### **Public Document Pack**



### **HEALTH & ADULT SOCIAL CARE SCRUTINY PANEL**

### **TUESDAY 25 NOVEMBER 2008** 7.00 PM

**Bourges/Viersen Room - Town Hall** 

### **AGENDA**

		Page No
1.	Apologies for Absence	
2.	Declarations of Interest and Whipping Declarations	
	At this point Members must declare whether they have an interest, whether personal or prejudicial, in any of the items on the agenda. Members must also declare if they are subject to their party group whip in relation to any items under consideration.	
3.	Minutes of the Meeting of the Health & Adult Social Care Scrutiny Panel held on 14 October 2008	1 - 4
4.	Peterborough LINk - Presentation from the Shaw Trust	5 - 6
	To receive a presentation regarding the formation of the Peterborough LINk.	
5.	Review of the Council's Charging Policy for Adult Social Care Services	7 - 12
	To consider the impact of the charging policy and its future in the context of the changing nature of social care.	
6.	NHS Peterborough 5 year Strategic Plan	13 - 14
	To receive proposals for the development of the PCT 5 year Strategic Plan.	
7.	Peterborough Community Services	15 - 16
	To note the decision of the PCT Board regarding the long-term organisational model for Community Services.	
8.	Annual Health Check - results of the 2007/08 check published by the Healthcare Commission	17 - 20
	To note the ratings for all local NHS Trusts.	
9.	Feedback and Update Report	21 - 22

To receive a standard report providing feedback on any issues or questions raised at previous meetings.

### 10. Forward Plan of Key Decisions

23 - 36

37 - 40

To consider the latest version of the Forward Plan.

### 11. Health and Adult Social Care Scrutiny Panel Work Programme 2008/09

To consider the Panel's latest work programme.

### 12. Date of Next Meeting

Tuesday, 6 January 2009 at 7.00pm in Bourges & Viersen Committee Rooms.



There is an induction hearing loop system available in all meeting rooms. Some of the systems are infra-red operated, if you wish to use this system then please contact Alex Daynes on 01733 452447 as soon as possible.

### Committee Members:

Councillors: B Rush (Chairman), C Burton (Vice-Chairman), F Benton, J Goodwin, J Holdich, K Sharp and W Trueman

Substitutes: Councillors: R Dobbs, D Harrington and D Fower

Further information about this meeting can be obtained from Alex Daynes on telephone 01733 452447 or by email – alexander.daynes@peterborough.gov.uk



### MINUTES OF A MEETING OF THE HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL HELD AT THE TOWN HALL, PETERBOROUGH 14 OCTOBER 2008

Present: Councillors Rush (Chairman), Benton, C Burton, Goodwin, Holdich and Sharp

Also Present: Cllr Lamb Cabinet Member for Health & Adult Social Care Services

Annette Beeton LINks

Annette Newton Cambridgeshire and Peterborough Mental Health Trust

Officers in Angela Bailey Chief Executive, Peterborough Community Services attendance: Aidan Fallon Head of Corporate Assurance, NHS Peterborough

Robert Ferris
Ruth Griffiths
Lawyer, Education Children Services and Adult Social Care
Tina Hornsby
Head of Sofiphidic 7 Sadrance, 1410 Telefborough
Community Services
Lawyer, Education Children Services and Adult Social Care
Head of Performance and Informatics, NHS Peterborough

Priti Patel Principal Lawyer

Denise Radley Director of Adult Social Services and Performance, PCC

Anne Reeder Peterborough Community Services
Liz Boome Performance Scrutiny Officer, PCC

Alex Daynes Cabinet Officer, PCC

### 1. Apologies for Absence

Apologies were received from Jane Pigg, David Monk and Diana Millard.

### 2. Declarations of Interest

There were no declarations of interest from Members of the Panel.

### 3. Minutes of Meeting held 2 September 2008

The minutes of the meeting held on 2 September 2008 were approved as an accurate record with the following amendments:

- 1. Item 4, action 2; the Head of Corporate Assurance, not the Director of Adult Social Services and Performance, to liaise with Councillors Rush and C Burton.
- 2. Note Councillor Lamb's attendance.

### 4. Quarterly Performance Report on Adult Social Care Services in Peterborough

The Panel received a report from the Head of Performance and Informatics updating the progress and key achievements on the objectives within the Annual Accountability Agreement. Members were requested to review the quarter 1 position on adult social care targets, areas of identified risk and consider proposed remedial actions.

The committee was advised that some of the targets for the performance framework (Comprehensive Area Assessment) differed from the previous framework (Performance Assessment Framework) and therefore, not all data had been captured until recently.

Observations and questions were raised and responses given including:

- It is expected that the results of actions from the Adult Social Care team would be best seen in the quarter 3 report.
- Not all the necessary data was available to provide a quarter 2 report at this time.

### **ACTION AGREED**

- 1. To note the report
- 2. To receive information on progress and actions taken to achieve performance targets when the quarter 2 figures are reported.

### 5. Draft Revised Partnership Agreement between the Council and NHS Peterborough in respect of Adult Social Care Services

The Panel received a report from the Director of Adult Social Services and Performance reviewing the partnership agreement for adult social care and health services. The Panel was asked to note the work on reviewing the partnership agreement and to comment on the principles and key issues that formed the basis of further negotiations between the City Council and NHS Peterborough (the Primary Care Trust, (PCT)).

Members were advised that the budget would be pooled from Peterborough City Council (PCC) and NHS Peterborough as this would enable more flexible spending. However, there would be a strict reporting process for any spending taken from the budget. The committee was advised that PCC and NHS Peterborough would also be pooling expertise to ensure the best outcome was achieved.

Observations and questions were raised and responses given including:

- The pooled budget would enable more flexibility relating to spending on treatments such as provision of drugs and support in the community. Decisions would be made on best practise bases for individual cases rather than on which partner provides which service.
- It is anticipated that increased prevention and early intervention work will lead to savings in health spending.

### **ACTION AGREED**

To note the report.

### 6. Peterborough Community Services

The Panel received a report supported by a presentation from the Chief Operating Officer that gave a summary of the findings from the option appraisal process carried out to identify the most suitable future long term organisational model for Peterborough Community Services (PCS). Members were updated on the progress made so far with the work and were advised that a further report would be submitted to the Panel in November following the decision of the NHS Peterborough Board, ready to be submitted to Cabinet on 1 December 2008.

Members were presented with the Business Case and Option Appraisal work that led to the recommendation for the preferred organisational model for Peterborough Community Services; a Community Foundation Trust. Members were advised that the costs contained in the report would be amended as set up costs had to be calculated.

Observations and questions were raised and responses given including:

- The NHS Board would make a recommendation to Cabinet, not a decision.
- The advice received from financial advisors was that VAT would not need to be paid as PCS is a NHS body.
- The NHS pension scheme would be continued and maintained for all staff. This pension fund is secured by taxation legislation.
- The Social Enterprise option would not allow continued pension provision.
- Efficiency savings would need to be calculated before the set up costs are calculated.

### **ACTION AGREED**

To note the report.

### 7. Feedback and Update Report

The Panel received a regular report that forms part of the Panel's 2008/2009 work programme. The report provided details of the results of the NHS East of England Consultation – 'Towards the Best Together' and included details of the changes agreed by the NHS East of England Board and published on the NHS East of England's website.

Members were advised that the Local Involvement Network (LINk) would be hosted by the Shaw Trust and that governance and procurement work was already developed. Members were further advised that the Shaw Trust was a UK company.

