

SCRUTINY COMMISSION FOR HEALTH ISSUES

TUESDAY 15 MARCH 2016

7.00 PM

Bourges/Viersen Room - Town Hall

AGENDA

Page No

- 1. Apologies**
- 2. Declarations of Interest and Whipping Declarations**

At this point Members must declare whether they have a disclosable pecuniary interest, or other interest, in any of the items on the agenda, unless it is already entered in the register of members' interests or is a "pending notification" that has been disclosed to the Monitoring Officer.

Members must also declare if they are subject to their party group whip in relation to any items under consideration.
- 3. Minutes of Meeting Held on 13 January 2016** **3 - 10**
- 4. Call In of any Cabinet, Cabinet Member or Key Officer Decisions**

The decision notice for each decision will bear the date on which it is published and will specify that the decision may then be implemented on the expiry of 3 working days after the publication of the decision (not including the date of publication), unless a request for call-in of the decision is received from any two Members of a Scrutiny Committee or Scrutiny Commissions.. If a request for call-in of a decision is received, implementation of the decision remains suspended for consideration by the relevant Scrutiny Committee or Commission.
- 5. Cabinet Member for Public Health Portfolio Progress Report** **11 - 26**
- 6. Cambridgeshire Community Services General Practice Out Of Hours Service: Care Quality Commission Report Findings** **27 - 30**
- 7. Peterborough and Stamford Hospitals NHS Foundation Trust**
 - 7.1 Operational Links Between Hinchingsbrooke and Peterborough and Stamford Hospitals NHS Foundation Trust** **31 - 34**
 - 7.2 Peterborough and Stamford Hospitals - Pathology Services** **35 - 36**
- 8. Older Peoples' and Adult Community Services Contract Update** **37 - 38**

9.	Minor Illness And Injury Unit Update	39 - 42
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11.	Forward Plan of Executive Decisions	53 - 86



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 Philippa Turvey on 01733 452460 as soon as possible.

Emergency Evacuation Procedure – Outside Normal Office Hours

In the event of the fire alarm sounding all persons 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 (Chair), J Stokes, K Aitken, R Ferris (Vice Chairman), F Fox, L Ayres and A Shaheed

Substitutes: Councillors: P Thacker, N Shabbir, J Whitby and D Fower

Further information about this meeting can be obtained from Philippa Turvey on telephone 01733 452460 or by email – philippa.turvey@peterborough.gov.uk



**MINUTES OF A MEETING OF THE SCRUTINY COMMISSION FOR HEALTH ISSUES
HELD IN THE BOURGES / VIERSEN ROOMS, TOWN HALL
ON 13 JANUARY 2015**

Present: Councillors B Rush (Chairman), J Stokes, K Aitken, R Ferris, (Vice-Chairman) F Fox, L Ayres and A Shaheed

Also present

David Whiles	Healthwatch
Jessica Bawden	Director of Corporate Affairs, C&P CCG
Dr Fiona Head	Director of the Cambridgeshire and Peterborough System Transformation Programme
Sam Leak	Head of Operations, Renal, Respiratory, Cardiac and Vascular Clinical Management Group
Geraldine Ward	General Manager Renal and Transplant, the University Hospitals of Leicester NHS England
David Heason	NHS England
Mark Gedney	Financial Systems Manager
Dr Neil Modha	The Cambridgeshire and Peterborough CCG Chief Clinical Officer

Officers Present:

Liz Robin	Director of Public Health
Adrian Chapman	Service Director Adult Services and Communities
Pippa Turvey	Senior Democratic Services Officer

1. Apologies

No apologies were received.

2. Declarations of Interest and Whipping Declarations

Councillor Stokes declared that she was temporarily covering the role of Cabinet Advisor for Children's Safeguarding on a voluntary basis. There were no declarations of interest or whipping declarations.

3. Minutes of Meetings Held on 5 November 2015

The minutes of the meetings held on 17 September 2015 were approved as an accurate record.

