

SCRUTINY COMMISSION FOR HEALTH ISSUES

TUESDAY 14 JULY 2009

7.00 PM

Bourges and Viersen Rooms
Town Hall
Peterborough

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 Held on 31 March 2009**

1 - 4

4. **New Dental Initiatives**

5 - 34

To receive a report and presentation from NHS Peterborough on new dental initiatives.

5. **Hospital Complaints Process**

35 - 50

To scrutinise the complaints process of the Peterborough and Stamford Hospitals NHS Foundation Trust.

6. **Swine Flu**

51 - 54

To receive a report on the national and local situation and update the Commission on action being taken.

7. **Peterborough Safeguarding Adults Report - February 2009 to May 2009**

55 - 60

To consider the latest quarterly report.

8. **Forward Plan of Key Decisions**

61 - 76

To consider the latest version of the Forward Plan.

9. **Work Programme**

77 - 80

To approve the Commission's current work programme

10. Date of Next Meeting

Tuesday 8 September 2009 in the Bourges and Viersen 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 Lindsay Tomlinson on 01733 452238 as soon as possible.

Emergency Evacuation Procedure – Outside Normal Office Hours

In the event of the fire alarm sounding during the meeting you should vacate the building by way of the nearest escape route and proceed directly to the assembly point in front of the Cathedral. The duty Beadle will assume overall control during any evacuation, however in the unlikely event the Beadle is unavailable this responsibility will be assumed by the Committee Chair.

Committee Members:

Councillors: B Rush (Chairman), M Burton (Vice-Chairman), D Fower, P Nash, J Peach and K Sharp

Substitutes: Councillors: D Harrington, W Trueman and R Dobbs

Further information about this meeting can be obtained from Lindsay Tomlinson by telephone - 01733 452238 or by email – lindsay.tomlinson@peterborough.gov.uk

**MINUTES OF A MEETING OF THE HEALTH & ADULT SOCIAL CARE SCRUTINY PANEL
HELD ON
TUESDAY 31 MARCH 2009 IN THE BOURGES/VIERSEN ROOM - TOWN HALL**

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

Also Present: Councillor Diane Lamb

Officers Present: Angela Bailey, Chief Executive, NHS Peterborough
Maureen Phillips, Assistant Director, Family and Communities
Jo Melvin, Teenage Pregnancy Adviser
Ruth Griffiths, Lawyer
Nik Patten, Peterborough & Stamford Hospitals NHS Foundation Trust
Jane Pigg, Peterborough & Stamford Hospitals NHS Foundation Trust
Mark Bush, Peterborough & Stamford Hospitals NHS Foundation Trust
Angela Broekhuizen, Peterborough & Stamford Hospitals NHS Foundation Trust
Dr Rupert Bankart, 3Well Medical
Rob Longhurst, 3Well Medical
Louise Tyers, Performance Scrutiny Manager
Lindsay Tomlinson, Senior Governance Officer

1. Apologies for Absence

There were no apologies.

2. Declarations of Interest and Whipping Declarations

There were no declarations.

3. Minutes of the Meeting held on 17 February 2009

The minutes of the meeting held on 17 February 2009 were approved subject to the minutes being amended to show Councillor Dobbs in attendance rather than Councillor Goodwin.

4. New Primary Care Centre

The Panel received a presentation from representatives of 3Well Medical on the proposed new primary care centre at Alma Road, Peterborough. The ethos of 3Well was “whole person care” with an emphasis on quality of care, working with the community to ensure that provision was in line with that expected by patients. The centre would offer unprecedented accessibility with patients being able to see a doctor with or without an appointment. In addition a “docbus” would be in use within the area which would visit various locations on a fixed timetable. The building would be welcoming and comfortable and would offer rooms for the use of the community.

Observations and questions were raised and responses given including:

- What hours will be offered for home visits?
- We would like to offer visits throughout the day but will need to look at the logistics.
- Will the other contracts being taken on by 3Well be linked to this practice?
- We are taking on the contract for Botolph Bridge practice centre and would like to see the 2 centres working closely together whilst keeping retaining their

individuality to reflect the community. It does mean that there will be administrative and doctor support and backup to ensure continuity of care.

- Will there be any specialist services for the elderly or for mental health care?
- We will be offering services that support and meet the needs of people of all ages. We are looking to offer mental health services from the practice.
- Are you recruiting new doctors for the practice?
- We have advertised and have received a significant number of high quality applicants. We will be interviewing shortly and will seek to recruit doctors that fit with our ethos.
- Will there be a pharmacy provision within the centre?
- We are currently in discussions with the PCT about the best way to offer pharmacy services.

ACTION AGREED

The Panel noted the presentation and thanked representatives from 3Well Medical for attending.

5. Peterborough and Stamford Hospitals Trust

The Panel received a presentation from the Hospitals Trust on its performance, its strategy for 2008-2013 and progress on the new Peterborough City Hospital which was due to open in 2010.

Observations and questions were raised and responses given including:

- The presentation made reference to a woman and child centre within the new hospital – what will this mean?
- It will provide for a woman and child sensitive area with a separate entrance. We are trying to provide a specific environment that will be less fearful for children.
- Are you losing the battle against MRSA?
- No, our MRSA figures are usually very good. We have a number of measures in place aimed at improving our performance – the hospitals are physically cleaner than they have ever been. The new hospital will provide 60% single rooms which will help greatly.
- What will happen to the Memorial Wing at the current hospital?
- We are looking to sell the site to raise income to help improve services. The site is of no architectural interest but we would like to take all the artefacts to the new building.
- Will moving facilities out to the community affect the hospital's viability?
- No, it shouldn't do.
- Are there plans to improve the hospital's carbon footprint?
- We have gone a long way to ensure sustainability and all facilities are tested against environmental standards. We are currently looking at recycling and waste issues.
- Will the car-share scheme be continuing?
- We are hoping to extend the scheme and will provide more dedicated spaces for patients and visitors.

ACTION AGREED

The Panel noted the presentation.

6. Progress on the Teenage Pregnancy Strategy

The Panel received a presentation on progress to date on the teenage pregnancy strategy. The national teenage pregnancy target was a 55% reduction in teenage pregnancies by 2010. This was a challenging target and one which was unlikely to be met nationally,

according to the latest national data published in February, with only the current year remaining of the 10 year strategy.

Peterborough's latest teenage pregnancy data had been released in February 2008 and related to the calendar year 2007. This gave a provisional rate of 48.5 conceptions per 1,000 15-17 female population which was a 16.7% reduction from the baseline. This equated to 155 conceptions (down from 190 in 2006 and 185 in the baseline year). The proportion of conceptions leading to abortion was 41% for under 18s (51% nationally). Accordingly, the local area agreement (LAA) Year 1 target of 8% reduction had been exceeded.

However, teenage pregnancy remained a significant issue for Peterborough as its rates were still above regional and national averages. Locally, 16 of 24 wards had rates higher than the national average. The trajectory to target remained very challenging with the need to reduce conceptions from 155 to 83 by end of 2010.

Peterborough had received a positive Teenage Pregnancy National Support Team (NST) visit in October 2008. The strategy had been examined in the newly created Greater Peterborough Solution Centre, the findings of which had been presented to the NST. The team had endorsed the solution centre recommendations and made a number of additional recommendations which were currently being implemented.

Observations and questions were raised and responses given including:

- Why do you target the 19-25 age group?
- Evidence shows that the longer pregnancy is delayed, the better the outcomes.
- There seem to be a lot of "buzz words" in use but can we be confident that we are concentrating on what we will be delivering?
- We are redesigning over the next 3 months the service we provide. Services we have provided in the past have not made significant impact. We have looked at high performing authorities to see why they are successful and have put in place many of their strategies.
- Who will be providing advice to young people and where/when will it be provided?
- There are many services already being provided such as school based sexual health education. We have a specialist nurse in post to deal with young people who have already gone through pregnancy. We are waiting to appoint to an NHS post to provide a contraceptive nurse to encourage access to long term contraception. All our providers are specially trained. We want to make sure we make services available to the most vulnerable people.
- What is being done to ensure that young people who have been excluded from school are being monitored?
- We have good tracking and follow-up rates. The number involved is very low.
- Is support given to parents and grandparents?
- They are a key strand to the strategy. We need to empower parents to feel confident and comfortable talking to their children about these issues.
- How will you tackle those young people who think that having a baby will help them to sort out their lives?
- We have developed the service around them. We need to show them that perception is different from reality and we need to educate them about the realities.

ACTION AGREED

The Panel noted the report.

7. Feedback and Update Report

The Panel received updates on the following:

- Annual Health Check Submissions
- Budget 2009/10 – Out of Area Placements

ACTION AGREED

The Panel noted the report.

8. Forward Plan of Key Decisions

The Panel received the Council's Forward Plan which outlined forthcoming Executive Decisions for the period April to July 2009.

ACTION AGREED

The Panel noted the report.

The meeting began at 7.00pm and ended at 9.20pm

CHAIRMAN

| | |
|--|--------------------------|
| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 4 |
| 14 July 2009 | Public Report |

Report of the Peterborough Primary Care Trust

Report Author – Jane Freeman

Contact Details – jane.freeman@peterboroughpct.nhs.uk

NEW DENTAL INITIATIVES

MINOR ORAL SURGERY ENGAGEMENT STRATEGY

1. PURPOSE

To provide an update to members as requested. There will be a presentation at the meeting (copy of slides attached).

2. RECOMMENDATIONS

The Commission is recommended to review the information and make any appropriate recommendations.

3. BACKGROUND

In May 2007 a Project Mandate was approved by the Board of Peterborough PCT regarding the establishment of a Community Based Intermediate Oral Surgery Service, (subsequently known as the Minor Oral Surgery (MOS) Pilot Service) to operate for one year at the Peterborough Dental Access Centre (PDAC) from August 2007. This service was initiated to provide an appropriate, cost effective, alternative setting to secondary care in which patients could access minor oral surgery procedures. Minor oral surgery is a specialised branch of dentistry and involves such procedures as the removal of buried wisdom teeth, roots and teeth that cannot easily be removed with forceps. In March 2007 the demand for minor oral surgery procedures at Peterborough and Stamford Hospitals Trust (PSHFT) outstripped capacity to an extent that the 18 week pathway was in danger of being breached. The Pilot Service reduced waiting times for patients and supported the delivery of the 18 week referral to treatment care pathway.

A patient satisfaction audit conducted in February 2008 revealed that the MOS Pilot Service was very well received by patients accessing the service.

A Clinical Review of minor oral surgery referrals to the MOS Pilot Service and PSHFT carried out by a Consultant in Dental Public Health and a Clinical Lead Dentist working for Peterborough Community Services was completed in September 2008. This Review assessed whether patients who require minor oral surgery procedures were being treated in the most appropriate setting. The Review found that 80% of patient referrals made to the MOS Pilot were appropriate compared to 52% of referrals to PSHFT, and that use of a Referral Form by dentists to refer patients to the Pilot service resulted in their referrals being more complete as regards administrative and clinical details of the patient. Its findings supported a report that was taken to the Professional Executive Committee and Board of NHS Peterborough in which it was proposed that a primary care Minor Oral Surgery Service be procured for the population of Peterborough.