### **ACTION AGREED**

- 1. To receive a presentation from the Shaw Trust.
- 2. To note the report.

### 8. Forward Plan of Key Decisions

The Panel received the Council's Forward Plan which outlined forthcoming Executive Decisions for the period October 2008 to January 2009 for consideration.

### **ACTION AGREED**

To note the report.

### 9. Health and Adult Social Care Scrutiny Panel Work Programme

The Panel received and noted the latest work programme for 2008/2009.

### 11. Date of Next Meeting

Tuesday 25 November 2008 at 7.00 pm in the Bourges and Viersen meeting rooms.

Meeting closed at 8.05pm

Chairman

This page is intentionally left blank

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL	Agenda Item No. 4
25 NOVEMBER 2008	Public Report

### **Report of the Director of Strategic Resources**

Report Author – Liz Boome Contact Details – (01733) 452324

### PETERBOROUGH LOCAL INVOLVEMENT NETWORK (LINk) – PRESENTATION BY THE SHAW TRUST

### 1. PURPOSE

To advise the Panel of the progress made in establishing a Local Involvement Network (LINk) in Peterborough.

### 2. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT

This report links to the Council's corporate priority to 'achieve the best possible health and well being'.

### 3. BACKGROUND

- 3.1 The Local Government and Public Involvement in Health Act 2007 received royal Assent in October 2007. Under the Act Patients' Forums were abolished from March 2008 and Local Involvement Networks established from April 2008.
- 3.2 The purpose of LINks is to help strengthen the system that enables communities to influence the care they receive. Backed by legislation in the Act, LINKs will:
  - provide everyone in the community from individuals to voluntary groups with the chance to say what they think about local health and social care services – what is working and what is not.
  - give people the chance to influence how services are planned and run.
  - feedback to services what people have said about services so that things can be improved,
  - refer items to local Overview and Scrutiny Committees
- 3.3 Each Local Authority was allocated funds from the Department of Health to procure a host organisation this funding is not ring-fenced but part of the Area Based Grant. The host would be responsible for setting up the LINk.
- 3.4 In September 2008, The Shaw Trust was appointed as the host organisation for the Peterborough LINk.
- Lesley Knapton and Dinah Shaw of The Shaw Trust will attend the meeting to give a presentation to Panel members regarding progress made in the establishment of the Peterborough LINk.

### 4. NEXT STEPS

That Members will note the information regarding the Peterborough LINk

### 5. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

The Local Government and Public Involvement in Health Act 2007

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL	Agenda Item No. 5
25 NOVEMBER 2008	Public Report

### Report of the Director of Director of Adult Social Services and Performance

Report Authors – Denise Radley, Director of Adult Social Service and Performance Contact Details – Tel: 758444

Mark Gedney, Financial Systems Manager, NHS Peterborough (Tel: 758483)

### REVIEW OF THE COUNCIL'S CHARGING POLICY FOR ADULT SOCIAL CARE SERVICES

### 1. PURPOSE

- 1.1 The Council's charging policy for non-residential Adult Social Care services has been in operation now for more than 5 years (implemented in its original form in April 2003), and has been subject to a number of reviews throughout this period. This report is submitted to the Scrutiny Committee to consider the impact of the charging policy, and its future in the context of the changing nature of social care.
- 1.2 The purpose of this report is to enable the Scrutiny Committee to review the current form of the Council's charging policy, look at alternative options, and consider a number of amendments to this policy.

### 2. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT

2.1 This report links to the Council's corporate priority to 'achieve the best possible health and well being'.

### 3. BACKGROUND

- 3.1 Peterborough Primary Care Trust commissions and provides a range of social care services for vulnerable people on behalf of Peterborough City Council, but is reliant on income from client charges to help pay for these services, and to extend and improve them. The amount of charges raised from social care service users has increased year on year since the introduction of the current Charging Policy, and approximately £5 million was raised from charges during the 2007/08 financial year including for residential and non-residential services. The cost of administering the charging policy is approximately £400,000. Approximately 1300 people are currently accessing homecare services, and of these, around 40% pay an assessed charge, 20% pay the full cost charge, and the remaining 40% pay no charge.
- 3.2 The Council's charging policy for Adult Social Care services was formulated in response to charging guidance issued by the Department of Health (DoH) in 2002, and was first implemented from April 2003. The DoH guidance contains a number of minimum requirements that Council's charging policies must comply with; including protected minimum income levels below which charges cannot be applied, but also allows Councils some discretion to tailor charging policies to their own design.
- 3.3 Local Authorities are not required by law to charge clients for their social care services, however the calculation methods used by central Government to determine Local Authority funding levels for Adult Social Care services assumes a certain level of income from charges. The vast majority (over 97%) of Local Authorities have decided to make charges for the social care services that

they provide, to ensure, where possible, that service levels are sufficiently funded and available to meet the needs of their local populations.

- 3.4 From 1st April 2004, at the commencement of the Greater Peterborough Primary Care Partnership, the operation of the charging and collection functions for social care services was delegated by the Council to the Peterborough Primary Care Trust. Responsibility for the charging policy itself is retained by the Council.
- 3.5 The charging policy has been the subject of a number of reviews during the past five years, and various changes have been made as a result of these reviews, including the up rating and increasing of standard allowances and standard charges, the introduction of charges for attendance at day care services, and the introduction of a capital tariff charge into non-residential financial assessments. A joint working partnership has also been formed with the Department of Work and Pensions, which has facilitated the financial assessment process through the sharing of data, and has helped to increase welfare benefit take-up among the client groups in receipt of Adult Social Care services.

### 4. IMPACT OF THE CHARGING POLICY

- 4.1 The years since the introduction of the current charging policy have seen a steady increase, both locally and nationally, in the numbers of people accessing non-residential social care services. This is due, in the main, to demographic trends and increasing life expectancy rates. The imposition of charges for social care services is often contentious, and rarely popular, however, feedback received from many contacts with service users over a number of years has shown that generally there is an acceptance that some form of client contribution is necessary to help meet the cost of the care services they receive particularly so given that many service users receive Social Security benefits such as Attendance Allowance and Disability Living Allowance (Care) that are paid to help with the extra costs associated with disability.
- 4.2 Correspondingly, the numbers of people refusing services because of the requirement to pay a charge appears to be relatively low less than 100 clients have been recorded as declining services in the 2007/08 financial year, and not all of these are solely due to cost. Charging for care services does not therefore seem to significantly deter members of the local population from taking up care services. Since the charging policy's introduction, the levels of many elements of the charges have been increased in line with inflation, and some have been increased above this. With the recent introduction of the charge for day care attendance, the number of services that are charged for has also increased.
- 4.3 Funding pressures and greater demand for services have increased the importance of income from charges in terms of meeting the care needs of the local population from a balanced budget. If the Council were to consider the abolition of charges for its social care services, the shortfall in funding would be significant, and would prompt the re-consideration of service levels/funding priorities and local taxation levels.

### 5. IMPACT OF RECENT CHANGES

- 5.1 The charge for day care services, introduced in April 2008, has generated a level of income that has so far been much lower than predicted mainly due to the higher than expected number of day care service users who have been financially assessed as not needing to pay a charge. The original estimate of income from day care charges was in the region of £60k per annum, but the level of charges raised so far during the 08/09 year indicates that only a quarter of this figure will be realised.
- 5.2 Charges for day care have proved administratively difficult to collect, as patterns of service use have been unpredictable, and record-keeping has not been easy to obtain to a consistent standard. Many of these early difficulties have been overcome, although the charge still demands higher levels of administration resource than is necessary for other services where charges are made.