4. Call-in of any Cabinet, Cabinet Member or Key Officer Decisions

There were no requests for Call-in to consider.

5. Combined Report of the Cabinet Member for Integrated Adult Social Care and Health, and the Service Director for Adult Services and Communities

The report was introduced by the Service Director for Adult Services and Communities. The report provided an overview of the work of the Adult Social Care service which formed part of the Adults and Communities Department, and incorporated both the Cabinet Member's progress report and the Service Director's performance report.

Observations and questions were raised and discussed including:

- The Commission questioned what action was being taken to raise public awareness.
The Service Director for Adult Services and Communities advised that there was a dedicated information officer for adult social care. The relevant web pages were being improved and the 'front door' for customers was being redesigned. Following the redesign a trained member of staff would be the first person customers spoke to in customer services.
- It was queried what 'building capacity' meant in this context and whether there was a limit.
The Service Director for Adult Services and Communities explained that often voluntary agencies were more effective at delivering services, however this provision was ad hoc at the current time. Investment would be made to set up an 'innovation partnership', whereby co-commissioning could be carried with the voluntary sector.
- The Commission noted the results of the carers survey and raised concerns that 35% of respondents did not find information and advice about support, services or benefits easy to find.
The Service Director for Adult Services and Communities agreed that there was room for improvement. It was advised that ward specific actions plans were in place to address these issues and that the redesign of the 'front door' would assist to integrate the Council with other health colleagues.
- The Commission discussed the attendance of carers to peoples' homes and the problems arising from short visits.
The Service Director for Adult Services and Communities advised that this was a national problem, however 15 minute appointments were not used in Peterborough. Discussion were taking place with other providers to introduce a process to monitor and ensure that obligations were met.
- The Commission sought clarification on mental capacity and deprivation of liberty safeguards and whether applications had increased.
The Service Director for Adult Services and Communities commented that demand had increased and that a further investment of £280,000 had been proposed to assist this work. The judicial process was under pressure and consultation had been made by the Law Commission on a change to the system.
- In relation to the survey statistics provided, that Commission noted that the data had only just been published, however the results were for 2014/15.
The Service Director for Adult Services and Communities explained that there was often a delay in the publication of national survey results as they required validation.

ACTION

The Commission noted the report.

6. Cambridgeshire and Peterborough Health and Care System Transformation Programme

The report was introduced by the Director of the Cambridgeshire and Peterborough System Transformation Programme and the Director of Corporate Affairs, Cambridgeshire and Peterborough Clinical Commissioning Group (CCG). The report provided an update on the planning process of the System Transformation Programme.

Observations and questions were raised and discussed including:

- The Commission suggested that alternative engagement approaches should be considered, as 'drop in session' were not well attended.
The Director of the Cambridgeshire and Peterborough System Transformation Programme agreed that using a variation of engagement methods was important to capture a wider section of the population. The focus group had taken a more focused approach, undertaking a number of exercises to improve the quality of engagement.
- The Commission enquired as to what the next steps for the Programme were.

The Director of the Cambridgeshire and Peterborough System Transformation Programme informed the Commission that the information received would be used to assess the best use of money to improve services. A consultation had initially been aimed for early 2016, however was now estimated not to take place before Autumn 2016.

- The Commission asked for further detail on how the Council was involved in the Vanguard programme.

The Director of Corporate Affairs, Cambridgeshire and Peterborough CCG advised that the Council was involved in the new Programme Board, on which the Local Chief Officer, Borderline and Peterborough LCG and the Corporate Director People and Communities held seats. The Vanguard Programme fed into the System Transformation Programme

- The Commission queried how the new Government guidance issued in December 2015 would feed into this programme.

The Director of the Cambridgeshire and Peterborough System Transformation Programme advised that the guidance had shifted the basis of work to 'place', health and wellbeing and efficiency. A Sustainability Transformation Plan was to be created with partners to provide a sign off process for funds that come into the service in 2017/18.

- The Commission questioned that current issues with weekend health services, as highlighted in the media.

