.
- In Cheshire East, there are currently two distance selling / internet pharmacies, both of which are located within the SMASH (Sandbach, Middlewich, Alsager, Scholar Green and Haslington) care community. The two distance selling pharmacies are currently responsible for dispensing 0.55% of prescriptions issued to patients registered with Cheshire East practices.
- 2.8 The findings of the current PNA have led to the following recommendations: -
 - The dispensing doctor services will supply eligible patients with medicines, but they may not be able to benefit from the wider range of

that community pharmacies are able to provide via Essential and Advanced service contracts with the NHS Cheshire and Merseyside Integrated Care Board and local public health commissioned services. Existing pharmacies may have to increase their capacity and review their working practices to meet this need.

- Most of the increase in prescribing need will occur among older people.
 This PNA has highlighted several issues relevant to older people, including poor physical access to some community pharmacies, and insufficient accessibility aids in some pharmacies.
- It is recommended that NHS England, Cheshire East Council and NHS
 Cheshire and Merseyside Integrated Care Board review accessibility of
 pharmacy sites, service quality and uptake, including consideration of
 cultural and equalities needs.
- When using the Office of National Statistics population projections, pharmaceutical need is predicted to increase by a greater extent in the Knutsford and Bollington, Disley and Poynton care communities. The current dispensing workload is higher in the Bollington, Disley and Poynton care community (7,432) than the England average (6,565) which is consistent with having fewer pharmacies per 100,000 population. This might involve a change in the skill mix and capacity within each pharmacy to cope with the predicted additional demand.
- A potential future gap of pharmaceutical provision in Basford, Crewe was identified due to a large, planned housing development. It is recommended that this is monitored for as the housing development progresses over the lifecycle of this PNA.
- Pharmacies have a continued important case-finding role in relation to high blood pressure.
- Pharmacies continue to have a role in supporting patients to recover quickly from minor ailments.
- Over the lifetime of this PNA, the Health and Wellbeing Board will actively consider pharmacy issues and need over the next three years and regularly consider the need for additional (supplementary) statements to update on any substantial changes that emerge.

2.9 Lloyds Pharmacy has announced that it plans to close 237 branches of its pharmacies within Sainsbury's supermarkets across the country. There are 2 planned closures in Cheshire East, one in Nantwich and one in Macclesfield. Members of the Public Health Intelligence team will be working with the Local Pharmaceutical Committee to understand implications for the recommendations within the recently published PNA and to determine next steps including whether a supplementary statement is required. This group will also consider the implications of newly published Census 2021 on population estimates.

3. Recommendations

- **3.1.** The Scrutiny Committee note the findings of the PNA and its recommendations.
- **3.2.** The Scrutiny Committee is asked to note the next steps in relation to considering the implications of planned pharmacy closures and newly published Census data.

4. Reasons for Recommendations

- 4.1. Every Health and Wellbeing Board (HWB) in England has had a statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area and the production of the PNA is in line with this duty. The purpose of the Scrutiny Committee is to undertake reviews and make recommendations on services or activities carried out by other organisations and which affect residents, businesses as well as the Council and its Committees. The Committee's responsibilities include: The discharge of the Council's responsibilities set out in section 19 of the Police and Justice Act 2006, section 244 of the National Health Service Act 2006, and section 9JA and 9JB of the Local Government Act 2000 in relation to flood risk management.
- **4.2.** The PNA process links to ensuring that Cheshire East Council: works together with residents and partners to support people and communities to be strong and resilient; and reduces health inequalities across the borough.
- **4.3.** The production of the PNA supports three outcomes from the Health and Wellbeing Strategy 2018-21:
 - Create a place that supports health and wellbeing for everyone living in Cheshire East
 - Improving the mental health and wellbeing of people living and working in Cheshire East
 - Enable more people to live well for longer

5. Background and options

- 5.1. Cheshire East Health and Wellbeing Board has a statutory responsibility to publish an up-to-date statement of pharmaceutical needs. A revised PNA was published in September 2022. There was no other option as a revised PNA had to be published by 1 October 2022. This represented an extended deadline due to the COVID-19 pandemic.
- **5.2.** The Health and Wellbeing Board approved delegation of the day-to-day authority for the development of the revised PNA to the Director of Public Health on 23 November 2021 at minute number 31.
- **5.3.** The PNA covers community pharmacy opening times, services delivered from community pharmacies, and accessibility.
- **5.4.** The production of the PNA was overseen by the Cheshire East PNA Steering Group, which included representation from:
 - Cheshire East Council Public Health
 - Cheshire Clinical Commissioning Group
 - Healthwatch
 - The Chair of the Local Pharmaceutical Committee and of the Local Pharmaceutical Network
 - Local Medical Committee representatives
 - East Cheshire NHS Trust
 - Mid Cheshire Hospitals NHS Foundation Trust.
- **5.5.** The production of the PNA involved:
 - Analysis of data relating to pharmaceutical need and demand from wide and varied sources
 - Regular consultation with members of the Cheshire East PNA Steering Group
 - A public survey, and incorporation of 2 questions regarding pharmacies as part of broader Healthwatch conversations
 - A dispensing doctors survey
 - A community pharmacy contractors survey.
 - Public Consutation from 1 April 2022 to June 2022

6. Consultation and Engagement

6.1. The draft PNA underwent public consultation from 1 April 2022 to 10 June 2022. This involved invitations for all key stakeholders to feedback. Key

stakeholders were identified by the Cheshire East PNA Steering Group through examination of the national guidance³ and of the local Equality Impact Assessment. The consultation was also widely publicised via: media release through local and regional media channels; and on the Council's website, Facebook and Twitter channels.