This report was approved by the Board in January 2009 and the procurement process was initiated. The Pilot Service operating at PDAC has been extended until March 2010 to ensure ongoing patient care whilst the new Service is procured.

An engagement exercise is taking place between January and July 2009 with a wide range of

stakeholders

The aim/purpose of this strategy is therefore:

- To ensure that the PCT meets its statutory duty in relation to Section 242 of the National Health Service Act of 2006.
- To ensure communication and engagement is integral to decision making regarding the future development of the Minor Oral Surgery Service
- To ensure that all communication and involvement material is consistent, accurate and timely.
- To ensure that all communication material is designed for the intended audience in line with the PPCT Producing Information for the Public policy.

The purpose of this strategy is to support this process and explain how identified stakeholders will be consulted.

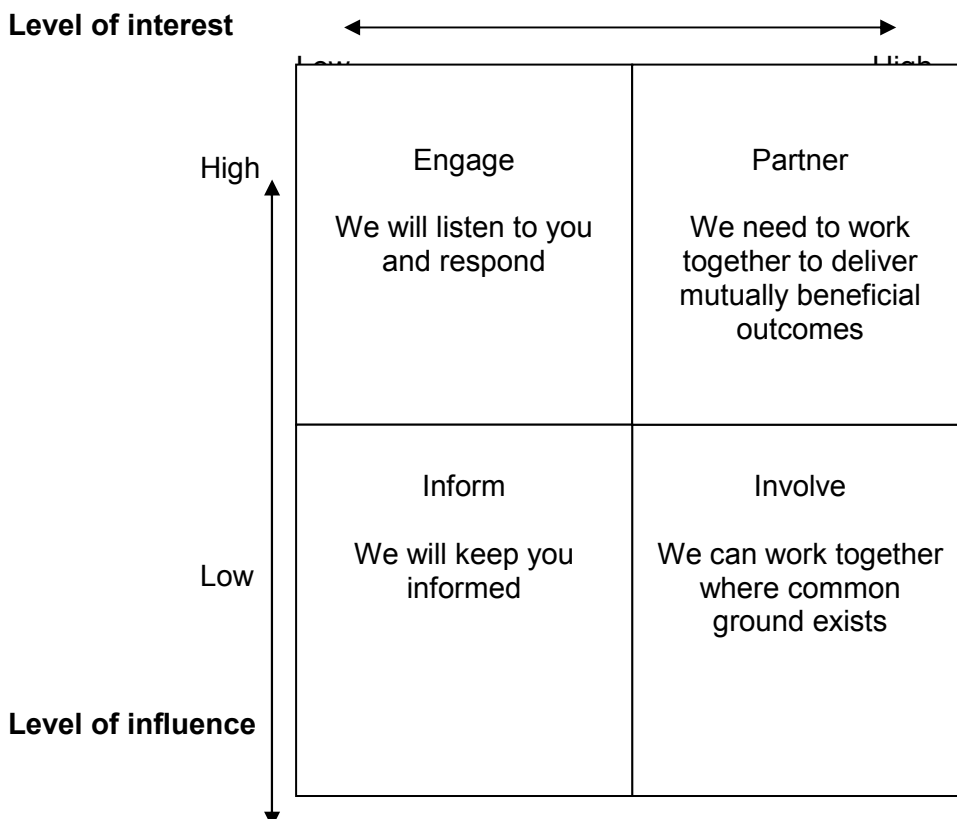
1. Communication engagement and involvement objectives

- To ensure that key stakeholders, partners, and staff are kept fully up-to-date and have the opportunity to be involved in the Minor Oral Surgery Service
- To manage, through engagement, expectations of stakeholders, partners and staff in the relation to the Minor Oral Surgery Service
- To reduce the risk of misinformation.

2. Stakeholders

A stakeholder mapping exercise was conducted against the following chart developed by Johnson, G, Scholes, and K Whittington (2005).

The chart maps stakeholders into four groups: consult, partner, inform, involve, which determines the level of communication and involvement with them. Stakeholders may move as the consultation proceeds, so it will be important to regularly review communication with them.



3. Timeframe

| Activity | Date |
|----------------------------------|-------------------------------|
| Pre-consultation briefings | September 2008 – January 2009 |
| Public consultation | January – July 2009 |
| Board decision | January 2009 |
| Implementation of Board decision | March 2010 |

NB: The above timeframe may be subject to change

4. Messages

Peterborough Primary Care Trust (PCT) is exploring the establishment of a Minor Oral Surgery Service along the following lines:

Patients who require minor oral surgery procedures, such as the removal of buried wisdom teeth, roots and teeth that cannot easily be removed with forceps, can receive their treatment

- from a Specialist Practitioner
- working in a non-hospital setting
- in a timely, cost-effective manner

5. BACKGROUND DOCUMENTS

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

None

6. APPENDICES

Appendix 1 – Stakeholder Mapping

Appendix 2 – Approach

Appendix 3 – Resources

Appendix 4 – Evaluation

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Appendix 1

Stakeholder mapping

| Partner |
|--|
| NHS Peterborough Board |
| PPCT Professional Executive Committee |
| Peterborough City Council Scrutiny Commission for Health Issues |
| Peterborough LINK |
| NHS Public Consultation Forum and Contacts from Stakeholder Database |
| NHS Peterborough Project Group |
| Peterborough & Stamford Hospitals NHS Foundation Trust |
| Peterborough Dental Access Centre Frontline Staff – (staff directly affected) |
| East of England Specialist Commissioning Group |
| Consultant in Dental Public Health, Cambs and Peterborough Public Health Network |
| Joint Forum |

| Engage |
|--|
| Local Dentists/Cambs and Peterborough Local Dental Committee (LDC) |
| Local GPs/Practice Based Commissioning Sub Group (PBCSG)/ Localities Group |
| Cambridgeshire and Peterborough Oral Health Advisory Group |
| Staff at Paston Health Centre |
| Dental Commissioning Leads in neighbouring PCTs |

| Involve |
|----------------------------|
| Citizens Advice Bureau |
| City Care Centre/Alma Road |
| |

| Inform |
|---|
| East of England SHA |
| Wider Population of Peterborough |
| Local Media |
| Pharmacists |
| NHS Choices Website – (Hazel Bell - NHS Peterborough updates) |
| Cambridgeshire & Peterborough Mental Health Partnership NHS Trust |

Appendix 2 Approach

Partner – ensure joint ownership with stakeholders

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|-------|---|---------|
| NHS Peterborough Board | | | | |
| Board members will have an open invitation to public engagement events | BG | SS/JF | Routine as appropriate | |
| Board members will receive regular updates on Project | BG | SS/JF | Next Public Board meeting 6 th May, then 1 st July then 2 nd September | |
| Suggestion from SS that future reports to Board might be via an organisation –wide Procurement Board | BG | SS/JF | 17 th June 2009 | pending |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|-------|------------------------------|---------|
| PPCT Professional Executive Committee | | | | |
| Decision to procure new MOS Service | BG | SS | 17 th December 08 | |
| Members will receive regular updates | BG | SS/JF | Awaiting decision re dates | |
| Suggestion from SS that future reports might be via an organisation-wide Procurement Board | BG | SS/JF | | pending |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|------|--|---------|
| Peterborough City Council Scrutiny Commission for Health Issues | | | | |
| Informed of Minor Oral Surgery Project and progress | LT | JF | Attending at 7.00pm on Tuesday 14 th July | pending |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|---------------------------------------|-----------|------|---|---------|
| Peterborough LINK | | | | |
| Inform/update on Project and progress | JLC/CL | JLC | Awaiting confirmation of date to attend. Informed cannot attend on 9 th June as provisionally arranged | pending |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|-------|---------------------------|--------|
| NHS Public Consultation Forum and Contacts from Stakeholder Database | | | | |
| Contact letter to all names listed on NHS PCF database who had expressed an interest in dental issues | JF/LH | GA/JF | 17 th April 09 | |
| All patient stakeholders who responded invited to Market event | JF | JF | 28 th April 09 | |

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|--|----------|-------|---------------------------------|---------|
| Subsequent engagement with patient stakeholders recorded below as NHS Peterborough Project Group | | | | |
| Project shared with forum | CR/JLC | | Attending 17 th Sept | pending |
| Meeting with patient stakeholder and GA to discuss service specification and take feedback. | JF/GA/LH | JF/GA | 23 rd June 09 | |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|------------------|-------------|------------------------------|---------------|
| NHS Peterborough Project Group | | | | |
| Project outline, procurement team agreed | JF/LH | AP/JF | 9 th February 09 | |
| Patient involvement, Premises identified, Market Event agreed | JF/LH | AP/JF | 26 th February 09 | |
| Patient Care pathway | JF/LH | AP/JF | 25 th March 09 | |
| Financial modelling, programme for Market Event, Procurement process, TUPE, out of area referrals to MOS service | JF/LH | AP/JF | 30 th April 09 | |
| Provider Market Event. Local and national potential providers in attendance, along with 3 patient stakeholders from NHS PCF | JF/LH | SS/JR/JF | 1 st May 09 | |
| Patient stakeholder roles, premises issues, procurement process and timelines | JF/LH | DS/JF | 19 th May 09 | |
| Site visit to Paston premises to evaluate suitability as potential site for MOS service, patient stakeholders, architect and dental practice advisor in attendance | JF/LH | JF/JMR/CP | 28 th May 09 | |
| Welcome to 2 new patient representatives, feedback from Paston visit, service spec. development, PQQ evaluation and Bidder Day end of July | JF/LH | AP/JF | 4 th June 09 | |
| ISPO development, evaluation process for | JF/LH | AP/JF | 18 th June 09 | ongoing |

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| PQQs, Identified need to arrange meeting between JF, GA and patient stakeholders to discuss ISPO service spec. in more detail | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|-----------|------------------------------|--------|
| Peterborough & Stamford Hospitals NHS Foundation Trust | | | | |
| Joint Clinical Group Meeting – discussion of proposals for new MOS service | TJ | SS/KaH/CM | 22 nd December 08 | |
| Discussion with CM re new procurement | JF | JF | 9 th April 09 | |
| Attendance by CM and CW at Provider Market Event | JF | SS/JF/JMR | 1 st May 09 | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|----------|---------------------------|---------|
| Peterborough Dental Access Centre Frontline Staff – (staff directly affected) | | | | |
| Decision to extend Pilot Service to March 2010 | | AP/NA | March 09 | |
| Consultation re need for TUPE | | JF/NG/CP | April 09 | |
| Confirmation that TUPE will not apply | | CP/NG | 30 th April 09 | ongoing |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|------|---|--------|
| East of England Specialist Commissioning group | | | | |
| Meeting with MH to discuss MOS procurement | JF | JF | 12 th January 09 | |
| Discussions MH re timetable | JF | JF | 9 th February 09 | |
| Discussions MH re documentation | JF | JF | 11 th March 09 | |
| Email exchanges with PW re Market event | JF | JF | February/March 09 | |
| Meeting MH re Market Event | JF | JF | 25 th March 09 | |
| Meeting with MH and IG, new contact at EoE procurement hub to discuss procurement process and Market event | JF | JF | 8 th April 09 | |
| Meeting IG re 2 stage procurement process | JF | JF | 21 st April 09 | |
| Extensive conversations and meeting with IG re | JF | JF | 30 th April/1 st May 09 | |