The Director of the Cambridgeshire and Peterborough System Transformation Programme advised that she had not had sight of the relevant data, however felt that the service had improved in the past year with the introduction of care plans.

The Director of Corporate Affairs, Cambridgeshire and Peterborough CCG clarified that a joint call took place each weekend to discuss the pressure points. It was noted that disparity was more apparent for different seasons than between weekdays and weekends.

- The Commission commented that the data provided within the 'Fact Packs' were useful. It was queried why a number of percentages, such as caesarean sections, were higher in Peterborough than elsewhere.

The Director of the Cambridgeshire and Peterborough System Transformation Programme clarified that the data had not come from the System Transformation Programme. She would be happy, however, to investigate whether the level of caesarean sections in Peterborough was appropriate.

ACTION

The Commission noted the report.

The Commission agreed to alter the order of the remaining agenda items.

7. Peterborough Renal Haemodialysis Capacity Consultation

The report was introduced by the Head of Operations, Renal, Respiratory, Cardiac and Vascular Clinical Management Group and the General Manager Renal Transplant, the University Hospitals of Leicester. The report provided the Scrutiny Commission for Health Issues with assurance on Peterborough Renal Haemodialysis Capacity Consultation progress to date.

The Head of Operations, Renal, Respiratory, Cardiac and Vascular Clinical Management Group provided an update to the report and informed the Commission, with the permission of the tender applicant, that one bid had received for Lot 1. Lot 1 was for a small satellite unit within 6 miles of Peterborough Hospital. The bidder was Peterborough Hospital in partnership with Renal Services. The contract award decision was expected to be sent in February 2016, with work to commence in March 2016, subject to the University Hospitals of Leicester's Revenue and Investment Committee agreement to support the tender application.

The General Manager Renal and Transplant, the University Hospitals of Leicester provided an overview of a patient consultation group held on 10 January 2016. The Commission suggested

that invitations to events be circulated to Councillors separately, to encourage greater participation.

ACTION

The Commission noted the report.

8. Adult Social Care Charging Review

The report was introduced by the Financial Systems Manager. The report sought the views of the Scrutiny Commission for Health Issues on a number of proposed changes to Peterborough City Council's adult social care charging policy.

Observations and questions were raised and discussed including:

- *The Financial Systems Manager advised that charging for adult social care did not overlap with the UK tax and National Insurance payments, as they were two separate systems.*
- The Commission questioned the low engagement response.
The Financial Systems Manager clarified that previous engagement with the public about the adult social care charging policy had been part of a wider consultation. It was suggested that it would be beneficial to adopt this approach again in future to encourage greater involvement and participation.
- The Commission inquired as to whether the income generated from the policy would be ring-fenced for re-investment in adult social care services.
The Financial Systems Manager was not able to confirm such, however would feed back on the matter to Cabinet.
- The Commission raised concern over the inclusion of an administration fee.
The Financial Systems Manager advised that this was a nominal fee and would be a reasonable figure that would not exceed the actual costs incurred.
- The Commission sought clarification on what services individuals in prison would receive.
The Financial Systems Manager explained that, as a result of the Care Act, the Local Authority was now responsible for the adult social care to prisoners. In reality it would affect only a small number of people.
- The Commission raised concerns that individuals with capital just above the threshold for would be hit the hardest and would be put off from using the services.
The Financial Systems Manager advised that the focus of Adult Social Care had shifted in the past few years towards prevention, and maximising people's independence. The care services that were initially provided to support these aims (reablement, occupational therapy, assistive technology) were free of charge, so were provide irrespective of people's capital or income levels. The charging policy was not therefore designed to deter people from services, but to ensure that those who could afford to pay for their long term care did so.
- The Liberal Democrat Group Leader commented that this proposals was being presented as a budget saving of approximately £260,000. Under the recent central Government finance settlement for Local Authorities, an increase in Council Tax of up to 2% has been encouraged, ear marked for adult social care. This would amount to £1.2 million. It was questioned, in light of this, whether an increase in charges was necessary.
The Service Director for Adult Services and Communities responded that the £1.2 million referred matched the current pressure on care providers to meet the requirements of the nation living wage. The Council had already committed to meet this requirement, in order to support the infrastructure of the local care market.