- **6.2.** A total of 105 completed responses were received. There were also 354 partial responses: a partial response is where a person has started to complete the survey but never hit the submit button on the final page.
- 6.3. Findings from a comprehensive analysis of the consultation is summarised at Appendix G of the full document. This analysis resulted in a variety of clarifications and provision of additional details in the final version of the PNA. However, after careful consideration of the analysis of the consultation responses this did not change the overall conclusions of the PNA. In addition to updating the full document to include the consultation findings, the short Plain English Summary of the PNA was also updated to provide further clarity following consultation.
- 6.4. The draft PNA concluded that pharmaceutical provision within Cheshire East is currently adequate, only 28 out of 105 respondents (27%) agreed with this statement, 13 of whom strongly agreed. Considerably more respondents disagreed with this statement than during the last PNA consultation conducted in 2018, with 55 out of 103 respondents disagreeing (53%). Further analysis of the full responses showed that a large proportion (59%, 61 responses) were from residents of one area, we refer to this as Area A. This disproportionate representation from one area was skewing the analysis of both the closed questions and the concerns raised in the open questions.
- 6.5. A total of 76 respondents gave additional detail in response to the open questions included in the consultation questionnaire: 52 were residents of Area A, a further 8 responses related to the provision in that area, and only 16 related to the rest of Cheshire East (21%). Of the themes raised within the open questions, 73% related to performance issues. Concerns raised regarding specific pharmacies via this consultation process have been raised with NHSE who manage the pharmacy contracts. The performance and quality of community pharmaceutical providers are outside of the scope of the PNA. However, it is important for residents to raise these concerns,

³ Department of Health and Social Care (2021) Guidance. Pharmaceutical needs assessments: information pack Available from: https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack (Accessed 25 July 2022).

particularly if they affect patient safety. An appendix showing the steps residents can take to complain has been developed and included within the full PNA document 'How to complain' at Appendix H. A link will also be provided on the webpage where the PNA will be held once published, and the same information has been provided within the short Plain English Summary).

- **6.6.** Other concerns raised through the consultation have been summarised in Table C of the consultation report at Appendix G. This table also summarises actions taken to address this feedback. All concerns raised have been duly considered and where necessary, appropriate actions taken and documented in a formal action log. These have involved additional wording within the PNA. The purpose of this additional wording is to clarify any conclusions drawn and as outlined in Table C of the consultation report.
- 6.7. Following an analysis of the consultation responses, the overall conclusions of the PNA remain the same: pharmaceutical provision is adequate, and the PNA has not identified current or anticipated future need for new NHS pharmaceutical service providers in Cheshire East over the time frame of this latest PNA.
- 6.8. Nevertheless, over the lifetime of the PNA 2022, the public health intelligence team will actively consider pharmacy issues and need on behalf of the Health and Wellbeing Board. They will regularly consider the need for additional (supplementary) statements to update on any substantial changes that emerge.

7. Implications

7.1. Legal

- 7.1.1. Every Health and Wellbeing Board (HWB) in England has a statutory duty (Section 128A of NHS Act 2006, as amended by Health Act 2009 and Health and Social Care Act 2012) to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area, referred to as a pharmaceutical needs assessment (PNA).
- 7.1.2. The Scrutiny Committee carries out the Council's statutory scrutiny responsibilities in relation to local health services (as set out in Section 244 of the Health and Social Care Act 2006).

7.2. Finance

This report is undertaken by the Public Health team within Cheshire East Council on behalf of the Health and Wellbeing Board. There are no financial implications to the Council aside from the time and resources it has taken to produce the report and conduct the consultation. These resources form part of the existing Public Health ring-fenced budget and therefore no changes are required to the Council's existing Medium Term Financial Strategy (MTFS).

7.3. Policy

None identified. This is a statutory report to be published to inform NHS England of the local picture. NHS England is the decision-making body about the commissioning of new pharmacy premises.

7.4. Equality

An Equality Impact Assessment was completed. It highlighted the need to proactively promote the PNA with certain population groups more, due to the low number of responses to the public survey. This has been addressed as part of the formal consultation process. Its recommendations/decisions here.

7.5. Human Resources

None identified

7.6. Risk Management

None identified. This is a statutory report to be published to inform NHS England of the local picture. NHS England is the decision-making body about the commissioning of new pharmacy premises.

7.7. Rural Communities

Both rural and town areas of the Council's footprint are considered as part in this report.

7.8. Children and Young People/Cared for Children

There are no direct implications for children and young people.