- 5.3 There has been some anecdotal evidence that service users have decided not to attend day care, or have reduced their number of attendances because of the imposition of a charge however, attendance numbers overall have generally appeared to continue at the same levels as before its introduction. Of greater impact to the future of day care services will be the care personalisation agenda, where more service flexibility, choice and individual control are demanded. The forthcoming introduction of individual budgets will increase these requirements, and many clients may decide that the existing organised day care services do not meet their needs, and purchase services elsewhere.
- 5.4 The introduction of the tariff charge against capital from April 2008 has been administratively more straightforward to implement, and early indications are that the additional revenue this charge amendment will generate in the 2007/08 year are in line with the predicted figure of £30k.

### 6. CURRENT & FUTURE ISSUES

### FUTURE OF SOCIAL CARE FUNDING

- 6.1 The Government has recently launched a pre-consultation on the future funding of adult social care. This is in response to widespread acknowledgement that the current system is in need of fundamental reform to cope with the demands placed upon it by increasing life expectancy, and service user's expectations of greater choice and independence. The consultation aims to obtain the views of the public about how the responsibility for funding should be shared between families, individuals and the state, and will culminate in the issue of a green paper next year which aims to take these views into account and present the Government's proposals for tackling the challenges.
- 6.2 The pre-consultation is due to end in November of this year. Many critics have said that the current system of means-testing is complex, and often unfair on the most vulnerable people, however it is unclear at this stage the extent to which radical change will be proposed. It appears likely that charging for social care services in some form will remain.
- 6.3 Changes to the Council's Charging Policy are likely to be required in response to any new guidance issued by the Department of Health in response to this, but these will be addressed separately to this report, at the appropriate time.

### SELF DIRECTED SUPPORT / INDIVIDUAL BUDGETS

- 6.4 The implementation of Individual Budgets represents a new approach to meeting the care needs of clients. This initiative involves the payment of funds, calculated by cross-referencing a client's own assessment of their needs with a new resource allocation system, directly to the client who can then decide how best use these funds to improve their lives. The forthcoming introduction of Individual Budgets in Peterborough, and the move away from commissioning traditional, organised care services towards a system of self directed support, raises a number of charging issues for Local Authorities who have historically designed their charging policies around defined care services.
- 6.5 The DoH has provided some early guidance about these issues to the 13 Local Authorities that have taken part in the Individual Budget pilot scheme but further, more detailed guidance is due to be issued shortly in response to a consultation and wider review of Fairer Charging in the context of Individual Budgets.
- The DoH has said that Councils who are looking at revising their charging regimes may want to await the outcome of this review before implementing permanent changes. In the interim however, the planned introduction of Individual Budgets in Peterborough from January 2009 requires an amendment to the Council's charging policy to accommodate the changes, and to prescribe the client contribution calculation method for Individual Budget holders.
- 6.7 It is therefore proposed that the Council's charging policy be amended with effect from January 2009 so that under Individual Budgets, as now, clients are subject to the standard fairer charging

assessment by the calculation method defined in the current charging policy. The figure resulting from the assessment is the charge that will be deducted from the Individual Budget payment to the client. It is also proposed that if the client's assessed charge exceeds the value of the Individual Budget, or if the client has capital assets that exceed the maximum capital limit (currently £22,250) - then the value of the Individual Budget will be zero. In this scenario the client may choose to make arrangements for their care independently or can opt for NHS Peterborough to arrange services for which they will charged in accordance with the charging policy.

### OTHER ISSUES

### Charge levels

A recent extensive survey of Local Authorities and their social care charges by "Counsel and Care" (a national charity whose aim is to get the best care for elderly people) has identified that among the 34 Local Authorities that took part, the average full cost hourly rate for homecare is £12.84, and that figures (for those Councils that charge) range from £8.20 to £18.00 an hour. Peterborough's figure is below this average at £12.48 per hour, and is pegged to increase year on year by inflation – so this represents good value in comparison with many other Authorities. Other charge comparisons include Meals on Wheels (Average: £2.91, ranging from £1.60 to £3.99, Peterborough £3.20), and the charge for transport to day care (can be up to £2.60, Peterborough: £1.50).

### Extra care schemes

6.9 A further two Extra Care supported housing schemes have opened in the past two years – Friary Court in Burton Street, and The Pavilions in Millfield. These schemes have been purposely designed and built to offer high levels of comfort, safety and security for their occupants, and to meet a range of differing care needs. The level of care provided within these schemes is personally tailored to meet individual tenants' needs during the day; with an on-call care service available throughout the night should it be needed. The charging policy already contains suitable provisions within it to accommodate such schemes and to ensure that the policy is fairly and consistently applied.

### Disability related expenditure allowance

6.10 A standard disability related expenditure allowance is applied uniformly in all fairer charging financial assessments in respect of any additional expense that the client may incur as a result of their condition or disability. This figure is currently set at £32 for a single person and £64 for a couple - where a couple assessment applies. It has however become apparent that the doubling of the single person disability rate for couples is not equitable where both members of the couple do not have a disability. It is therefore proposed that the couple disability rate only be applied to the financial assessment where both members of the couple are in receipt of either Attendance Allowance (High or Low rate) or Disability Living Allowance Care Component (Middle or Higher rate).

### <u>Day care charge – voluntary funded day care provision</u>

6.11 A charge for day care currently applies to service users of all day care services that are commissioned and funded wholly by the Local Authority. There are, however, a small number of day care services that are majority funded by voluntary organisations, but which receive a small amount of additional funding from the Local Authority. Day care charges have not been applied to service users of these schemes so far, in recognition of the fact that the majority of the cost of the service is met from sources other than the Local Authority, but confirmation of this approach is needed to ensure that this practice sits fairly within the charging policy.

### Level of day care charge

6.12 The current daily charge for attendance at a day care service for a stay that exceeds three hours is £2. Comparison with other Local Authorities that charge for day care shows that this is amongst the lowest charge, with averages amongst Authorities grouped in comparator clusters ranging from £9.77 to £12.14. The range of day care charges is very wide, from as little as £1, up to £30.60. Given the relatively high administrative burden of collecting this charge, consideration needs to be given to increasing the level to a higher figure from April 2009, to £5 per attendance. This would still be well below the average figures quoted above, but would raise additional revenue to help protect and extend services. The charging policy would still continue to ensure that a charge would only pay if service users' income were sufficiently high to enable them to meet this. However, the significant amount of opposition to this charge when it was proposed will also need to be taken into account when deciding on this change. This would generate approximately an extra £19,000 per annum however this takes no account of the disincentive effect of an increased charge.

### 7. ALTERNATIVE OPTIONS CONSIDERED

7.1 The Council can choose not to charge clients for social care services, but this option would place a significant strain on services and budgets. A range of other charging options are possible in accordance with Government guidance, but the Council's current charging policy, including the proposed amendments detailed within this report, is best felt to reflect the values of fairness, consistency and even-handedness, while at the same time raising sufficient revenue to help finance social care services.

### 8. IMPLICATIONS

- 8.1 There are no legal implications relating to the proposed changes.
- 8.2 The proposed changes, if implemented, should have a positive effect on income raised from charges for adult social care services.
- 8.3 Having a charging policy that is fair and fit for purpose is key to ensuring social care achieves its objectives of enabling vulnerable people to live safely and independently. The charging regime also plays an important part in ensuring the long-term sustainability of the financing of adult social care.