RECOMMENDATIONS

The Commission made the following recommendations:

1. That option one in respect of the charging policy proposals, 'Agree to the changes and apply these from the earliest available opportunity as part of the routine financial assessment process,' is the preferred approach; and
2. That income generated from the Adult Social Care Charging Policy be ring-fenced for re-investment in adult social care services.

ACTION

The Commission noted the report.

9. Older Peoples' and Adult Community Services Contract Transfers to Cambridgeshire and Peterborough Clinical Commissioning Group

The report was introduced by the Director of Corporate Affairs, Cambridgeshire and Peterborough CCG. The report provided an overview of the contract transfer of Older Peoples' and Adult Community Service to Cambridgeshire and Peterborough CCG.

Observations and questions were raised and discussed including:

- The Commission questions how much money the CCG had to provide to support Uniting Care for the past 9 months.
The Cambridgeshire and Peterborough CCG Chief Clinical Officer advised £8-10 million had been provided on top of what had been originally budgeted. This money had gone towards patient care.
- The Commission were pleased with the report and that work was being done to stabilise the service in light of the problems encountered.
- The Commission sought an explanation on why the contractual arrangements had come to an end.
The Cambridgeshire and Peterborough CCG Chief Clinical Officer advised that a focus review would be carried on into the cause. It was noted, however, that UnitingCare LLP did not feel that the level of funding available was sufficient for the services to be provided.
- The Commission questioned whether any penalty clauses had been built into the contract for such circumstances.
The Director of Corporate Affairs, Cambridgeshire and Peterborough CCG responded that there was such a clause, however both parties were keen to avoid this route in light of the associated legal costs.
- The Commission queried whether the CCG had underestimated the requirements of the contract, in the first instance.
The Cambridgeshire and Peterborough CCG Chief Clinical Officer commented that the financial landscape had changed and that the provisions were considered to be secure when let.
- The Commission questioned how long the CCG could sustain the services.
The Cambridgeshire and Peterborough CCG Chief Clinical Officer advised that there was no intention to go out to tender in the near future. The CCG had previously predicted a surplus budget of £4 million. In light of this contract ending, however, the CCG would be in deficit by £8.4 million at year end. This spending was in order to stabilise the service and was patient care driven.
- The Commission raised concern that a number of established work streams may not be continued.
The Cambridgeshire and Peterborough CCG Chief Clinical Officer confirmed that work was due to be undertaken with partners to establish what aspects of the services were working or not. It was emphasised that patients of the service were secure and that no incidents of harm had been reported. Patient care was the CCG's main priority.

ACTION

The Commission noted the report.

10. Draft Peterborough Health and Wellbeing Board Strategy

The report was introduced by the Director of Public Health. The report sought the views of the Scrutiny Commission for Health Issues on the draft Peterborough Joint Health and Wellbeing Strategy (JHWS) and on the proposed engagement process for stakeholders and the public.

Observations and questions were raised and discussed including:

- The Commission was pleased to see that a number of issues had been collated in one place.
- Concerns were raised regarding how success would be measured and what specific aims had been identified.
The Director of Public Health advised that priorities were being tested at the current time and would lead into a target based approach. Work to develop specific trajectories was still to be done.
- The Commission expressed their hope that the Strategy would feed into the work of every service of the Council. It was further question whether an extended engagement period would be worthwhile, in order to reach greater numbers.
The Director of Public Health clarified that, as additional time had been taken to draft the Strategy, the engagement period was subsequently shorter. Officers were aware of the limited engagement period and an extension was being considered.
- The Commission congratulated the Communications Team on a well-designed product. It was noted, however, that the smaller scale maps were of little practical use, particularly without a key.
- Councillor Sandford, Group Leader of the Liberal Democrats, noted that the Strategy had the capability to feed into the Environment Capital agenda, particularly in terms of the Local Transport Plan. It was further commented that the Council may need to shift its focus from growth towards health and wellbeing.
The Director of Public Health noted the comments and advised that a health specialist had been brought into the Council specifically in relation to the various growth schemes around the city. Growth was a high level strategy, however the Health and Wellbeing Board Strategy would provide clear guidance on such matters.
- The Commission commented that there was opportunity for the Health and Wellbeing Board Strategy to be undermined in certain areas and suggested that Health and Wellbeing in the city needed to be prioritised.