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|---|----|----|--|---------|
| Market event strategy and procurement route | | | | |
| Email exchanges re final versions of MOI and PQQ | JF | JF | 5 th – 7 th May 09 | |
| Meeting IG re premises solution | JF | JF | 19 th May 09 | |
| Meeting IG re ISPO, premises and procurement timetable | JF | JF | 27 th May 09 | |
| Meeting IG and JMR re ISPO Spec | JF | JF | 11 th June 09 | |
| Meeting IG re PQQ evaluation process and ISPO documentation | JF | JF | 17 th June 09 | ongoing |

| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|----------|--------------------------|---------|
| Consultant in Dental Public Health, Cambs and Peterborough Public Health Network | | | | |
| Clinical Review on Minor Oral Surgery Referrals | JF | SS/AC/JF | Completed November 08 | |
| Discussion re service specification, triage element to service or not | JF | JF/AC | 7 th April 09 | |
| Discussion re premises option for new service | JF | JF/AC | 16 th June 09 | ongoing |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|----------|-------------------------|----------|
| Joint Forum | | | | |
| Consultations with CP and NG re TUPE issues for DAC staff. Nil TUPE issues | JF | JF/CP/NG | March/April 09 | |
| Confirmation CP that nil need to attend Joint Forum | JF | CP/JF | 28 th May 09 | complete |

Engage – ensure that stakeholders are engaged

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|-------|-----------------------------|--------|
| Local Dentists/LDC | | | | |
| Consultation with LDC re proposed care pathway | JF | JF/CS | 14 th January 09 | |

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|--|-------|-------|--------------------------|---------|
| Invitation to all local dentists to attend a "Meet the Commissioners" evening. MOS procurement discussed | JF/LH | SS | 2 nd April 09 | |
| Open invitation by email to local dentists to comment upon pathway and service | JF | SS/JF | 6 th April 09 | |
| Invitation to all local dentists to attend MOS Market event, 4 attended | JF/LH | JF | 1 st May 09 | ongoing |

| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|-------|------------------------------|---------|
| Local GPs/PBCSG/Localities | | | | |
| Consultation with PBCSG re patient care pathway and GP referrals to service | LH | AP/JF | 11 th February 09 | |
| Consultation with Localities Group as above | LH | AP/JF | 25 th March 09 | pending |

| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|------|------------------------------|---------|
| Cambridgeshire and Peterborough Oral Health Advisory Group | | | | |
| Discussion of proposed new service and care pathway, 2 Patient stakeholders present | AC | AC | 11 th February 09 | |
| Update re the procurement process. | AC | JF | 10 th June 09 | pending |

| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|------|-------------------------|--------|
| Staff at Paston Health Centre | | | | |
| Meeting with KR regarding potential use of dental suite at Paston Health Centre | JF | JF | 19 th May 09 | |

| Approaches | Organiser | Lead | Details/frequency | Status |
|--|-----------|-------|---|---------|
| Dental Commissioning Leads in neighbouring PCTs | | | | |
| Email contact, ongoing, with dental commissioning leads in neighbouring PCTs to ascertain if interested in procuring MOS service | JF | JF | 10 th February 09 – April 09 | |
| Invitation to dental commissioning leads of Cambs. and Northants to attend Market event | JF | SS/JF | 1 st May 09 | ongoing |

Involve – ensure stakeholders are involved

| Approaches | Organiser | Lead | Details/frequency | Status |
|------------|-----------|------|-------------------|--------|
|------------|-----------|------|-------------------|--------|

| Citizens Advice Bureau | | | | |
|------------------------|--|--|--|--|
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| Approaches | Organiser | Lead | Details/frequency | Status |
|----------------------------|-----------|------|-------------------|--------|
| City Care Centre/Alma Road | | | | |
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Inform – ensure stakeholders are aware

| Approaches | Organiser | Lead | Details/frequency | Status |
|---------------------|-----------|------|-------------------|--------|
| East of England SHA | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|----------------------------------|-----------|------|-------------------|--------|
| Wider Population of Peterborough | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|-------------|-----------|------|-------------------|--------|
| Local Media | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|-------------|-----------|------|-------------------|--------|
| Pharmacists | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|---------------------|-----------|------|-------------------|--------|
| NHS Choices Website | | | | |
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| Approaches | Organiser | Lead | Details/frequency | Status |
|---|-----------|------|-------------------|--------|
| Cambridgeshire & Peterborough Mental Health Partnership NHS Trust | | | | |
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Abbreviation Key

- JF – Jane Freeman, Dental Project Lead, NHS Peterborough
- BG – Barbara Groves, Company Secretary, NHS Peterborough
- JLC – Jane Coulson, Stakeholder Engagement Co-ordinator, NHS Peterborough
- LT – Louise Tyers, – Peterborough City Council
- CL – Carol Leadbetter, – Peterborough LINK
- LH – Liz Hurst, Localities Secretary, NHS Peterborough
- SS – Sarah Shuttlewood, Director, NHS Peterborough
- NG – Nicola Guppy, Practice Manager, Peterborough Community Services Dental Service
- CP – Christine Pattison, HR Manager, NHS Peterborough
- AP – Andrea Patman, Head of Primary Care, NHS Peterborough
- NA – Nicki Ayres, Peterborough Community Services

KH – Kerry Holliday, HR Advisory Team Manager, Peterborough Community Services
IG - Ian Greaves,
MH - Martin Hylands,
PW - Paul Whiteside,
TJ – Teresa Johnson, Secretary to Alison Reid, NHS Peterborough
CM – Clive Moss, Consultant in Oral and Maxillofacial Surgery, Peterborough and Stamford Hospitals
Foundation Trust (PSHFT)
KaH – Kathy Harvey, Assistant General Manager, PSHFT
CW – Clare Wilson, Business Development Manager, PSHFT
JR – James Robertson, Oral and Maxillofacial Surgeon and NHS Peterborough Clinical Advisor

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Appendix 3 Resources

There are budget implications in terms of the resources/material associated with a public consultation:

- venue hire
- consultation document
- tailored letters
- presentation
- media releases

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Appendix 4

Evaluation

- Feedback from staff meetings
- Feedback from team leaders
- Feedback from public consultation events
- Monitor media coverage
- Ask for feedback via the extranet
- Word of mouth

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Improving access to NHS Dental Services

Diane Siddle
Senior Contracts Manager

Our Goal for 2009/2010

NHS Peterborough is committed to supporting its population to access NHS dentists. Our target is 70% of the population will be able to access an NHS dentist by March 2011.

HOW ?

- Commission new dental practices
- Implement initiatives to encourage patients to return to NHS dental care:
 - Free Dental care Initiative – Autumn 2009
 - Increase promotion / advertising of capacity and Local Dental Helpline
 - Smoking Cessation referral
 - Reduced orthodontic waiting lists – 18 weeks.

- 2009 - An additional 42,000 Units of Dental Activity (UDAs) will be commissioned for Orton & Bretton, which equates to an additional 13,418 patients being treated.
- 2010 – An additional 20,000 Units of Dental Activity (UDAs) will be commissioned, which equates to an extra 6,389 patients being treated in Dogsthorpe, Fletton/Woodston or Stanground.

Progress

Phase 1 – Orton & Bretton Practices Procurement

- ❖ 69 Expressions of Interest (EOI)
- ❖ 20 Pre-Qualification Questionnaires (PQQs)
- ❖ 6 Bidders went through to Invitation to Tender (ITT) stage.
- ❖ Expected commencement date early 2010

Phase 2 – starts now

- ❖ Currently putting together the service specification.
- ❖ Service is due to commence April/May 2010



NHS

Peterborough

'Smile for Summer' Free NHS Dental check-up Campaign

The aims of the initiative are to:-

- **Improve access to NHS dental services**
- **Give a clear message to the public that NHS dental services are available**
- **Encourage patients who do not regularly visit a dentist to make an appointment and change behaviour**

How will this scheme operate?

- An advertising campaign will be launched this summer using the local radio and newspapers.
- Flyers will be distributed throughout the city at various venues such as GP surgeries, hospitals and health clinics.
- A telephone dental 'hotline' will be set up for patients to register for a voucher end of July / beginning of August.
- Patients will be issued with a list of participating dentists and a voucher enabling them to receive a free check-up.

NHS Increase promotion/advertising *Peterborough*

- Local Dental Helpline – 01733 758516
- Train station
- Supermarkets
- Buses – back of and inside
- PCT Public website

Smoking Cessation referral

- PCT target to decrease smoking within Peterborough population
- Referral to Smoking Cessation Advisors
- Incentive to Dental Practices to refer patients to Advisors – May 2009 for 6 months.
- Training for General Dental Practitioners

Orthodontics

- 18 week wait for orthodontic treatment
- Analysis of waiting list within existing service providers
- Implement monitoring process
- Allocate additional funding to reduce immediate waiting list for Peterborough patients
- Implement 18 weeks by April 2011.
- Return referrals from other PCCT's where numbers exceed 2004 historical agreement.

Thank you

Any Questions ?

| | |
|--|--------------------------|
| Scrutiny Commission for Health Issues | Agenda Item No. 5 |
| 14 July 2009 | Public Report |

Report of the Director of Nursing, Peterborough and Stamford Hospitals NHS Foundation Trust

Report Author – *Jane Pigg, Company Secretary*
Lesley Crosby, Assistant Director Patient and Public Experience
Contact Details – 01733 874174, jane.pigg@pbh-tr.nhs.uk
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HOSPITAL COMPLAINTS PROCESS

1. PURPOSE

Members of the Committee have expressed an interest in the process of complaints management within the Trust. To assist further discussion of the Trust’s Complaint Policy is attached.

A presentation will also be given on the complaints process and issues.

2. RECOMMENDATIONS

The Commission is asked to review the information provided and to provide questions as appropriate.

3. BACKGROUND

As above

4. CONSULTATION

Not relevant for consultation

5. BACKGROUND DOCUMENTS

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

6. APPENDICES

Appendix 1: Peterborough and Stamford Hospitals NHS Foundation Trust Complaint Policy

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Complaint Policy

1. Introduction

In April 2009 the NHS Complaints Procedure was amended. The Secretary of State for Health approved the new regulations and they went before Parliament and were cited as the National Health Service (Complaints) Regulations and came into force on 1 April 2009. The new procedure applies to all NHS services which now includes Social Care and replaces all previous complaint procedures. It is a legal procedure, which all Trusts including Foundation Trusts have a duty to implement. This document is a step by step guide to dealing Complaints within this Trust.