### 8. EXPECTED OUTCOMES

8.1 This report aims to consider the impact of the charging policy, obtain approval to make some relatively minor amendments to it in response to forthcoming changes to the provision of social care services, and seek Members views two specific issues relating to day care charges.

### 9. NEXT STEPS

- 9.1 The Scrutiny Committee is recommended to:
  - i) Consider and comment on the content of this report
  - ii) Consider the proposed amendments to the charging policy contained in this report, namely:
    - a) Under Individual Budgets, as now, clients are subject to a standard fairer charging assessment by the calculation method defined in the current charging policy. For clients whose assessed charge exceeds the value of their Individual Budget, or where their capital assets exceed the maximum capital limit (currently £22,250) the value of the Individual Budget will be zero however services may still be arranged by NHS Peterborough.
    - b) The couple rate for the disability related expenditure allowance be applied only where both members of the couple are in receipt of either Disability Living Allowance Care Component (Middle or Higher rate) or Attendance Allowance (Low or High rate)

- iii) Consider the issues of :
  - a) charging for day care attendance at services which are majority funded by the voluntary sector, and
  - b) the level of the day care charge
- iv) Make any additional recommendations for consideration by Cabinet

### 10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985)

Fairer Charging Policy for Home Care and other Non-residential Social Care Services. Counsel & Care's National Survey of Local Authority Care Charging & Eligibility Criteria 2008 Comparison of Local Authority Service User Contributions 2008-09

Health and Adult Social Care Scrutiny Panel	Agenda Item No. 6
25 November 2008	Public Report

### Report of the Chief Executive – NHS Peterborough

Report Author – Derrick Mortimer, Strategic Business Lead, Peterborough Community Services

Contact Details – 01733 758580

### NHS PETERBOROUGH 5 YEAR STRATEGIC PLAN

### 1. PURPOSE

For the Panel to be aware of the progress and structure of the Strategic Plan for NHS Peterborough (Peterborough Primary Care Trust), along with key priorities and consultation proposals.

### 2. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT

This report links to the Council's corporate priority to 'achieve the best possible health and well being'.

### 3. BACKGROUND

Primary Care Trusts are required to produce a 5-year Strategic Plan.

### 4. KEY ISSUES

The first draft of the Strategic Plan was submitted to the Department of Health at the end of October.

The Strategic Plan sets out the key priorities and initiatives that NHS Peterborough will be addressing over the coming years. These reflect the specific health and social care needs of our population – based on the Joint Strategic Needs Assessment, the Local Area Agreement, Annual Accountability Agreement as well as local and national targets.

### 5. IMPLICATIONS

The Strategic Plan sets out a challenging work plan for NHS Peterborough over the coming years, and provides an opportunity for NHS Peterborough to work with its partners to improve the wellbeing of the population.

### 6. CONSULTATION

It is proposed to consult on the Strategic Plan commencing January 2009, following initial sign-off from the Strategic Health Authority.

### 7. EXPECTED OUTCOMES

The Panel are asked to note the approach to be adopted, submitting any observations to the Chief Executive.

### 8. NEXT STEPS

Work on the initial draft of the Strategic Plan continues, with a Strategic Health Authority led "Panel Day" on 25 November. From this the SHA will identify areas for development before signing-off the draft. NHS Peterborough then propose to consult on the Plan from January 2009.

HEALTH & ADULT SOCIAL CARE SCRUTINY COMMITTEE	Agenda Item No. 7
November 25th 2008	Public Report

Report of:

Robert Ferris, Chief Operating Officer of Peterborough Community Services

Report Author: Anne Reeder Contact Details: 01733 758532

E-mail: anne.reeder@peterboroughpct.nhs.uk

### FUTURE ORGANISATIONAL ARRANGEMENTS FOR PETERBOROUGH COMMUNITY SERVICES

### 1. PURPOSE

The purpose of this report is for Committee to note the decision of the PCT Board regarding the long-term organisational model for Community Services.

### 2. BACKGROUND

- 2.1 NHS Peterborough asked for a business case recommending the preferred long term organisational form for the majority of services provided by Peterborough Community Services, to be produced for the PCT Board by November 2008.
- 2.2 A report outlining the process for identifying the preferred long term organisational model was presented to the Committee on September 2<sup>nd</sup> 2008.
- 2.3 A further report, confirming the outcome of the process and the recommendation going to the PCT Board on November 5<sup>th</sup> 2008, was presented to the Committee on October 14<sup>th</sup> 2008.
- 2.4 A Business Case was presented to the PCT Board on November 5<sup>th</sup> 2008 recommending that:
- 2.4.1 The preferred organisational model for Peterborough Community Services is a Community Foundation Trust for Peterborough
- 2.4.2 Peterborough Community Services, supported by NHS Peterborough and NHS East of England and in partnership with Peterborough City Council, will prepare to seek the Secretary of State's support to apply to become Peterborough Community Health and Social Care Foundation Trust.
- 2.5 The PCT Board agreed the recommendations subject to Cabinet approval.
- 2.6 Cabinet will be asked to agree the recommendations at its meeting on December 1<sup>st</sup> 2008.

### 3. KEY ISSUES

- 3.1 The Business case assessed three organisational models: Arms Length Trading Organisation, Community Foundation Trust and Social Enterprise.
- 3.2 Based on the evaluation of benefits and costs, the community foundation model scored the highest and is the recommended model.
- 3.3.1 Social care assessment and care management functions can only be delegated to statutory organisations. Social Enterprises are not statutory organisations and if this model had been chosen, Peterborough Community Services would not be able to provide fully integrated health and social care services.

### 4. IMPLICATIONS

- 4.1 By pursuing the CFT model the aim would be to achieve:
  - Services which deliver the best possible outcomes for local people
  - Increased contestability in the market resulting in higher quality and more cost effective services
  - Assurances that the PCT's 'duty of care' to its staff is fulfilled
  - Continuation of and further building upon the extensive partnership arrangements with the City Council
  - Delivery of key performance indicators
  - Further improvement in performance ratings
  - Sustainable service delivery

### 5. CONSULTATION

- 5.1 The findings of the Next Steps Public Consultation, approved by the Board in November 2007, were taken into account in the process to identify the preferred organisational model.
- 5.2 As part of the process for applying to become a CFT, two public consultations will be required:
  - Consultation by the PCT for the provider services to be established as an NHS Trust.
  - o Consultation by PCS to move from the NHS Trust status to a Community Foundation Trust
- 5.3 Both of these consultation processes will provide the Committee, the public, staff and other key stakeholders with the opportunity to support or reconsider the decision to apply to become a CFT.

### 6. EXPECTED OUTCOMES

This report is to ensure that the committee is aware of the PCT Board's decision subject to Cabinet approval on 15<sup>th</sup> December 2008.

### 7. NEXT STEPS

It is proposed to bring further reports to the committee and the progress towards CFT status as requested by the Committee.

### 8. BACKGROUND DOCUMENTS

Commissioning a Patient-Led NHS, (2005) Department of Health.

NHS Peterborough Business Case Recommending the Future Organisational Model for Peterborough Community Services

### 9. APPENDICES

None.

### HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL 25 NOVEMBER 2008

Agenda Item No. 8

**Public Report** 

### Report of the Director of Strategic Resources

Report Author – Liz Boome Contact Details – (01733) 452324

### ANNUAL HEALTH CHECK – HEALTHCARE COMMISSION RATINGS FOR LOCAL NHS TRUSTS

### 1. PURPOSE

To advise the Panel of the 2007/08 Annual Health Check ratings for local NHS Trusts published in October 2008 by the Healthcare Commission.

### 2. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT

This report links to the Council's corporate priority to 'achieve the best possible health and well being'.

### 3. BACKGROUND

- 3.1 The Healthcare Commission (HC) is an independent body responsible for reviewing the quality of healthcare and public health in England and Wales. In England, it is responsible for assessing and reporting on the performance of NHS and independent healthcare organisations.
- 3.2 A new system of assessment for the NHS, the annual health check, was introduced in 2006 (to replace the star ratings system) and all Primary Care Trusts (PCTs) and NHS Trusts are required to declare publicly the extent to which they met the 24 core standards set by the Government for the year from 1 April 2007 to 31 March 2008.
- 3.3 The annual health check looks at a much broader range of performance than the previous system of star ratings and enables the Healthcare Commission to paint a more comprehensive picture than ever before of what is happening in healthcare.
- 3.4 The performance of each healthcare organisation (acute, ambulance, mental health, learning disability and care trusts, including foundation trusts) is assessed by reference to government standards and targets. The standards are set out by the Department of Health and describe the basic, core standards which patients have a right to expect, such as safety and effective clinical care and the developmental standards that outline the level of quality to which healthcare organisations are expected to aspire.

### 4. LOCAL NHS TRUST RATINGS 2007/08

- 4.1 Results of the assessments are published each October by the Healthcare Commission. The overall performance rating is made up of two parts 'Use of Resources' which looks at how effectively a Trust manages its financial resources and 'Quality of Services' which is an aggregated score of performance against national standards and targets. The results for local NHS Trusts for 2007/08 are outlined below (with the previous years' score in brackets):
  - PETERBOROUGH PRIMARY CARE TRUST 2007/2008 rated FAIR for Quality of Services and FAIR for Use of Resources
- 4.2 Assessments look at how well healthcare organisations perform in areas of interest to patients, service users, carers and the public. The scores below show how many of these assessments were met by Peterborough Primary Care Trust. Most PCTs have two roles. They buy

(commission) services for the local population from other healthcare providers, including, hospital (acute) trusts. Most PCTs also provide healthcare services themselves to local people - for example community nurses. The Healthcare Commission assesses how well PCTs both provide and commission healthcare services.

<u>Safety and cleanliness</u> - This includes reducing the risk of infection, safeguarding children, handling medicines and equipment properly and disposing of waste safely.

### 11/12 assessments met

<u>Standard of care</u> - This includes whether the trust sees patients within set timeframes and makes its services equally available to everyone.

### 6/7 assessments met

<u>Waiting to be seen</u> - This includes the supervision and training for staff, whether the trust works with other organisations to meet patients' individual needs and whether it follows national quidelines.

### 3/4 assessments met

<u>Dignity and respect</u> - This includes whether the trust treats people as individuals, observes confidentiality, and has a transparent process that patients can access easily if they have a complaint.

### 9/11 assessments met

<u>Keeping the public healthy</u> - This includes whether the trust helps to improve the health of the local community, understands local people's health needs and promotes public health.

### 5/7 assessments met

<u>Good management</u> - This includes whether the trust treats staff fairly, stores information properly and carries out all the necessary checks before recruiting staff.

### 15/16 assessments met

<u>Commissioning services</u> - This includes how well the PCT buys (commissions) services for its local population, such as hospital care and other specialist treatment. Part of this commissioning work involves identifying local people's health needs and helping to develop services to meet their needs.

### 10/15 assessments met

<u>Planning for local improvement</u> - This includes how well the PCT performed in its plans to develop and deliver healthcare services in the area.

### 13/22 assessments met

- CAMBRIDGESHIRE AND PETERBOROUGH MENTAL HEALTH PARTNERSHIP NHS TRUST 2007/2008 - Rated EXCELLENT for Quality of Services and GOOD (fair in 2006/07) for Use of Resources
- 4.3 Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) has been rated among the best of all Trusts in the country by the Healthcare Commission and is one of just only four in the eastern region recognised nationally. The Secretary of State for Health, Alan Johnson, and the Chair of the Healthcare Commission, Prof Sir Ian Kennedy, sent a personal letter of congratulations to Karen Bell, Chief Executive of CPFT, congratulating her and everyone in the Trust on their performance after it received a rating of "excellent" for its services and "good" for its use of resources, putting it among the top 57 NHS Trusts in the country.
- 4.4 The scores below show how many of the assessments were met by the Trust.

<u>Safety and cleanliness</u> - This includes reducing the risk of infection, safeguarding children, handling medicines and equipment properly and disposing of waste safely.

### 10/11 assessments met

<u>Standard of care</u> - This includes whether the trust sees patients within set timeframes and make its services equally available to everyone.

### 10/11 assessments met

<u>Waiting to be seen</u> - This includes the supervision and training for staff, whether the trust works with other organisations to meet patients' individual needs and whether it follows national guidelines.

### 2/2 assessments met

<u>Dignity and respect</u> - This includes whether the trust treats people as individuals, observes confidentiality, and has a transparent process that patients can access easily if they have a complaint.

### 9/9 assessments met

<u>Keeping the public healthy</u> - This includes whether the trust helps to improve the health of the local community, understands local people's health needs and promotes public health.

### 4/4 assessments met

<u>Good management</u> - This includes whether the trust treats staff fairly, stores information properly and carries out all the necessary checks before recruiting staff.

### 14/14 assessments met

- EAST OF ENGLAND AMBULANCE SERVICE NHS TRUST 2007/2008 Rated WEAK (good in 2006/07) for Quality of Services and WEAK (fair in 2006/07) for Use of Resources
- 4.5 The scores below show how many of the assessments were met by East of England Ambulance Service NHS Trust.

<u>Safety and cleanliness</u> - This includes reducing the risk of infection, safeguarding children, handling medicines and equipment properly and disposing of waste safely.

### 10/11 assessments met

<u>Standard of care</u> - This includes whether the trust sees patients within set timeframes and make its services equally available to everyone.

### 8/8 assessments met

<u>Waiting to be seen</u> - This includes the supervision and training for staff, whether the trust works with other organisations to meet patients' individual needs and whether it follows national guidelines.

### 3/5 assessments met

<u>Dignity and respect</u> - This includes whether the trust treats people as individuals, observes confidentiality, and has a transparent process that patients can access easily if they have a complaint.

### 5/7 assessments met

<u>Keeping the public healthy</u> - This includes whether the trust helps to improve the health of the local community, understands local people's health needs and promotes public health.

3/3 assessments met

<u>Good management</u> - This includes whether the trust treats staff fairly, stores information properly and carries out all the necessary checks before recruiting staff.

### 13/14 assessments met

PETERBOROUGH AND STAMFORD HOSPITALS NHS FOUNDATION TRUST 2007/2008
- Rated WEAK (fair in 2006/07) for Quality of Services and EXCELLENT for Use of Resources

4.6 The scores below show how many of the assessments were met by Peterborough and Stamford Hospitals NHS Foundation Trust. The rating for quality of services was badly affected by the orthopaedic waiting list issue which was resolved at the end of December 2007. The Trust considers that this rating is incorrect and will be lodging an appeal.