ACTION

The Commission noted the report.

11. Forward Plan of Executive Decisions

The Commission received the latest version of the Forward Plan of Executive Decisions, containing Executive Decisions that the Leader of the Council anticipated the Cabinet or individual Cabinet Members would make during the course of the following four months. Members were invited to comment on the Forward Plan of Executive Decisions and, where appropriate, identify any relevant areas for inclusion in the Commission's work programme.

ACTION AGREED

The Commission noted the Forward Plan of Executive Decisions.

12. Work Programme 2015-2016

Members considered the Commission's Work Programme for 2015/16 and discussed possible items for inclusion.

ACTION AGREED

To confirm the work programme for 2015/16 and the Senior Democratic Services Officer to include any additional items as requested during the meeting including a further report to the Commission at the next meeting on the outcome of the Peterborough Renal Haemodialysis Capacity tender process.

The meeting began at 7.00pm and finished at 9:35pm.

CHAIRMAN

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No.5
15 MARCH 2016	Public Report

Report of Councillor Diane Lamb, Cabinet Member for Public Health

Contact Officer(s) – Dr Liz Robin, Director of Public Health

Contact Details – liz.robins@peterborough.gov.uk, 01733 207175

CABINET MEMBER FOR PUBLIC HEALTH PORTFOLIO PROGRESS REPORT

1. PURPOSE

- 1.1 This report provides an overview of the public health functions of the Council over the past year, including services delivered, public health outcomes achieved, progress made and future plans.

2. RECOMMENDATIONS

- 2.1 The Scrutiny Commission is asked to note and comment upon the progress made since March 2015 and the public health priorities, challenges and opportunities over the coming period.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 This report links to the overall strategic vision for the City Council – improving the quality of life for all its people and communities, and focuses on Strategic Priority 7: Achieve the best health and wellbeing for the City.

4. BACKGROUND

4.1 Adoption of health as a strategic priority

- 4.1.1 The 2015/16 municipal year has seen the adoption of a seventh strategic priority for the City Council ‘Achieve the best health and wellbeing for the City’. Both the Council’s website and the hard copy materials such as posters have been changed to reflect this priority. A manager and staff briefing has encouraged staff to consider and contribute to this priority, alongside other strategic priorities of the Council, in appropriate aspects of their work.

4.2 Cabinet Portfolio Holder for Public Health

- 4.2.1 Following the May 2015 elections the post of Cabinet Portfolio Holder for Public Health was created, with responsibility for the public health functions transferred from the NHS to the City Council as part of the Health and Social Care Act (2012). These functions include:

- To help people live healthy lifestyles and make healthy choices
- To reduce health inequalities between different social groups in the city and amongst hard to reach groups
- To carry out health protection functions delegated from the Secretary of State, in relation to infectious diseases and chemical hazards.
- To ensure that public health advice is available to all local NHS organisations

4.3 Public Health Delivery arrangements

- 4.3.1 The Director of Public Health (DPH) has statutory Chief Officer responsibility for the public health functions outlined in the Health and Social Care Act (2012). The DPH has been seconded into Peterborough City Council from Cambridgeshire County Council for two days a week, which has enabled joint working and efficiencies across the public health functions of the

two Councils. In Peterborough, the commissioning and delivery of statutory public health functions is carried out jointly by the Public Health office and the People and Communities directorate.