2. Purpose

The purpose of this document is to advise staff of Peterborough and Stamford Hospitals NHS Foundation Trust of the procedure for handling complaints and criticisms. This procedure should be referred to by staff as and when the situation arises.

This is NOT a disciplinary procedure. Where complaints contain disciplinary issues, these should be passed to the appropriate manager and only the aspects unrelated to disciplinary issues should be investigated within the complaints procedure. This procedure does NOT deal with staff grievances.

3. Arrangements for the handling of complaints

The Complaints Procedure must be accessible to ensure that complaints are dealt with speedily and efficiently, and that complainants are treated courteously and sympathetically and as far as possible involved in decisions about how their complaints are handled and considered.

The Complaints Procedure must be accessible to any person who makes a request for one. However any request for copies of medical notes will be charged for in line with current policy.

4. Responsibility for complaints management

In line with the Regulations the Trust has appointed a Complaints Manager to take responsibility for ensuring compliance with the arrangements and to ensure that action is taken in light of the outcome of any complaint investigation

5. Who may complain

A complaint may be made by a person who is affected by or likely to be affected by the action, omission or decision of the Trust or by a person who receives or has received services from the Trust. A complaint may be made by a person acting on behalf of a patient where that patient has died, is a child, is unable by reason of physical or mental incapacity to make the complaint themselves or has requested the representative to act on their behalf.

If the patient or person affected has died or is incapable, the complainant (representative), must be in the opinion of the complaints manager, someone who had or who has a sufficient interest in the individuals welfare and is a suitable person to act as representative.

Where a person makes a complaint on behalf of a child the Trust to which the complaint is made must not consider the complaint unless it is satisfied that there are reasonable grounds for the complaint being made by a representative instead of the child.

This applies to a child or a person who lacks capacity within the meaning of the Mental Capacity Act 2005 and the responsible body to which the complaint is made is satisfied that the representative is not conducting the complaint in the best interests of the person on whose behalf the complaint is made.

If in any case the complaints manager is of the opinion that a representative does or did not have a sufficient interest in the patient's welfare or is unsuitable to act as a representative, they must notify that person in writing, stating the reasons.

Written consent should always be obtained from the patient when a complaint is made by a third party unless they fulfil the aforementioned criteria.

6. Matters excluded from the Complaints Procedure

- a) a complaint which has been made orally and is resolved to the complainant's satisfaction not later than the next working day after the day on which the complaint was made;
- b) a complaint made by an NHS body which relates to the exercise of its functions by another NHS body;
- c) a complaint made by an employee of an NHS body about any matter relating to his contract of employment;
- d) a complaint which is being or has been investigated by the Health Service Commissioner;
- e) a complaint arising out of an NHS body's alleged failure to comply with a data subject request under the Data Protection Act 1998(a) or a request for information under the Freedom of Information Act 2000;
- f) a complaint about which an NHS body is taking or is proposing to take disciplinary proceedings in relation to the substance of the complaint against a person who is the subject of the complaint.
- g) a complaint the subject matter of which has already been investigated and resolved.

- h) a complaint which relates to any scheme under section 10 (superannuation of persons engaged in health services etc) or section 24 (compensation for loss of office) of the Superannuation Act 1972[5] or to the administration of these schemes.

7. Duty to Co-operate

The Trust and the second organisation for example the Primary Care Trust (PCT) must co-operate with each other for the purpose:

- a) co-ordinating the handling of the complaint and
- b) ensuring that the complainant receives a thorough response to the complaint.

The duty to co-operate includes in particular a duty for each organisation involved:

- a) to seek to agree which of the organisations should take the lead on
 - i) co-ordinating the handling of the complaint
 - ii) communicating with the complainant
- b) to provide the other organisation information relevant to the consideration of the complaint which is reasonably requested by the other and
- c) to attend or ensure that organisation is represented at, any meeting reasonably required in connection with the consideration of the complaint.

8. How to make a complaint

Where a person wishes to complain they may make the complaint to the complaints manager or any other member of staff. A complaint may be made orally or in writing (including electronically) and where it is made orally, the complaints manager must make a written record of the complaint which includes the name of the complaint, the subject matter of the complaint and the date which it was made. When the complaint is made in writing the complaints manager must make a written record of the date on which it was received.

Where the complaint is made in writing it will be treated as being made on the date on which it was received by the complaints manager.

The Trust has a generic form that staff should complete when taking the details of a verbal formal complaint (Appendix 1). This is available to all staff on the Trusts Intranet under 'Forms'.

The complaints process is a confidential process and staff should be aware that patients, relatives and carers are not discriminated against just because they have complained.

9. Time limit for making a complaint

A complaint must be made within –

- a) twelve months of the date on which the matter which is the subject of the complaint occurred; or
- b) twelve months of the date on which the matter which is the subject of the complaint came to the notice of the complainant

The Complaints Manager may decide to go ahead and investigate a complaint outside of the aforementioned time limit if-

- a) having regard to the circumstances, the complainant had good reasons for not making the complaint within the period; or
- b) notwithstanding the time that has elapsed it is still possible to investigate the complaint effectively and efficiently.

10. The procedure

This procedure applies to clinical and non-clinical complaints and it has two formal parts. Firstly Local Resolution, which is performed by the Trust and following the conclusion of local resolution stage the complainant will be advised that if they remain dissatisfied, they can refer their complaint to the Parliamentary Health Service Ombudsman (PHSO).

10.1 Pre-formal complaints stage

Front-line staff receiving complaints should endeavour to resolve them on the spot. They should deal with the complaint rapidly in an informal, sensitive manner, apologising if necessary. If the complainant remains dissatisfied, the member of staff taking the complaint should advise the complainant of other staff that are within the Trust who maybe able to help resolve their concerns. For guidance see Appendix 2.

Front line staff should discuss the complaint with their departmental / ward manager or the Matron for that area to assist in the local resolution process. Alternatively the patient, relatives or carer should be given the opportunity to discuss their concerns with the Patient Advice and Liaison Service (PALS). PALS are there to deal with concerns rather than complaints and are able to facilitate answers in an informal setting.

The complainant does need to be aware that PALS do NOT register concerns as formal complaints against the Trust and if it is a formal complaint they wish to pursue they will need to contact the Complaints Department.

There are occasions when it is imperative that the Complaints Manager is contacted and these are;

- a) alleged breaches of confidentiality

- b) alleged verbal or physical assaults from staff to patients
- c) if serious harm has occurred to the patient or staff have acted inappropriately
- d) if the patient, relative or carer feels reluctant or unable to contact the Trust directly they can contact POhWER – the advocacy agency. POhWER (People Of Hertfordshire Want Equal Rights) is an independent body whose role is to offer advocacy support to people who wish to make a complaint about NHS services. This service is free, independent and confidential. POhWER can be contacted on telephone 0845 4561084 or email: pohwer@pohwer.net.

10.2 Local Resolution – Formal Stage

10.2.1 Procedure before the investigation

All formal complaints should be forwarded to the Complaints Manager **immediately** and the following action will be taken:

- a) where a complaint is made orally the Trust will make a written record of the complaint and provide a copy of the written record to the complainant.
- b) at the time it acknowledges the complaint , the Trust must offer to discuss with the complainant at a time to be agreed with the complainant;
 - i) the manner in which the complaint is to be handled and
 - ii) the period of time it will take for the investigation of the complaint will be likely to be completed and when the response will be sent to the complainant.
- c) if the complainant does not accept the offer of a discussion the Trust must determine the response period and notify the complainant in writing.

10.2.2 Investigation

- a) The Complaints Manager must investigate the complaint to the extent necessary and in the manner which appears to be most appropriate to resolve it speedily and efficiently.
- b) A copy of the complaint will also be sent to the General Manager for that specific Clinical Business Unit (CBU) listing the staff who have been contacted for statements.
- c) It is the responsibility of the General Manager or nominated deputy to arrange for support for those staff who are the subject of the complaint.

10.2.3 Responses

- a) The Complaints Manager must prepare a written response to the complaint which summarises the nature and substance of the complaint, describes the investigation and summarises its conclusions.
- b) There must be confirmation as to whether the Trust is satisfied that any action needed in consequence of the complaint has been taken or is proposed to be taken.
- c) Where the complaint relates wholly or in part to the functions of a local authority, details of the complainant's right to take their complaint to a local Commissioner under the Local Government Act 1974(22); or to the Health Service Commissioner under the 1993 act.
- d) The formal response letter must be sent to the relevant General Manager for checking (and approval obtained from them) before the response is sent to the Chief Executive for signing.
- e) The response must be signed by the Chief Executive except in cases where he is not able to sign in which case a nominated deputy will sign the response.
- f) The response must notify the complainant of their right to refer their complaint to the Parliamentary Health Service Ombudsman (PHSO).
- g) A copy of the complaint response must be sent to anybody whose opinion was sought for the response and to the General Manager of the relevant CBU.
- h) A copy of the response will only be sent to third parties once appropriate consent has been received i.e. MP's or other relatives.
- i) The response will be sent first class to the complainant.
- j) Complaints about MDHU staff will be dealt with under this procedure and a copy of the written response will be forwarded to the local MDHU Commander.
- k) If the Trust does not send the complainant a response within the agreed timeframe, the Complaints Manager must notify the complainant in writing accordingly and explain the reason for the delay as soon as reasonably practicable after the original agreed timeframe
- l) Should the complainant remain dissatisfied with the response to the complaint, the Complaints Manager will commence further investigations and will respond in writing or if requested arrange for the relevant staff to meet with the complainant.
- m) If the complainant requests a meeting this will be arranged by the Complaints Manager. The Complaints Manager will contact the staff involved informing them that a meeting is taking place. Junior staff will be

represented by their managers, for example, in the case of nursing staff the Manager for the area will attend and for medical staff the Consultant will attend.

- n) These meetings will be chaired by the relevant General Manager and the Complaints Manager will ensure an accurate record of the meeting is taken.
- o) The Complaints Manager may, in any case where they think it would be appropriate to do so and with the agreement of the complainant, make arrangements for conciliation, mediation or other assistance for the purposes of resolving the complaint.

A flow chart detailing time limits and the Local Resolution stage is attached (Appendix 3).

11. Role of the Health Service Commissioner (Ombudsman)

The Health Service Commissioner (Ombudsman) will be able to investigate clinical and non-clinical complaints. The Ombudsman will only investigate complaints made by or on behalf of individuals who claim to have suffered hardship or injustice as a result of the failure of a service.

Staff employed by the Trust now have a right to complain to the Ombudsman if they feel they have suffered hardship or injustice through the complaints procedure. They will be expected to have gone through established local grievance procedures prior to contacting the Ombudsman. This does not apply to any disciplinary matters, related or unrelated to the complaints procedure.