<u>Safety and cleanliness</u> - This includes reducing the risk of infection, safeguarding children, handling medicines and equipment properly and disposing of waste safely.

### 13/13 assessments met

<u>Standard of care</u> - This includes whether the trust sees patients within set timeframes and make its services equally available to everyone.

### 8/9 assessments met

<u>Waiting to be seen</u> - This includes the supervision and training for staff, whether the trust works with other organisations to meet patients' individual needs and whether it follows national quidelines.

### 5/12 assessments met

<u>Dignity and respect</u> - This includes whether the trust treats people as individuals, observes confidentiality, and has a transparent process that patients can access easily if they have a complaint.

### 9/10 assessments met

<u>Keeping the public healthy</u> - This includes whether the trust helps to improve the health of the local community, understands local people's health needs and promotes public health.

### 5/5 assessments met

<u>Good management</u> - This includes whether the trust treats staff fairly, stores information properly and carries out all the necessary checks before recruiting staff.

### 17/17 assessments met

### 5. EXPECTED OUTCOMES

That the Panel notes and comments upon the information contained in the report.

### 6. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

The Annual Health Check 2007/08 ratings published by the Healthcare Commission on 16 October 2008.

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL	AGENDA ITEM No. 9
25 NOVEMBER 2008	PUBLIC REPORT

Contact Officer:	Liz Boome, Scrutiny Performance Officer	Tel. 452324

### FEEDBACK AND UPDATE REPORT

### 1. ORIGIN OF REPORT

1.1 This is a regular report to the Health and Adult Social Care Scrutiny Panel and forms part of the Panel's 2008/09 work programme.

### 2. PURPOSE AND REASON FOR REPORT

2.1 The report provides feedback on items considered or questions asked at previous meetings of the Panel. It also provides an update on matters which are of interest to the Panel or where members have asked to be kept informed of progress.

### 3. SAFE SHARPS DISPOSAL PILOT PROJECT

- 3.1 At its meeting on 22 July 2008 member were advised that It had come to the attention of the Chairman of this Panel that the recommendations of the joint working party comprising members from the Health Overview and Scrutiny Committee, the Environment Policy Overview Committee and the Community Wellbeing Policy Overview Committee which undertook a review of the safe disposal of sharps working group and the decision of the Cabinet member had not been implemented.
- 3.2 This was subsequently brought to the attention of Karen Kibblewhite, Community Safety and Substance Misuse Manager in October. The current position of the project has now been established and the work undertaken so far reviewed.
- 3.3 Up-to-date data has been collated to inform potential sites for the bins and ascertain whether the original proposed sites would still be the most effective. The top ten sites where drug-related litter has been reported have been identified and currently consultation is underway with stakeholders to identify which of these would be appropriate for the pilot and whether there are any additional sites which would benefit.
- 3.4 Since the inception of the project, the design of sharps bins has improved and discussions with manufacturers and with other areas who use public sites for sharps bins are underway, in order to ensure that the most effective bins are used, and also to investigate the possibility of using transferable bins. Funding has been identified for the bins.
- 3.5 Once sites have been agreed, and subject to sharps bins being delivered, the bins will be installed as soon as possible; a timescale of 3 months to complete the installation of bins is proposed.

In addition to the pilot project, three pieces of supporting work are currently taking place:

 Peterborough Drugs Service are undertaking proactive work with needle exchanges to encourage drug users to dispose of their needles and other injecting paraphernalia safely;

- The Safer Peterborough Partnership Team are developing processes to ensure that all drugrelated litter reports from the public and internally from partners are collated in a single place to enable a clear picture of hotspot areas;
- Drug workers from both Peterborough Drugs Service and from Peterborough DIP have visited sites where drug-related litter has been reported in order to attempt to engage with drug users and divert them into treatment.

### 4. BACKGROUND PAPERS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

HEALTH AND ADULTS SOCIAL CARE SCRUTINY PANEL	Agenda Item No. 10
25 NOVEMBER 2008	Public Report

### **Report of the Director of Strategic Resources**

Report Author – Liz Boome, Performance Scrutiny Officer Contact Details – Tel 01733 452324

### FORWARD PLAN - 1 DECEMBER 2008 TO 31 MARCH 2009

### 1. PURPOSE

For the Panel to note the latest version of the Forward Plan; agree any areas for inclusion within the Panel's work programme and submit any observations concerning the Plan to the Executive.

### 2. BACKGROUND

This is a regular report to the Health and Adult Social Care Scrutiny Panel, outlining the content of the Council's Forward Plan.

### 3. KEY ISSUES

- 4.1 The latest version of the Forward Plan is attached at Appendix 1. The Plan contains those key decisions, which the Leader of the Council believes that the Cabinet or individual Cabinet Member(s) will be making over the next four months.
- 4.2 The Panel may wish to include some of the items highlighted on the Plan onto their future work programme or to request additional information from the Executive before a decision is made. Any comments about the format of the Plan would also be welcomed.
- 4.3 In accordance with the Council's Executive procedure rules, the Cabinet or Cabinet Member will not make any key decision until at least five clear days after the receipt of the report relating to that decision. The Group representatives of the Scrutiny Committee are sent a copy of these reports at the same time as the Cabinet Member and any comments can be passed onto the Member before a decision is made.

### 4. EXPECTED OUTCOMES

That the Panel notes the latest version of the Forward Plan; agrees any areas for inclusion within the Panel's work programme and submits any observations concerning the Plan to the Executive.

### 5. NEXT STEPS

Areas agreed by the Panel to be included in the work programme and observations submitted to the Executive.

### 6. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

Peterborough City Council's Forward Plan for 1 December 2008 to 31 March 2009.

This page is intentionally left blank

## COUNCIL'S FORWARD PLAN PETERBOROUGH CITY

# DECEMBER 2008 TO 31 MARCH 2009

### PETERBOROUGH CITY COUNCIL

# FORWARD PLAN OF KEY DECISIONS - 1 DECEMBER 2008 TO 31 MARCH 2009

During the period from 1 December 2008 to 31 March 2009 Peterborough City Council's Executive intends to take 'key decisions' on the issues set out below. Key decisions relate to those executive decisions which are likely to result in the Council spending or saving money in excess of £500,000 and/or have a significant impact on two or more wards in Peterborough.

This Forward Plan should be seen as an outline of the proposed decisions and it will be updated on a monthly basis. The dates detailed within the Plan are plan supersedes the previous plan. Any questions on specific issues included on the Plan should be included on the form which appears at the back of the subject to change and those items amended or identified for decision more than one month in advance will be carried over to forthcoming plans. Each new Plan and submitted to Lindsay Tomlinson, Governance Support Officer, Chief Executive's Department, Town Hall, Bridge Street, PE1 1HG (fax 01733 452483). Alternatively, you can submit your views via e-mail to lindsay.tomlinson@peterborough.gov.uk or by telephone on 01733 452238.