7.9. Public Health

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This work and its recommendations aim to guide improvement of public health in relation to pharmaceutical services through intelligence-informed approaches.

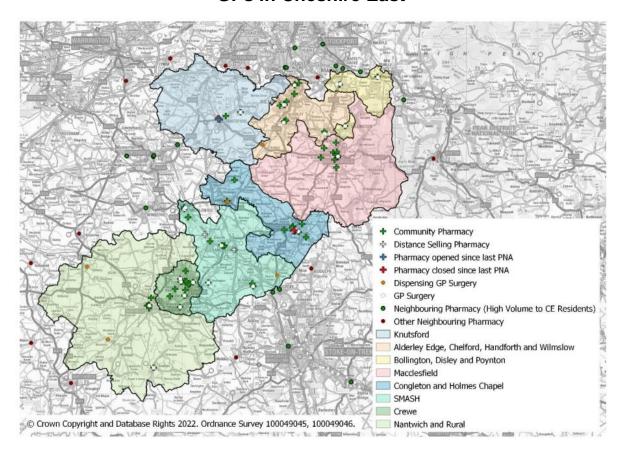
7.10. Climate Change

The PNA includes consideration of ways in which local pharmacies promote wellbeing and healthy lifestyles and illness prevention.

Access to Information						
Contact Officer:	Dr Susan Roberts, Consultant in Public Health					
	Susan.Roberts@cheshireeast.gov.uk					
Appendices:	Appendix A - Map: Location of Care Communities, Community Pharmacies and GPs in Cheshire East					
Background Papers:	Cheshire East Pharmaceutical Needs Assessment documents available at: Health and Wellbeing Board (cheshireeast.gov.uk)					

Appendix A

Map: Location of Care Communities, Community Pharmacies and GPs in Cheshire East





Work Programme – Scrutiny Committee – 22/23

Reference	Committee Date	Report title	Purpose of Report	Report Author /Senior Officer	Consultation and Engagement Process and Timeline	Corporate Plan Priority	Exempt Item and Paragraph Number
SC/12/22-23	16 Mar 2023	Flood Risk Management Functions by Flood Risk Management Agencies	To receive a presentation by on flood risk management functions by flood risk management agencies.	Director of Highways and Infrastructure	N/A	Reduce impact on the environment	N/A
SC/11/22-23	16 Mar 2023	Pharmacy Provision in Rural Communities	To receive an update from Public Health on the Pharmacy Provision in Rural Communities.	Executive Director Adults, Health and Integration	N/A	Reduce health inequalities across the borough	N/A
SC/15/22-23	16 Mar 2023	Violence & Intimidation against Women & Girls	To receive a report on the Cheshire East response to violence & Intimidation against Women & Girls.	Director of Adult Social Services	N/A	Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation	N/A
SC/05/22-23	Not before 1st Jun 2023	Update on Cheshire and Merseyside Commissioned work	To receive an update by Cheshire and Wirral Partnership (CWP) NHS Foundation Trust, on the Cheshire and Merseyside commissioned group for patients specifically prone to suicidal tendencies.	Executive Director Adults, Health and Integration	N/A	Reduce health inequalities across the borough	N/A

SC/17/22-23	TBC	Return of intrapartum care to Macclesfield District General Hospital	An update from East Cheshire NHS Trust on the return of intrapartum care to Macclesfield District General Hospital.		N/A	Reduce health inequalities across the borough	N/A
SC/18/22-23	ТВС	Covid-19 Vaccination Update	An update on the recovery and reset from the Covid-19 Pandemic including current vaccination statistics.	Director of Commissioning	N/A	Reduce health inequalities across the borough	N/A
SC/14/22-23	TBC	Fire Safety Presentation	To receive a presentation on fire safety across Cheshire East. *Meeting to be held at Safety Central TBC.	Director of Adult Social Services	N/A	Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation	N/A
SC/20/22-23	TBC	Delivery of new Integrated Care System and success of the Winter Plan	To receive an update from Cheshire and Merseyside NHS on the delivery of the new Integrated Care System (ICS) and success of the Winter Plan.	Executive Director Adults, Health and Integration	N/A	Reduce health inequalities across the borough	
SC/21/22-23	TBC	Future of Congleton War Memorial and Knutsford Cottage Hospital		Executive Director Adults, Health and Integration			
SC/19/22-23	TBC	Safer Cheshire East Partnership (SCEP) Annual Report and Strategic Intelligence Assessment	To receive the Safer Cheshire East Partnership Annual Report and Strategic Intelligence Assessment.		N/A	Work together with residents and partners to support people and communities to be strong and resilient	

SC/10/22-23	TBC	Prevent & Channel Update	To receive an update on the Prevent and Channel Programme following the publication of the National Independent Review of Prevent.		N/A	Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation	N/A
SC/13/22-23	TBC	Overview & Scrutiny of the Domestic Homicide Review	To scrutinise the Safer Cheshire East Partnership (SCEP) Action Plans and recommendations in respect of the Domestic Homicide Review.	Director of Adult Social Services	N/A	Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation	N/A

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