12. Patient confidentiality

Complaint documentation must not be filed in the patients' medical records. This is to ensure that the patient receives impartial treatment in the future and will prevent discrimination from occurring.

Care must be taken at all times during the complaints procedure to ensure that any information disclosed about the patient only relates to the episode of treatment complained about. The patient must be made aware, that their personal details will be disclosed to all personnel involved in the investigation of the complaint.

Where the complaint is made on behalf of a patient, care must be taken not to disclose personal health information unless the patient has consented to this in writing. This also applies to third parties who have given information or are referred to in the patients' medical records.

13. Possible claims for negligence

The complaints procedure can run in conjunction with legal action if it is deemed appropriate. The rationale for any decision not to consider a case or certain issues under the regulations, should be clearly documented. The focus needs to be on taking the matter forward in the way which will best meet the (reasonable/achievable) expectations or outcomes for the complainant. i.e. If they want to test for negligence or

pursue a large claim, then obviously this can only be achieved through the legal process. However, if they seek explanations, apologies or smaller ex gratia payments, then this is a possible outcome to a complaint and will be a considerably quicker outcome to achieve.

14. Mixed sector complaints

When the Trust receives a complaint that involves both the Trust and another part of the local authority or the NHS the two agencies must work together with a view to providing the complainant with a co-ordinated response to the complaint. The duty to co-operate includes a duty to co-ordinate the handling of the complaint and

- a) to seek to agree which of the two organisations should take the lead on
 - i) co-ordinating the handling of the complaint
 - ii) communicating with the complainant
- b) to provide the other organisation information relevant to the consideration of the complaint which is reasonably requested by the other and
- c) to attend or ensure that the other organisation is represented at, any meeting reasonably required in connection with the consideration of the complaint.
- e) agree a plan to provide information relevant to the consideration of a complaint which is reasonably requested
- f) attend any meeting reasonably required in connection with the consideration of a complaint

15. Private patient complaints

The complaints procedure covers any complaint made by a private patient about the Trust's staff or facilities relating to care in the Trust's private pay beds. It does not include the private medical care provided by the consultant outside the NHS contract.

16. Monitoring

The Trust Board of Directors will receive a quarterly complaints report highlighting trends in complaints to enable them to consider any lessons which can be learnt from complaints for service improvement. This report will also be discussed at the Clinical Governance Committee.

Each CBU will receive a copy of the report for their area and they must discuss the content at their Clinical Management Team meetings or their Clinical Governance Meetings.

The reports must—

- a specify the numbers of complaints received;
- b identify the subject matter of those complaints and the location;
- c what time frame was agreed with the complainant

- d summarise the outcome of the investigations; and
- e identify any complaints where the recommendations of the Parliamentary Health Service Ombudsman were acted upon or if the recommendations were not acted upon, give the reasons why not.

The Complaints Manager will liaise with CBU's to ensure that lessons are learnt and actioned, where appropriate. This is followed up by the use of Action Monitoring Forms which are completed by the Complaints Manager for every complaint.

Each Trust must prepare an annual report for each year which must:

- a) specify the number of complaints received
- b) specify the number of complaints upheld
- c) specify the number of complaints the Trust has been informed have been referred to:
 - i) The Parliamentary Health Service Ombudsman
 - ii) The Local Commissioner
- d) summarise
 - i) The complaint received
 - ii) Any matters of general importance arising from the complaint or how it has been handled
 - iii) Any matters where actions have been taken

NHSLA require that we regularly monitor compliance of practice against process. The table below outlines how this will be achieved in relation to the Complaints Policy

| Process to be monitored | How will compliance with the outlined process be monitored? | Frequency | By who? | If compliance gaps have been identified, who is responsible for creating an action plan, and ensuring implementation of required changes? |
|--|---|-----------|--|---|
| Duty against Statutory requirements, complaints management process including internal & external communications & collaborations with other bodies, procedure to prevent discrimination on those who have raised complaints and process by | Through the Complaints, Litigation, Adverse Event and PALS Report | Quarterly | Assistant Director – Patient and Public Experience and Clinical Governance Committee | Assistant Director – Patient and Public Experience and CBU General Managers / Clinical Leads |

| | | | | |
|--|--|--|--|--|
| which the organisation aims to make changes as a result of formal complaints | | | | |
|--|--|--|--|--|

17. Publicity

The Trust will publicise its complaints arrangements and will undertake training for staff in the Complaints Procedure.

The Trust will provide leaflets for patients wishing to complain advising them of how to contact the complaints manager and outlining the process involved when a complaint is made.

These should be available on all wards / departments in the leaflet racks and a laminated copy has been distributed to all areas for display to the patients and the public.

This leaflet can be found on the Trusts intranet via the Patient and Public Experience site. A copy is also attached (Appendix 4)

The Trust will also make available to patients the Parliamentary Health Service Ombudsman booklet and the POhWER leaflet. These can be obtained from the complaints department on ext. 4234.

18. Staff training

A representative from each ward / department (ideally the Ward Manager) will be required to attend training on the new Complaints Procedure. It is then the responsibility of the Manager to ensure that the information is cascaded to other staff. A copy of the Complaints Procedure is available on the Trusts intranet and staff are encouraged to keep a copy in the ward / department.

All new staff will attend training on the Complaints Procedure at Induction. A copy of the Trust Complaints Procedure will be made available to all medical staff at Induction.

A discussion will also take place with all new Consultant appointments, during their induction, on the procedure.

Author: Samantha Wright, Complaints Manager & Lesley Crosby, Assistant Director Patient and Public Experience

Date: 19 May 2009

Date for Review: 19 May 2012

Endorsed by: Clinical Governance Committee.

VERBAL COMPLAINT

PATIENT DETAILS:

| | | | |
|-------------------------|--|---------------------------|--|
| Name | | Address | |
| Hospitals Number | | Department or Ward | |

COMPLAINANT DETAILS:

| | | | |
|-------------------------|--|--------------------------------|--|
| Name | | Address | |
| Telephone Number | | Relationship to Patient | |

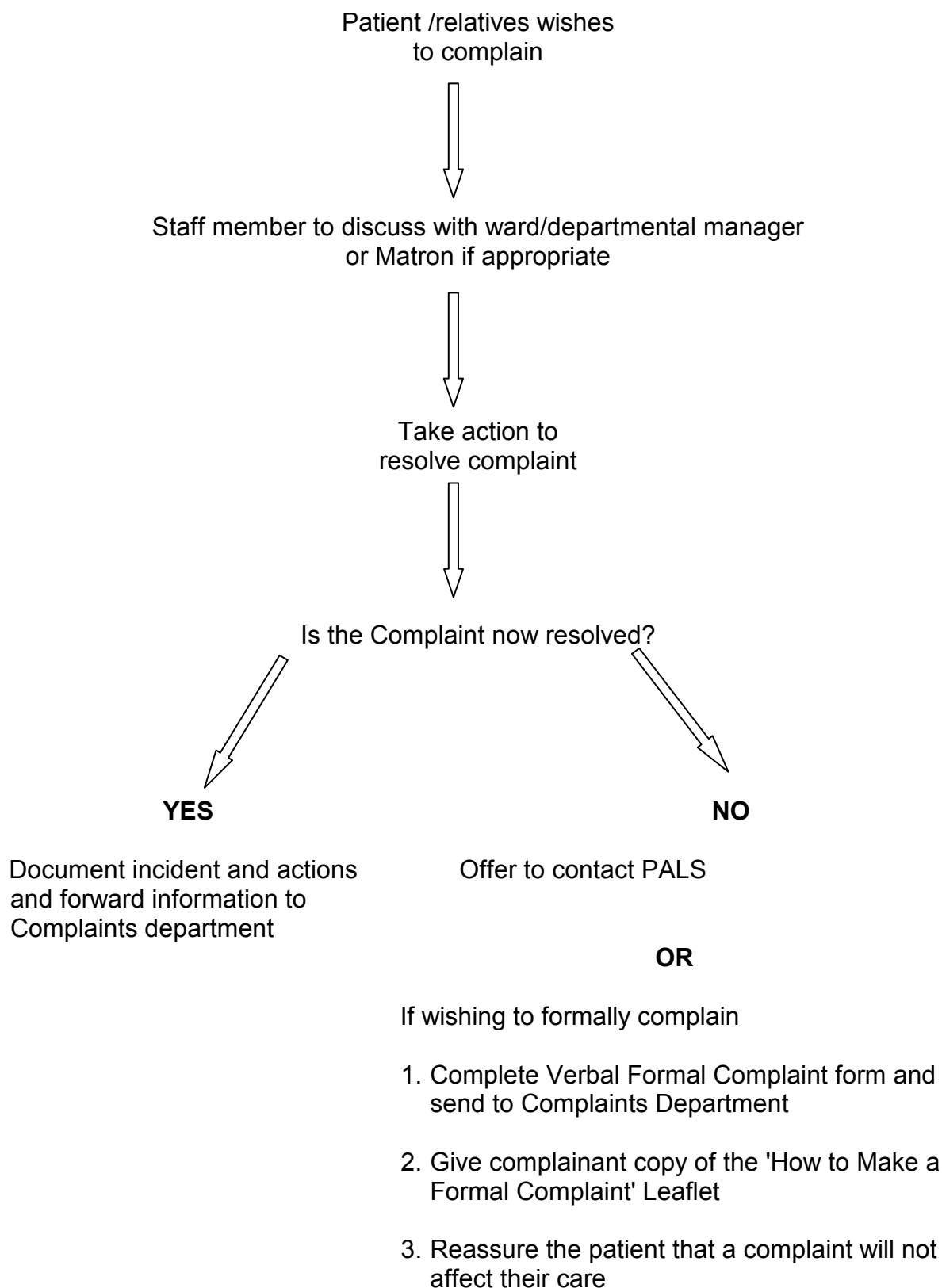
SUMMARY OF COMPLAINT (include agreed actions)

Is the patient aware of the complaint? Yes / No

Staff Member who received complaint: Date:

Please send completed form to Complaints Department, Patient & Public Experience or if you need help and advice contact the Complaints Team directly on extension 4234 or 8786.

**PROCEDURE FOR RESOLVING COMPLAINTS
WHEN COMPLAINT IS FIRST RAISED (PRE FORMAL)**



PROCEDURE FOR RESOLVING COMPLAINTS
LOCAL RESOLUTION - STAGE ONE

Complaint received in Complaints Department
and registered



Contact the complainant and agree a reasonable plan in order to be able to respond to the complaint. This needs to include a mutually accepted agreement as to whether a written response or a face-to-face meeting is suitable and what the response time frame should be. Then acknowledge the complaint within 3 working days of receipt.