Governance Support Officer using the form attached. For your information, the contact details for the Council's various service departments are incorporated The Council invites members of the public to attend any of the meetings at which these decisions will be discussed and the papers listed on the Plan can be viewed free of charge although there will be a postage and photocopying charge for any copies made. All decisions will be posted on the Council's website: www.peterborough.gov.uk. If you wish to make comments or representations regarding the 'key decisions' outlined in this Plan, please submit them to the

### NEW ITEMS THIS MONTH:

- Cultural Strategy
- Peterborough Housing Register and Allocations Policy
  - Ecohut Project
- Vendor Neutral Solution for Provision of Agency Staff

### be available from be available from be available from one week before one week before one week before Public report will the Governance Public report will Public report will the Governance he Governance Support Officer Support Officer Support Officer the decision is he decision is the decision is REPORTS made made Director of Adult Social Services and denise.radley@peterborough.gov.uk graeme.law@peterborough.gov.uk Strategic Growth & Development CONTACT DETAILS / REPORT john.blair@peterborough.gov.uk Strategic Planning Executive Head of Strategic Finance Tel: 01733 863825 Tel: 01733 384564 Denise Radley 01733 758444 **Graeme Law** Performance **AUTHORS** Report forms the basis of John Blair **DECEMBER - KEY DECISIONS** Cabinet in February 2009 Public consultation took be consulted September place in 2007; HASC to 2008 and October 2008 further consideration by Extensive consultation stakeholders, prior to appropriate member endorsement at full CONSULTATION will be undertaken involving relevant Executive recommendation to stakeholders and consultation with and subsequent forums. ull Council for endorsement This decision will be an **DECISION MAKER** Cabinet Cabinet Cabinet **DECISION** December December December **KEY DECISION REQUIRED DATE OF** 2008 2008 2008 include the Council's Capital Management Plan and Draft and Medium Term Financial To approve the approach to care to be part of the future provider model of the PCT and Peterborough Primary Agreement for adult social Peterborough City Council Implementation Scheme Strategy to 2011/12 to be Medium Term Financial Draft budget for 2009/10 Section 106 Planning consultation. This will Annual Accountability Budget 2009/10 and agreed as a basis for negotiating Planning Agreement between **Moving Forward** Plan to 2011/12 Strategy, Asset **Obligations** Obligations

Council Tax Base To agree the calculation of the council tax base for 2009/10	December 2008	Cabinet	Internal advice has been received from Finance and Legal Services. No formal consultation will take place regarding proposals	John Blair Head of Strategic Finance Tel: 01733 384564 john.blair@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Cultural Strategy  To agree a Cultural strategy incorporating a Cultural Vision, Sports Strategy, Library Strategy and Heritage Strategy and recommend approval by Council	December 2008	Cabinet Releving the serving states an serving serving the serving ser	ant stakeholders ing Community opment Scrutiny	Kevin Tighe Head of Cultural and Neighbourhood Services Tel: 01733 863784 kevin.tighe@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Peterborough Housing Register and Allocations Policy To agree additions to the Peterborough Housing Register and Allocations Policy: Unacceptable behaviour – clarification on rent arrears; Transfer applications; Refusal of offers	December 2008	Cabinet This decision will be an Executive recommendation to full Council	Peterborough Choice Based Lettings Operations Group; to Peterborough Choice Based Lettings Board; Community Development Scrutiny Panel	Adrian Chapman Head of Neighbourhood Services Tel: 01733 863887 adrian.chapman@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Section 44 Input to Regional Spatial Strategy (RSS) Review To give advice to East of England Regional Assembly on proposed review of the Regional Spatial Strategy to 2031	December 2008	Cabinet Member for Strategic and Regional Partnerships, Councillor Collins and Cabinet Member for Housing, Regeneration and Economic Development, Councillor Murphy	External and key stakeholders including neighbouring local authorities, land agents and chamber of commerce	Rob Brown Area Strategic Planning Manager Tel: 01733 863795 robert.brown@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made

Ecohut Project  To give authority to the lead partner (the Forestry Commission) to deliver the project to create a family woodland development for recreation and learning purposes	December 2008	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	Ufford Parish Council; Cambridgeshire Constabulary; Peterborough City Council; Natural Networks Partnership, Greater Peterborough Partnership; John Clare	Darren Sharpe Natural Environment Team Leader Tel: 01733 453596 darren.sharpe@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Riverside Community Sports Pavilion To appoint a contractor to build the Riverside Community Sports Pavilion.	December 2008	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	Riverside Residents' Association, ward councillors and potential user groups.	Paul Stevenette Programme Consultant Tel. 01733 452475 paul.stevenette@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Schedule of Rates for Capital Civil Engineering Works 2008 – 2010  To award a two year framework contract for the delivery of small and medium highway improvement works funded through the Local Transport programme	December 2008	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	Internal stakeholders as appropriate.	Stuart Mounfield Senior Engineer Transport and Engineering Services Tel. 01733 453598 stuart.mounfield@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
<b>Nene Bridge Refurbishment</b> To award contract for refurbishment	December 2008	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	All utility companies, Network Rail, Environment Agency, internal stakeholders, emergency services and transport groups.	Richard Cranwell Environmental Engineering Team Manager Environment and Community Services Tel. 01733 453504 richard.cranwell@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made

Future of Peterborough Professional Development 2008 Centre (PPDC) To consider options for the future utilisation of the site by the council	mber	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	Consultation with take place with relevant stakeholders including Ward Councillors	Richard Hodgson Head of Strategic Projects Tel. 01733 384535 richard.hodgson@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made
Vendor Neutral Solution for Provision of Agency Staff To agree a process for engaging with a managed service provider for agency staff	December 2008	Cabinet Member for Efficiency and Business Improvement, Councillor Scott	Details awaited	Chris Berry Business Transformation Consultant Tel: 07976 619906 christopher.berry@peterborough.gov.uk	Public report will be available from the Governance Support Officer one week before the decision is made

		JANUAR	Y - KEY DECISIONS	SI	
KEY DECISION REQUIRED DATE OF DECISION	DATE OF DECISION	DECISION MAKER	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	REPORTS
<b>Tourist Information</b> Service To determine delivery mechanisms for tourist information services	January 2009	Cabinet Member for Community Services, Councillor Lee	Consultation will take place with relevant stakeholders as appropriate, including staff, trades unions and the Community Development Scrutiny Panel	Linda Wills Tourism Services Manager Tel: 01733 863835 <u>linda.wills@peterborough.gov.uk</u>	Public report will be available from the Governance Support Officer one week before the decision is made

	REPORTS	Public report will be available from the Governance Support Officer one week before the decision is made	Public report will be available from the Governance Support Officer one week before the decision is made
SNo	CONTACT DETAILS / REPORT AUTHORS	John Blair Head of Strategic Finance Tel: 01733 384564 john.blair@peterborough.gov.uk	Richard Astle Director, Greater Peterborough Partnership Tel: 01733 865042 richard@gpp-peterborough.org.uk
FEBRUARY - KEY DECISIONS	CONSULTATION	This decision follows consultation with stakeholders about the draft MTFS, presented to Cabinet in December.	Relevant stakeholders and fora including Scrutiny Committee
FEBRUAR	DECISION MAKER	This decision follows consultation with This decision will be an stakeholders about the Executive recommendation to draft MTFS, presented to Cabinet in December.	Leader of the Council and Cabinet Member for Finance and Human Resources, Councillor Peach
	DATE OF DECISION	February 2009	February 2009
	KEY DECISION REQUIRED DATE OF DECISION	Budget 2009/10 and Medium Term Financial Plan to 2011/12 To agree proposals for the Council's budget and corporate strategy in accordance with the Council's procedure rules. This will include approval of the Council's Capital Strategy, the Asset Management Plan, the Adult Social Care Charging Policy and the Draft Annual Accountability Agreement between Peterborough City Council and Peterborough	Refreshed Local Area Agreement (LAA) To sign off the refreshed LAA prior to its submission to the Government Office

	MARCH	- KEY DECISIONS	SN	
KEY DECISION REQUIRED DATE OF DECISION MAKER DECISION	DECISION MAKER	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	REPORTS
	There are currently n	There are currently no key decisions scheduled for March.	ed for March.	