4.4 The Public Health Grant to local authorities

4.4.1 Peterborough City Council receives a ring-fenced public health grant from the Department of Health to deliver public health responsibilities and services. At the start of 2015/16, this grant was approximately £9.2M, which was 20% below the target public health grant funding for an area with Peterborough's needs. During 2015/16 central government announced a 6.2% in-year reduction to the public health grant to all local authorities – a reduction of £673,000 in Peterborough. This was covered by using Care Act funding for £450,000 of community and neighbourhood services previously funded by the public health grant, a £50,000 reduction in the sexual health services contract which had already been agreed, a £50,000 reduction in the children's age 0-5 public health services contract, and £123,000 public health grant funding which had been carried over from 2014/15.

4.4.2 A further reduction of 2.2% in the public health grant (in addition to the 6.2% reduction in 2015/16) is planned for 2016/17. Phase 2 budget proposals to be considered by full Council are that, due to the significant public health needs in Peterborough, this reduction should be met through Council funding.

4.5 Wider partnership arrangements

4.5.1 The City Council's public health functions are delivered within the context of wider partnership arrangements for health and wellbeing. These include:

- The work of the Peterborough Health and Wellbeing Board (see 5.2 and 5.3 below)
- The statutory duty to deliver public health advice to NHS commissioners, known as the 'healthcare public health advice service'.
- This service is delivered jointly with Cambridgeshire County Council and agreed annually through a Memorandum of Understanding (MOU) with Cambridgeshire and Peterborough Clinical Commissioning Group.
- Work through the 'Health Protection Steering Group' to protect residents against infectious disease and environmental hazards. Membership includes representatives from Peterborough City Council Public Health, Environmental Health and Emergency Planning; Public Health England; NHS England; C&P Clinical Commissioning Group and Peterborough hospital. More detail is provided in the Peterborough Annual Health Protection Report which will be taken to the Health and Wellbeing Board in March.

5. KEY ISSUES

5.1 Communications

5.1.1 Effective communication of public health information and messages is an important part of overall public health work. This has been taken forward through.

- The Annual Public Health Report 2014/15, which gives an overview of health in Peterborough usual a lot of visual information and pictograms rather than more traditional 'technical' text and tables. This has been presented to the Health and Wellbeing Board and other partnership boards and is on the Council's website. www.peterborough.gov.uk/healthcare/public-health/annual-public-health-report/
- Communication with all Councillors through the monthly Public Health Cabinet portfolio holder report, and through events such as All Party Policy meetings and the Dementia workshop held in October 2015.
- A year-long campaign 'Peterborough: Creating a Healthy City' was launched on February 29 2016. This has been developed by the Council's communications team, working closely with Public Health staff and with input from Public Health England and

local NHS colleagues. The campaign includes a dedicated website www.healthypeterborough.org.uk, together with flags, posters, magazine and newspaper articles, radio and events. It covers a specific health theme each month which has a strong emphasis on what actions people can take themselves to stay healthy, and local support for this – launching with ‘heart health’ in March and ‘stroke’ in April.

5.2 Analysis and public health intelligence

5.2.1 The Peterborough Health and Wellbeing Board has a statutory duty to carry out a ‘Joint Strategic Needs Assessment’ to identify health and wellbeing needs in Peterborough. During 2015, the Public Health Office led the production of:

- An updated ‘Joint Strategic Needs Assessment Core dataset’, which outlines the key health and wellbeing needs in Peterborough, including information broken down to electoral ward level
- A Joint Strategic Needs Assessment on the health and wellbeing of Children and Young People
- A Joint Strategic Needs Assessment on Cardiovascular Disease
www.peterborough.gov.uk/healthcare/public-health/JSNA/

5.2.2 A Joint Strategic Needs Assessment on Adult Mental Health will be presented to the Health and Wellbeing Board in March.