Complaints Manager requests statements
from all staff involved in complaint within a reasonable time frame depending on the
complexity of the case



Statements received in Complaints Department



Complaints Manager drafts written response



Written response sent to General Manager
of business unit for approval giving 3 working
days to respond



Approval from General Manager



Written response re-dated and amended (if necessary)



Chief Executive to read complaint and agree response prior to signing.
Written response sent to complainant



Copy of written response sent to
all staff who provided statements

MAKING A FORMAL COMPLAINT

Peterborough and Stamford Hospitals NHS Foundation Trust values the comments that are made about the service its users receive. Whilst we pride ourselves in providing a good service sometimes we accept that we cannot always meet users expectations. When this happens users may wish to formally complain.

You can write in with details of your complaint, send your complaint electronically via email or register it verbally either by telephone or in person.

If you are reluctant or unable to contact the Trust directly you can contact the Independent Complaints Advocacy Service (ICAS) – an independent body whose role is to offer advocacy support to people who wish to make a complaint. This is a free and confidential service. ICAS can be contacted on:

Cambridgeshire, Norfolk and Suffolk Helpline: 0845 456 1084

**Leicestershire, Lincolnshire, Rutland, Northamptonshire, Nottinghamshire, Derbyshire
Helpline: 0845 650 0088**

Once the complaints staff receive your complaint they will contact you to discuss your complaint and agree a timeframe for answering your complaint. Your letter will be acknowledged within three working days. A full investigation will then take place. We will respond to complaints within the mutually agreed timeframe. Once the investigation is complete the Chief Executive will write to you with a detailed response.

If on receipt of this response you remain dissatisfied we encourage you to contact us again so that we can either write to you again or arrange a meeting for you to discuss your concerns in person. If the meeting fails to resolve your concerns you are at liberty to contact the Parliamentary Health Service Ombudsman (PHSO). They are responsible for reviewing formal complaints about the NHS. A leaflet explaining the role of the PHSO can be obtained from the Complaints Department on 01733 874234.

We hope that this information has explained how you can make a complaint and what will happen when it is received. If you would like a copy of the NHS Complaints Procedure, which is in place within the Trust, this can be provided free of charge by contacting the Complaints Department.

The Complaints Department details are as follows:

Phone: 01733 874234 or 01733 874000 ext. 8786

Fax: 01733 874266

In writing: Complaints Department

Peterborough District Hospital
Thorpe Road
Peterborough
PE3 6DA

Email: complaints@pbh-tr.nhs.uk

**ALL COMPLAINTS ARE TREATED CONFIDENTIALLY AND ALL COMPLAINTS
CORRESPONDENCE WILL BE KEPT SEPARATE TO THE PATIENTS MEDICAL NOTES SO AS
TO AVOID THE WORRY OF DISCRIMINATION.**

| | |
|--|--------------------------|
| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 6 |
| 14 JULY 2009 | Public Report |

Report of the *Medical Director – NHS Peterborough*

Report Author – *Dr R Spiers, Medical Director, NHS Peterborough*
Contact Details – *01733 758556*

SWINE FLU

1 RECOMMENDATION

This report recommends that the Commission

- 1.1 Notes the current national and local situation regarding swine flu and the actions taken by NHS Peterborough, in conjunction with partner agencies, to ensure a robust NHS and multi-agency response to the swine flu pandemic.

2 TIMETABLE FOR DECISIONS

- 2.1 N/A

3 PREVIOUS DECISIONS RELEVANT TO REPORT

- 3.1 NHS Peterborough Board approval of NHS Peterborough Major Incident & Influenza Pandemic Contingency Plan.

4 RELATES TO PCT STRATEGIC PLAN AND GOALS

- 4.1 Business continuity

5 INTERNATIONAL & NATIONAL UPDATE

- 5.1 WHO moved to Phase 6 on 11 June
- 5.2 As of 30 June 2009, there are now 6,538 laboratory confirmed cases and 918 clinically presumed cases of A/H1N1 in the UK. Onward human to human transmission has been confirmed in the UK. Transmission of infection with influenza A H1N1v has been occurring in the community in the UK, and there is evidence of widespread community transmission in Glasgow and parts of the West Midlands, London, east Berkshire, and west Hertfordshire.
- 5.3 In most cases, swine flu is a mild self-limiting illness although a small minority of cases have been more serious. There are three confirmed deaths linked to Swine Flu in the UK.

- 5.4 The aims & objectives of the UK response are to:
1. Prevent, slow or limit the spread of the disease
 2. Protect UK citizens and visitors against the health and wider consequences as far as this is possible
 3. Organise and adapt the health and social care systems to provide treatment and support for the large numbers likely to suffer from influenza or its complications whilst maintaining other essential care
 4. Support the continuity of essential services and protect critical infrastructure as far as possible
 5. Support the continuation of everyday activities as far as practical
 6. Uphold the rule of law and the democratic process
 7. Instil and maintain trust and confidence by ensuring that the public and the media are engaged and well informed
 8. Promote a return to normality and the restoration of disrupted services at the earliest opportunity

6 LOCAL SITUATION

- 6.1 As of 30 June 2009, there are 3 confirmed cases in Peterborough. We can expect to see increasing numbers of cases over the next few weeks. These will continue to be assessed and treated in accordance with national guidance, which includes clear clinical algorithms.

7 NHS PETERBOROUGH RESPONSE

- 7.1 NHS Peterborough has maintained a pro-active, proportionate response to this evolving pandemic since the first cases were reported in Mexico in late April. This response has been in conjunction with National, Regional and local resilience civil contingency systems and in accordance with NHS Peterborough's Influenza Pandemic Contingency Plan.
- 7.2 Outputs delivered to date:
- Reiteration of basic flu advice and general hygiene messages to the community
 - 24/7 monitoring of local situation & response to clinical and other enquiries (via Incident Control Room and on-call arrangements)
 - Briefing & support for local clinical staff
 - Arrangements for the delivery of anti-viral medication as appropriate to the local population, including the development and testing of assessment and collection points
 - Regular liaison / reporting to appropriate authorities

7.3 Current work-streams:

- Preparation for moving from a containment to mitigation phase of the pandemic
- Preparation for immunisation (vaccine under development)
- NHS business continuity / resilience

7.4 There has been excellent co-operation both within and between local and regional organisations throughout this incident, including NHS Peterborough, Peterborough Community Services, Peterborough City Council, NHS East of England and local health & social care providers.

8 IMPLICATIONS / IMPACT

8.1 Financial – being monitored

8.2 NHS Peterborough priorities – significant opportunity costs for a number of staff

8.3 Impact on Patients – protection of the public health of the population

9 DIRECTOR RESPONSIBLE FOR ADVICE: Dr Andy Liggins

Other contact officer(s): PPCT Flu Team

Name of author: Dr Richard Spiers
Designation: Medical Director, NHS Peterborough
Date: 1 July 2009

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| HEALTH SCRUTINY COMMISSION | Agenda Item No. 7 |
| 14 JULY 2009 | Public Report |

Report of the Director of Adult Social Services

Report Author – Denise Radley
Contact Details – 01733 758444

PETERBOROUGH SAFEGUARDING ADULTS – FEBRUARY 2009 TO MAY 2009

1. PURPOSE

- 1.1 The purpose of this report is to ask the Scrutiny Commission to consider, challenge and comment on the quarterly report on adult safeguarding.

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

- 2.1 Safeguarding vulnerable adults is at the heart of the Sustainable Community Strategy, our ambition includes working to help the people of Peterborough “be protected from abuse, discrimination and harassment”. The Local Area Agreement targets relating to vulnerable people have particular links to this area.

3. PERFORMANCE

- 3.1 The last report to the Health and Adult Social Care Scrutiny Panel was on 17 February 2009. That report included the number of alerts to the end of January 2009. The meeting in February agreed that future reporting on adult safeguarding should be on a quarterly basis (rather than six monthly). This is the first of the quarterly reports but, as there has been a disruption to the timetable of meetings due to changes in the scrutiny process, Appendix 1 of this report gives the alerts for the period February 2009 to May 2009.
- 3.2 Points of note from the data are:
- The number of alerts for February to May 09 continue to be down on previous years. This is likely to be due to the new safeguarding procedures being implemented within statutory and voluntary agencies in Peterborough with greater clarity of eligibility.
 - Following several care home investigations, the number of alerts has settled back to 2008 levels.
 - The number of alerts in Peterborough from Black and Ethnic Minority groups continues to be lower than the percentage of the population – the three year action plan includes work to investigate this issue further.
 - Work has begun between Peterborough City Council and NHS Peterborough to look at the analytical tool for community safety and understand how a similar tool could be utilised to map safeguarding data.
- 3.3 Since February 2009, 6 cases monthly have been randomly selected from the referrals for safeguarding. These cases have had detailed analysis by the practitioner and manager using pro-forma provided by CQC, as well as oversight by the senior manager, Assistant Director of Operations and Director of Adult Social Services. These audits have highlighted progress with implementing the new procedures and some areas that still require further development including the systematic use of checklists, compliance with timescales, case recording and the understanding of when a safeguarding alert should be completed and further work continued. Additional training on leading safeguarding investigations has been provided recently by external trainers who have fed back that staff who attended were “motivated and on board”.

4. PETERBOROUGH SAFEGUARDING ADULTS BOARD

4.1 The Safeguarding Board considered the final draft of the Annual Report 2008-09 at its meeting on 27 February 2009 and, following presentations to the Health and Wellbeing Partnership Board and Safer Peterborough Partnership, the report has now been posted on the NHS Peterborough website and distributed to key stakeholders. The report is attached at appendix 2.

4.2 At the same meeting, the Safeguarding Board also signed off a three-year action plan at its February meeting. Critical priorities for 2009/10 are:

- Developing full and effective quality assurance processes.
- Fully embedding the new procedures and ensuring that standards are met and improved performance is sustained.
- Supporting staff to deliver to the required standards.
- Developing a multi-agency training strategy.
- Investigating the lower level of alerts from black and minority ethnic communities.
- Implementing the communication strategy.
- Ensuring that the introduction of individual budgets has safeguarding as a key objective.
- Developing a strategy for service user and carer involvement.

4.3 At a subsequent meeting of the Safeguarding Board on 22 May 2009, it was acknowledged that further work needs to be undertaken on prioritising the action plan based on the resources available and that the establishment of a budget for the board should be considered at the August 2009 meeting in preparation for budget planning for next year. Advice will be sought from the Safer Peterborough Partnership on how it secures and manages funding.

4.4 The Serious Case Review panel has met once. In accordance with the protocols, the Independent Chair has written to all organisations for detailed chronological feedback of intervention and analysis of actions by each organisation.

5 SAFEGUARDING FORUM

The Safeguarding Forum has met twice since the February meeting of the Health and Adult Social Care Scrutiny Panel.

5.1 3 March 2009

5.1.1 The Safeguarding Forum met on 3 March 2009 and focused on the new procedures introduced in January 2009. It was held in a workshop style giving attendees an opportunity to discuss issues raised and work through satisfactory solutions. Several areas of concern were raised by Forum members which were discussed and actions agreed.

5.1.2 A member of the workforce development team presented a report to the meeting on the Safeguarding training for Peterborough. Attendees commented that they felt very supported by the Workforce Development team regarding safeguarding training available.