# CHIEF EXECUTIVE'S DEPARTMENT Town Hall, Bridge Street, Peterborough, PE1 1HG

Communications

Strategic Growth and Development Services

Legal and Democratic Services

Human Resources

Policy and Research

Economic and Community Regeneration

Housing Strategy Drug Intervention Programme and Drug and Alcohol Team

# CITY SERVICES DEPARTMENT Nursery Lane, Fengate, Peterborough PE1 5BG

Property Services

Building & Maintenance

Streetscene and Facilities

Finance and Support Services

# STRATEGIC RESOURCES DEPARTMENT Director's Office at Town Hall, Bridge Street, Peterborough, PE1 1HG

Finance

Internal Audit

Information Communications Technology (ICT)

**Business Transformation** 

Performance and Programme Management

Strategic Property

**Customer Services** 

## CHILDRENS' SERVICES DEPARTMENT Bayard Place, Broadway, PE1 1FB

Families and Communities

Commissioning and Performance

Learning

Resources

## OPERATIONS DEPARTMENT\_Bridge House, Town Bridge, PE1 1HB

Planning Services

**Building Control Services** 

Environmental and Public Protection

Cultural Services

Transport and Engineering Services Emergency Planning

Occupational Health

City Centre Services

This page is intentionally left blank

### HEALTH AND ADULTS SOCIAL CARE SCRUTINY PLAN WORK PROGRAMME 2008-9

		WORK PROG	<b>WORK PROGRAMME 2008-9</b>		
Date of Meeting	Item (including what the Panel is requested to do)	Item referred by	Type of Scrutiny Activity	Relevant Terms of Reference	Expected Outcome
6 January 2009 (Papers despatched – 23 Dec)	Budget 2009/10  To consider and comment on the Executive's proposals for the 2009/10 budget, including the Draft Annual Accountability Agreement.  Contact Officer: John Harrison	Constitution	Policy Development	To comment on the relevant sections of the annual budget proposals and Corporate Strategy.	Recommendations to the Executive
	Annual Review of Performance To consider and comment upon the annual review letter on Adult Social Care performance from Commission for Social Care Inspections (CSCI)  Contact Officer: Denise Radley Director of Adult Social Services and Performance	Officer	Performance Management	To monitor the performance of the Health and Adult Social Care portfolio through regular performance monitoring reports	Identification of any areas of concern
	Budgetary Monitoring Report  To receive a budgetary report for NHS Peterborough Contact Officer: David Bacon, Director of Finance & Contracts, PCT	NHS Peterborough	Performance Management	To monitor progress on the Council's priority of achieving the best possible health and well being.	Comments to NHS Peterborough
	Update on Adult Protection  To consider and comment on the six monthly report and identify any areas of concern.  Contact Officer: Denise Radley	Officer	Performance Management	To monitor progress on the Council's priority of achieving the best possible health and well being.	Identification of any areas of concern

### HEALTH AND ADULTS SOCIAL CARE SCRUTINY PLAN WORK PROGRAMME 2008-9

	-	WORN PRO	WORN FROGRAMME 2000-9		
Date of Meeting	Item (including what the Panel is requested to do)	Item referred by	Type of Scrutiny Activity	Relevant Terms of Reference	Expected Outcome
17 February	Standards for Better Health (Annual Health Check)	PPCT/P&S Hospitals/Mental	Scrutiny of external bodies or	To undertake all of the Council's	Recommendations to NHS Trusts
Z009 (Papers despatched – 9 Feb)	To consider the approach to be adopted for receiving and commenting on the Standards 4 Better health	Health Trust	agencies	statutory functions in accordance with Section 7 and associated	
	Contact Officer: Liz Boome			regulations of the Health and Social Care Act 2001	
	Quarterly Performance Report on Adult Social Care Services in Peterborough	Panel	Performance Management	To monitor the performance of the Health and Adult	Identification of any areas of concern
	To receive an update on progress and key achievements on the objectives within the Annual Accountability Agreement 2007/08 and performance against other social care targets			Social Care portfolio through regular performance monitoring reports	
	Contact Officer: Tina Hornsby				
	Accommodation and Housing Related Support Needs for Older People	NHS Peterborough	Scrutiny of external bodies or agencies	To consider any matter the Panel considers	Comments to NHS Peterborough
	Update on progress			appropriate	
	Contact Officer(s) – Denise Radley/Alison Reid				

### HEALTH AND ADULTS SOCIAL CARE SCRUTINY PLAN WORK PROGRAMME 2008-9

Date of Meeting	Item (including what the Panel is requested to do)	Item referred by	Type of Scrutiny Activity	Relevant Terms of Reference	Expected Outcome
31 March 2009 (Papers despatched – 23 March)	Standards for Better Health (Annual Health Check)  (i) To endorse the Panel's comments for inclusion with all local NHS Trust submissions to the Healthcare Commission  (ii) To consider the declarations of compliancy of all the local NHS Trusts prior to their submission to the Healthcare Commission  Contact Officer: Liz Boome	Officer and NHS Trusts	Scrutiny of external bodies or agencies	To undertake all of the Council's statutory functions in accordance with Section 7 and associated regulations of the Health and Social Care Act 2001	Recommendations to NHS Trusts
	Progress Report on the Teenage Pregnancy Strategy To consider progress made in addressing the high rates of teenage pregnancy in Peterborough  Contact Officer: Jo Melvin	Panel	Performance management	To monitor the performance of the Health and Adult Social Care portfolio through regular performance monitoring reports	Comments to officers
	Update on Adult Protection  To consider and comment on the six monthly report and identify any areas of concern.  Contact Officer: Denise Radley	Officer	Performance Management	To monitor progress on the Council's priority of achieving the best possible health and well being.	Identification of any areas of concern

### **HEALTH AND ADULTS SOCIAL CARE SCRUTINY PLAN WORK PROGRAMME 2008-9**

### tems to be scheduled into the work programme

### **Adult Social Care**

- Developments with the voluntary sector engagement and support provided (Director of Adult Social Care)
- Preventative work and eligibility criteria thresholds
- Hospital Discharges social care provision following discharge (PPI Forum)
- Services for Carers emphasis on provision of services for young carers დ 4. დ
  - Telecare Strategy (Ellen White)

### Health

- 18 Week Patient Pathway to consider a progress report (Trish McHugh)
- Our NHS, Our Future Review Lord Darzi's report (SHA Review)
- NICE alcohol schools draft guidance (Sue Mitchell, Christine Greer)
- Practice based commissioning progress in Peterborough (possible presentation by participating GP practice)
- Peterborough Hospitals NHS Foundation Trust progress on implementation of Greater Peterborough Health Investment Plan (annual update)
  - Future reconfiguration of Children's Services
    - Spearhead PCT
- Remodelling of Diabetes service
  - Expert Carers Programme
- End of life care networks
  - 11. Out of hours service
    - Choose and book
- 15. Ambulance Service future strategic direction

3. Learning disabilities service – communications techniques to reach migrant workers and other hard to reach groups

- 14. CFS/ME services
- Chiropody Services
   Hospital Hygiene (report on follow-up by Healthcare Commission).

### Regular Items

1. PPCT quarterly performance reports