5.3 Joint Health and Wellbeing Strategy

5.3.1 Production of a Joint Health and Wellbeing Strategy is another statutory duty of the Health and Wellbeing Board. This should be designed to meet the needs identified in the Joint Strategic Needs Assessment. The Peterborough Health and Wellbeing Strategy (2012/15) required refreshing, and the Public Health Office has led the collaborative production of a draft Health and Wellbeing Strategy (2016/19) which is currently out for a three month period of engagement and consultation with stakeholders and the public.

www.peterborough.gov.uk/council/consultations/health-and-wellbeing-strategy-consultation/

5.4 Public Health across the work of the Council

5.4.1 Public health responsibilities were transferred from the NHS into local government in 2013, recognising the essential role that local government policies and services play in improving and protecting health. To ensure that public health is fully considered in the wider work of the Council, a Public Health Officer Board was set up, chaired by the Director of Public Health, with the Corporate Director, Growth and Regeneration as vice-chair. The Public Health Board meets bi-monthly to cover a specific theme of the Council’s work, and has Director and senior management representation from across the Council. Examples of public health work across the Council include:

- A health improvement specialist working part-time on a one year secondment in the Growth and Regeneration Directorate to support the health aspects of the Local Plan, Housing Strategy, and Local Transport Plan – as well as more general training and development work with planning officers.
- Feedback from a health improvement specialist into the renewal of the Council’s Licensing Policy.
- A joint commitment with the People and Communities directorate to work on a Healthy Schools programme
- The Peterborough: Creating a Healthy City campaign outlined under para 5.1.

6. PUBLIC HEALTH COMMISSIONING

6.1 Overview of sexual health services

- 6.1.1 The Public Health commissioning team in the People and Communities Directorate has responsibility for commissioning sexual health services. A tender process resulted in a new, fully integrated contraceptive and sexual health service operated by Cambridgeshire Community Services (CCS), now based at Kings Chambers, Priestgate. Results are positive with high levels of service user satisfaction. We also commission long-acting reversible contraception (LARC) implants and removals by GPs.
- 6.1.2 A new sexual health strategic group has been established comprising a wide range of partners and is developing a sexual health strategy for the city. Priorities will include:
- Increase sexual and contraceptive health awareness amongst the local population;
 - Increase detection of sexually transmitted infections (STIs) amongst the local population;
 - Reduce the number of unplanned pregnancies; and
 - Improve early HIV detection within the city to reduce the rate of late diagnosis.

6.2 Commissioning of integrated drug and alcohol service and award of contract

- 6.2.1 During 2015/16 PCC has re-tendered specialist drug and alcohol services, combining the two themes for the first time. The successful bidder was CRi, the current provider of the adult drug treatment service, and work is at an advanced stage to mobilise the new contract with effect from 1st April 2016. The Council anticipates efficiencies from having a combined service whose key outcomes are to:

- Increase the number of people free from drug and alcohol dependence (and substitute medication) and in sustained recovery;
- Improve the health and wellbeing of people with drug and alcohol misuse issues;
- Reduce the harm experienced by individuals, families and the community arising from problematic drug and alcohol use;
- Reduce crime experienced by individuals, families and the community associated with problematic drug and alcohol use; and
- Reduce future demand on health, criminal justice and treatment services.

- 6.2.2 In support of this last outcome, combining all substance misuse work into one contract has also enabled the Council to take responsibility for commissioning the hospital alcohol liaison project on behalf of the CCG, and in conjunction with the Police & Crime Commissioner and the Constabulary, commission specific work to target the P&CC's priorities through an "innovation fund". The priority for 2016/17 will be frequent attenders of police custody suites and we anticipate developing a model that may be transferrable to other frequent users of public services, such as A&E.

- 6.2.3 Historically, successive national policies have delivered greater resource to the treatment of drug misuse and a further anticipated outcome of the new, combined service is to re-balance the treatment system, increasing the proportion of alcohol and non-opiate users in treatment as the proportion of opiate users successfully completing treatment increases.

6.3 Workplace health contract with BITC

- 6.3.1 Peterborough City Council, working in partnership with Cambridgeshire County Council, have agreed a two year contract with Business in the Community (BITC) to work with local employers to support the health and wellbeing of their workforce.