5.1.3 There was a general discussion around the new national Independent Safeguarding Authority and the national "No Secrets" review consultation.

5.2 2 June 2009

The Safeguarding Forum met on 2nd June 2009 where further discussion was held around the implementation of the new procedures. Key points included:

- Comments were received and suggestions made around the time taken to fully complete Safeguarding investigations.
- The Team Managers' Checklist has been renamed the Safeguarding Checklist and is being completed by practitioners and signed off by Team Managers before forwarding to the Safeguarding Team for closure.

- The Safeguarding Team members continue to support Teams with complex issues.
- The Team Manager, Safeguarding, is working closely with other managers to shorten the time taken from a safeguarding alert being raised to closure.
- In addition to monthly audits, the Team Manager, Safeguarding continues to audit the alerts in order to monitor progress and raise issues with the teams.
- The Team Manager, Safeguarding has asked for members to bring items to agenda for discussions at future meetings.
- The Training Department made a presentation on the Mental Capacity Act and Deprivation of Liberty safeguards to the Forum.

6 RAISING AWARENESS OF SAFEGUARDING IN THE GENERAL PUBLIC

- 6.1 The new Safeguarding leaflets have been distributed widely according to the communication procedure.

7 TRAINING

Training provided 11th February 2009 – 1st June 2009

| Course Title | Length | No of Participants |
|---|----------|--------------------|
| Safeguarding Raising Awareness including induction sessions | Half Day | 107 |
| Safeguarding Raising Awareness – Bespoke sessions | Half day | 104 |
| Safeguarding Enhanced Awareness | One day | 46 |
| Leading Safeguarding Investigations | Two day | 9 |
| Mental Capacity Act Awareness | Half day | 126 |
| Mental Capacity Act Awareness – bespoke sessions | Half day | 37 |
| Mental Capacity Act In Depth | Half day | 0 |
| Deprivation of Liberty For Registered Managers, Nurses, Social Workers and other care staff | Half day | 81 |

8. EXPECTED OUTCOMES

- 8.1 The Scrutiny Commission is asked to note and discuss the content of the report.

9. NEXT STEPS

- 9.1 Safeguarding adults reports will be submitted to the Health Scrutiny Commission on a quarterly basis.

10. BACKGROUND DOCUMENTS

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

None.

Denise Radley
Director of Adult Social Services

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**CONCERNS, SUSPICIONS OR ALLEGATIONS OF ABUSE
REPORTED FEBRUARY 2009 – MAY 2009**

| | Feb 09 | Mar 09 | Apr 09 | May 09 |
|--------------------------------------|---------------|---------------|---------------|---------------|
| TOTAL NUMBER OF ALERTS | 22 | 29 | 25 | 23 |
| Age breakdown | | | | |
| 18 to 30 | 1 | | 3 | 3 |
| 31 to 45 | 1 | 4 | 7 | 3 |
| 46 to 64 | 1 | 3 | 3 | 2 |
| 65 to 79 | 3 | 5 | 5 | 2 |
| 80+ | 16 | 14 | 7 | 12 |
| Unknown | | 1 | | 1 |
| Whereabouts at time of alert | | | | |
| Own home | 8 | 17 | 18 | 12 |
| Care home | 13 | 12 | 5 | 7 |
| Hospital | 1 | | 1 | 3 |
| Other | | | 1 | 1 |
| Unknown as yet | | | | |
| Gender | | | | |
| Female | 17 | 17 | 17 | 18 |
| Male | 5 | 11 | 8 | 5 |
| Unknown as yet | | 1 | | |
| Ethnic origin | | | | |
| White British | 21 | 26 | 21 | 18 |
| Other white | | | 2 | |
| Pakistani | | | 2 | 2 |
| Other Asian | 1 | 2 | | 1 |
| Unknown as yet/not recorded | | 1 | | 2 |
| Vulnerable adult client group | | | | |
| Physical disability | 8 | 10 | 4 | 6 |
| Mental health | 2 | 2 | 3 | 5 |
| Learning disability | 2 | 2 | 8 | 3 |
| Frailty and temporary illness | 8 | 11 | 8 | 6 |
| Dementia | 2 | 3 | | 3 |
| Other vulnerable people | | | 2 | |
| Unknown/not recorded | | 1 | | |
| Self funding | | | | |
| Yes | 1 | 3 | 1 | 0 |
| No | 19 | 24 | 24 | 23 |
| Not known/not recorded | | 2 | | |
| Funded by another authority | 2 | 0 | | |

To set the above figures in context:

The total number of people supported by adult social care in 08/09 was 5447. The total number of service users in receipt of support on 31st March 2009 was 3245.

The Grant Funded Services return for 10-16th November 2008 shows that 4454 people received a service from a voluntary organisation. This included 327 carers. This figure may include people receiving services from more than one organisation.

The three year action plan includes work to improve benchmarking data around alerts, profile expected incidence of abuse for different groups and set outcome measures.

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| | |
|--|--------------------------|
| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 8 |
| 14 JULY 2009 | Public Report |

Report of the Chief Executive

Report Author – Lindsay Tomlinson, Senior Governance Officer

Contact Details – 01733 452238 or email lindsay.tomlinson@peterborough.gov.uk

FORWARD PLAN – JULY TO OCTOBER 2009

1. PURPOSE

- 1.1 This is a regular report to the Scrutiny Commission for Issues, outlining the content of the Council's Forward Plan.

2. RECOMMENDATIONS

- 2.1 That the Commission identifies any areas for inclusion within their work programme.

3. BACKGROUND

- 3.1 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.
- 3.2 The Commission 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.
- 3.3 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 this Commission and of the Scrutiny Committees 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. CONSULTATION

- 4.1 Details of any consultation on individual decisions are contained within the Forward Plan.

5. EXPECTED OUTCOMES

- 5.1 That the Commission notes the latest version of the Forward Plan, agrees any areas for inclusion within its work programme and submits any observations concerning the Plan to the Executive.

6. BACKGROUND DOCUMENTS

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

None

7. APPENDICES

Appendix 1 – Forward Plan of Executive Decisions

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PETERBOROUGH CITY COUNCIL'S FORWARD PLAN

1 JULY 2009 TO 31 OCTOBER 2009

APPENDIX 1



FORWARD PLAN OF KEY DECISIONS – 1 JULY 2009 TO 31 OCTOBER 2009

During the period from 1 July 2009 to 31 October 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 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 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 Plan and submitted to Lindsay Tomlinson, Senior Governance 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.

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 Senior Governance Officer using the form attached. For your information, the contact details for the Council's various service departments are incorporated within this plan.

NEW ITEMS THIS MONTH:

- Review of Council Subsidised Bus Services
- Leisure and Culture Trust
- Cash Collection and Key Holding Services
- Stationery Contract
- Furniture Contract

JULY - KEY DECISIONS

| KEY DECISION REQUIRED | DATE OF DECISION | DECISION MAKER | CONSULTATION | CONTACT DETAILS / REPORT AUTHORS | REPORTS |
|---|------------------|-----------------------|---|--|--|
| <p>Review of Council Subsidised Bus Services</p> <p>To approve:</p> <ul style="list-style-type: none"> • Cessation of operation of some services • Retender of some services <p>To undertake a further review to identify further savings and give delegated authority to the Executive Director, Operations to authorise the cessation of subsidised and operation of any services following the review</p> | <p>July 2009</p> | <p>Cabinet</p> | <p>Monitoring of passenger numbers and bus services has been undertaken. All ward councillors will be consulted along with employees and trade unions as appropriate.</p> | <p>Teresa Wood Group Manager – Accessibility and Travel Tel: 01733 317451 teresa.wood@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

| | | | | | |
|--|------------------|---|--|---|--|
| <p>Leisure and Culture Trust To give authority to commence the process of establishing a not-for-profit distributing organisation (a 'trust') to deliver a range of cultural services, and subject to the successful creation of the trust, to authorise the Chief Executive, in consultation with the Cabinet Member for Environment Capital and Culture and other officers as appropriate, to enter into a legal agreement with the trust to deliver the services</p> | <p>July 2009</p> | <p>Cabinet</p> | <p>Consultation will be undertaken with relevant stakeholders as appropriate</p> | <p>Kevin Tighe Head of Culture Tel: 01733 863784 kevin.tighe@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Growth Area Bids To delegate to the Chief Executive the authority to bid for sites which become available, within the area covered by the City Centre Area Action Plan, or sites which are otherwise considered necessary for the Council to achieve its Growth agenda.</p> | <p>July 2009</p> | <p>Leader of the Council, Councillor Cereste</p> | <p>Internal departments and relevant stakeholders as appropriate plus ward members</p> | <p>Gillian Beasley Chief Executive Tel: 01733 452390 gillian.beasley@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Arthur Mellows Village College Gym and Innovation Centre Authority to award the contract for the construction of the gym and innovation centre at AMVC</p> | <p>July 2009</p> | <p>Leader of the Council, Councillor Cereste</p> | <p>Ward councillors and relevant stakeholders</p> | <p>Isabel Clark Planning and Development Manager Tel: 01733 863914 isabel.clark@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

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|--|------------------|--|--|--|--|
| <p>Midland Highway Alliance - Junction 8 Roundabout Improvements and Welland Road Traffic Mitigation Projects To appoint a contractor for the works</p> | <p>July 2009</p> | <p>Cabinet Member for Neighbourhood, Housing and Community Development, Councillor Hiller</p> | <p>Internal stakeholders as appropriate</p> | <p>Stuart Mounfield Senior Engineer Tel: 01733 453598 stuart.mounfield@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Proposed Bushfield Academy – Procurement Processes To approve processes and delegations for the procurement of the new Bushfield Academy in accordance with Partnerships for Schools guidance</p> | <p>July 2009</p> | <p>Cabinet Member for Education, Skills and University, Councillor Holdich</p> | <p>Consultation will be undertaken with the Cabinet Member for Resources, local ward councillors and internal departments as appropriate</p> | <p>Brian Howard Secondary Schools Phase 2 Project Manager Tel: 01733 863976 brian.howard@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Joint Service Centre at Hampton To commence the procurement process for a design and build contract for the provision of new leisure and library facilities at Hampton as part of the joint service centre in partnership with NHS Peterborough.</p> | <p>July 2009</p> | <p>Cabinet Member for Environment Capital and Culture, Councillor Lee</p> | <p>Consultation will take place with the Cabinet Member for Community Services, ward councillors, affected internal divisions within PCC and potential user groups in Hampton.</p> | <p>Fiona O'Mahony Project Director JSC Hampton Tel: 01733 863856 fiona.o'mahony@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

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|---|------------------|--|---|--|--|
| <p>Thorney and Eye Children's Centre To give authority to award the contract for the construction of Eye and Thorney Children's Centre</p> | <p>July 2009</p> | <p>Cabinet Member for Children's Services, Councillor Scott</p> | <p>Consultation will be undertaken with local stakeholders including local schools and governing bodies, voluntary sector childcare providers and private childcare providers in Eye and with ward councillors.</p> | <p>Pam Setterfield Assistant Head of Children and Families Services Tel: 01733 863897 pam.setterfield@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Lady Lodge Arts Centre Options for the future use of the Lady Lodge Arts Centre site</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will be carried out with relevant ward councillors</p> | <p>Andrew Edwards Head of Strategic Property Tel: 01733 384530 andrew.edwards@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Legal Chambers Service To approve the re-tendering for the provision of external legal services</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will take place with all internal stakeholders as appropriate</p> | <p>Lisa Osborne Project Manager Tel: 01733 452276 lisa.osborne@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Debt Collection To give authority to award the contract for the authority's debt collection</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will be undertaken with relevant departments.</p> | <p>Helen Edwards Solicitor to the Council Tel: 01733 452539 helen.edwards@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

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|--|------------------|---|---|--|--|
| <p>Sale of Surplus Former Allotment Land at Westwood Grange (South of Atherstone Avenue and Portman Close, West of Grange Road and North of Mayors Walk, Peterborough) To authorise the Chief Executive, Executive Director of Resources and Cabinet Member for Efficiency and Business Improvement to negotiate and conclude the sale of this surplus Council asset based on best consideration principles.</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will take place with relevant stakeholders including ward councillors</p> | <p>Andrew Edwards Head of Strategic Property Tel: 01733 384530 andrew.edwards@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Sale of Surplus Former Allotment Land off Itter Crescent To authorise the Chief Executive, in consultation with the Solicitor to the Council, Executive Director Resources, Head of Strategic Property and the Cabinet Member for Efficiency and Business Improvement, to negotiate and conclude the sale of surplus land at Itter Crescent</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will take place with the Cabinet Member, Ward councillors, relevant internal departments & external stakeholders as appropriate</p> | <p>Andrew Edwards Head of Strategic Property Tel: 01733 384530 andrew.edwards@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

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|---|------------------|---|---|--|--|
| <p>Sale of Surplus Land at Matley Road, Orton Brimbles To negotiate and conclude terms for the disposal of this asset by private treaty.</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will take place with relevant ward councillors</p> | <p>Richard Hodgson Head of Strategic Projects Tel: 01733 742230 richard.hodgson@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Sale of Surplus Land and Buildings at Peterborough Professional Development Centre (PPDC), Cottesmore Close, Netherton, Peterborough To negotiate and conclude terms for the disposal of this asset by private treaty</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will take place with relevant ward councillors</p> | <p>Richard Hodgson Head of Strategic Projects Tel: 01733 742230 richard.hodgson@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>ICT Managed Service To select a partner to deliver ICT services to the Council</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Internal stakeholders as appropriate: ICT staff, HR; Finance; Legal Services; Departmental Representatives</p> | <p>Elaine Alexander Programme Manager – Business Transformation Tel: 01733 317984 elaine.alexander@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
| <p>Cash Collection and Key Holding Services Authorisation of extension to the current contract for cash collection and key holding services until March 2010</p> | <p>July 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation is being undertaken with all stakeholders as appropriate</p> | <p>Lisa Osborne Category Manager Tel: 01733 452276 lisa.osborne@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

AUGUST - KEY DECISIONS

| KEY DECISION REQUIRED | DATE OF DECISION | DECISION MAKER | CONSULTATION | CONTACT DETAILS / REPORT AUTHORS | REPORTS |
|--|------------------|--|---|--|--|
| <p>Real Time Passenger Information Partnership Agreement</p> <p>Authority to enter into a partnership agreement with Central Bedfordshire Council, Bedford Borough Council and Luton Borough Council to implement real time passenger information</p> | August 2009 | <p>Cabinet Member for Neighbourhood, Housing and Community Development, Councillor Hiller</p> | <p>Consultation will be carried out with relevant internal departments as appropriate</p> | <p>Amy Wardell Team Manager, Passenger Transport Projects Tel: 01733 317481 amy.wardell@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |

SEPTEMBER - KEY DECISIONS

| KEY DECISION REQUIRED | DATE OF DECISION | DECISION MAKER | CONSULTATION | CONTACT DETAILS / REPORT AUTHORS | REPORTS |
|--|------------------|--|---|---|---|
| Older People's Accommodation Strategy To agree the next phase of implementation of the Older People's Accommodation Strategy | September 2009 | Cabinet | Consultation will be undertaken with relevant stakeholders as appropriate | Denise Radley Director of Adult Social Services and Performance Tel: 01733 758444 denise.radley@peterborough.gov.uk | Public report will be available from the Governance team one week before the decision is made |
| Extension to Woodston Primary School Authority to award the contract for the construction of an extension to Woodston Primary School | September 2009 | Cabinet Member for Education, Skills and University, Councillor Holdich | Consultation will take place with relevant stakeholders, internal departments and ward councillors as appropriate | Isabel Clark Planning and Development Manager Tel: 01733 863914 isabel.clark@peterborough.gov.uk | Public report will be available from the Governance team one week before the decision is made |
| Extension to Hampton Hargate School Authority to award the contract for the construction of an extension to Hampton Hargate Primary School | September 2009 | Cabinet Member for Education, Skills and University, Councillor Holdich | Consultation will take place with relevant stakeholders, internal departments and ward councillors as appropriate | Isabel Clark Planning and Development Manager Tel: 01733 863914 isabel.clark@peterborough.gov.uk | Public report will be available from the Governance team one week before the decision is made |
| Stationery Contract Authorisation to award the contract for stationery to the successful supplier following the procurement exercise | September 2009 | Cabinet Member for Resources, Councillor Seaton | Consultation will be undertaken with Heads of Service and other users of the contract | Lisa Osborne Category Manager Tel: 01733 452276 lisa.osborne@peterborough.gov.uk | Public report will be available from the Governance team one week before the decision is made |

| | | | | | |
|---|-----------------------|---|--|--|--|
| <p>Furniture Contract Authorisation to award the contract for furniture to the successful supplier following the procurement exercise</p> | <p>September 2009</p> | <p>Cabinet Member for Resources, Councillor Seaton</p> | <p>Consultation will be undertaken with Heads of Service and other users of the contract</p> | <p>Lisa Osborne Category Manager Tel: 01733 452276 lisa.osborne@peterborough.gov.uk</p> | <p>Public report will be available from the Governance team one week before the decision is made</p> |
|---|-----------------------|---|--|--|--|

OCTOBER - KEY DECISIONS

THERE ARE CURRENTLY NO DECISIONS SCHEDULED FOR OCTOBER

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
Performance and Programme Management
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

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

Finance
Internal Audit
Information Communications Technology (ICT)
Business Transformation
Strategic Property
Customer Services

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

Family and Communities
Commissioning and Performance
Learning and Skills
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

SCRUTINY COMMISSION FOR HEALTH ISSUES
WORK PROGRAMME 2009/10

| Meeting Date | Item | Progress |
|---|--|----------|
| <p>14 July 2009 (Papers to be despatched on 6 July)</p> | <p style="text-align: center;">New Dental Initiatives</p> <p>To receive a presentation on the new dental initiatives NHS Peterborough are currently undertaking and consultation on the minor oral surgery service. Contact Officer: Sue Stephenson and Diane Siddle, NHS Peterborough and Jane Freeman, NHS Peterborough</p> <p style="text-align: center;">Update on Adult Protection</p> <p>To consider and comment on the quarterly report and identify any areas of concern. Contact Officer: Denise Radley</p> <p style="text-align: center;">Hospital Complaints</p> <p>To consider how the hospital deals with any complaints about its services. Contact Officer: Jane Pigg, Peterborough Hospitals</p> <p style="text-align: center;">Swine Flu</p> <p>To assess readiness to deal with a outbreak of swine flu in the city Contact Officer: Angela Bailey, NHS Peterborough</p> | |
| <p>8 September 2009 (Papers to be despatched on 28 August)</p> | <p style="text-align: center;">NHS Peterborough Strategic Plan</p> <p>To be consulted on the NHS Peterborough Strategic Plan. Contact Officer: Angela Bailey</p> | |

| | | |
|---|--|--|
| | <p>NHAS Peterborough Budgetary Monitoring Report To receive a budgetary report for NHS Peterborough Contact Officer: David Bacon, NHS Peterborough</p> <p>Update on Adult Protection To consider and comment on the quarterly report and identify any areas of concern Contact Officer: Denise Radley</p> | |
| <p>10 November 2009 (Papers to be despatched on 2 Nov)</p> | <p>Quarterly Performance Report on Adult Social Care Services in Peterborough To receive an update on progress and key achievements on the objectives Contact Officer: Tina Hornsby, NHS Peterborough</p> <p>Draft Revised Partnership agreement between the Council and Peterborough PCT in respect of Adult Social Care Services To consider the agreement prior to its submission to Cabinet Contact Officer: Denise Radley</p> | |
| | <p>NHS Peterborough Budgetary Monitoring Report To receive a budgetary report for NHS Peterborough, including budget proposals to be recommended to Cabinet Contact Officer: David Bacon, NHS Peterborough</p> | |
| | <p>Update on Adult Protection To consider and comment on the quarterly report and identify any areas of concern. Contact Officer: Denise Radley</p> | |

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| <p>12 January 2010 (Papers to be despatched on 4 Jan)</p> | <p style="text-align: center;">Budget 2010/11</p> <p>To consider and comment on the Executive's proposals for the 2009/10 budget, including the Draft Annual Accountability Agreement.</p> <p>Contact Officer: John Harrison</p> | | |
| | | | |
| | <p style="text-align: center;">Annual Review of Performance</p> <p>To consider and comment upon the annual review letter on Adult Social Care performance from Commission for Social Care Inspections (CSCI)</p> <p>Contact Officer: Denise Radley</p> | | |
| <p>9 March 2010 (Papers to be despatched on 1 March)</p> | <p style="text-align: center;">Standards for Better Health (Annual Health Check)</p> <p>(i) To endorse the Commission's comments for inclusion with all local NHS Trust submissions to the Healthcare Commission</p> <p>(ii) To consider the declarations of compliancy of all the local NHS Trusts prior to their submission to the Healthcare Commission</p> <p>Contact Officer: Lindsay Tomlinson</p> | | |
| | <p style="text-align: center;">Quarterly Performance Report on Adult Social Care Services in Peterborough</p> <p>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</p> <p>Contact Officer: Tina Hornsby, NHS Peterborough</p> | | |
| | <p style="text-align: center;">NHS Peterborough Budgetary Monitoring Report</p> <p>To receive a budgetary report for NHS Peterborough</p> <p>Contact Officer: David Bacon, NHS Peterborough</p> | | |

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| | <p>Update on Adult Protection</p> <p>To consider and comment on the quarterly report and identify any areas of concern.</p> <p>Contact Officer: Denise Radley</p> | |
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Items to be scheduled:

Coronary Heart Disease – major item to look at various aspects
Health Services for people with learning disabilities