- 6.3.2 The workplace provides an ideal place to promote healthy lifestyles to a large proportion of local residents. Evidence shows that health improvement initiatives within the workplace have positive impacts on employee health resulting in reduced absenteeism and increased productivity, which, in the longer term, will also reduce the burden on health and social care.

6.3.4 Through the programme local businesses will be able to develop health networks, access accredited health champion and mental health training and receive tailored health and wellbeing support such as stop smoking services and health checks for employees.

6.3.5 BITC held their first health and wellbeing networking meeting with local businesses in February 2016 to identify local support needs and opportunities.

6.4 Plans to jointly commission an integrated lifestyle service with the CCG

6.4.1 Work is being undertaken to jointly commission an integrated lifestyle service with the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG), for local people who want help and support to change key behaviours that are adversely affecting their health. Some services are already delivered by City Council public health and other organisations, but are not enough to meet local needs, and could be more effective if integrated. The new integrated lifestyle service will start in early 2017 with a focus on supporting people to change behaviours that either cause or make worse long term health conditions such as heart disease and stroke, diabetes, chronic lung disease, some cancers, and chronic liver disease.

6.4.2 The service will focus on the following key health behaviours:

- smoking/tobacco use
- diets high in sugar, fat and salt and low in vegetables/fruit
- lack of physical activity and long sedentary periods
- maintaining a healthy weight
- alcohol use above recommended limits.

6.5 Commissioning of Children's Public Health Services

6.5.1 Peterborough City Council has been responsible for commissioning school nursing services since April 2013. In October 2015, the commissioning of health visiting and family nurse partnership services also transferred to the City Council from NHS England. These services are provided locally by Cambridgeshire and Peterborough Foundation Trust (CPFT).

6.5.2 When health visiting services were commissioned by NHS England, they were based on the GP practice which a child was registered with, whereas services are now based on the local authority area in which a child lives. A focus of work in the months since the transfer has been to ensure that no children were 'lost' or disadvantaged by these boundary changes. The changes mean that CPFT has taken on the care of additional children who live within the Peterborough City Council area. Another focus is to explore new models for a service for vulnerable teenage mothers, which are more inclusive than the current family nurse partnership model.

6.5.3 The People and Communities Directorate hosts the Cambridgeshire and Peterborough Joint Children's Health Commissioning Unit. This provides an exciting opportunity to 'join up' children's health and wellbeing services to achieve best outcomes and best value, through an integrated procurement of services for 0-19 year olds. The planned procurement would include health visiting, family nurse partnership and school nursing services, but also child and adolescent mental health services (a CCG responsibility) and wider preventive services such as Children's Centres.

7. PUBLIC HEALTH PERFORMANCE

7.1 Performance of locally commissioned/delivered services

7.1.1 High level performance metrics for public health commissioned and delivered services are provided in Annex A. These show that commissioned sexual health and substance misuse services are generally performing well. However services for smoking cessation, health checks, physical activity and children's weight management are not achieving locally set targets. This is

being addressed in the short term by recruitment to additional fixed term posts to support these services. In the medium term, the jointly commissioned integrated lifestyle service outlined in para 6.4 will address performance in these areas of service.

7.2 The Public Health Outcomes Framework

7.2.1 Nationally, the public health outcomes in local authority areas is monitored through the public health outcomes framework (PHOF), which covers five domains:

- Overarching indicators – life expectancy, healthy life expectancy, inequalities in life expectancy.
- Wider determinants of health
- Health improvement
- Health protection
- Premature mortality and population healthcare

7.2.2 There are a total of PHOF indicators, and compared with England as a whole Peterborough does better than benchmark (either the national average, or in a few cases a set target) for 14% of indicators, is similar to benchmark for 51% of indicators and is worse than benchmark for 35% of indicators. PHOF indicators are used to inform the annual public health report (para 5.1) and the Joint Strategic Needs Assessment (para 5.2). They are updated quarterly and are available on website www.phoutcomes.info/. The website enables comparisons with the England average, other local authorities in the East of England, and with Peterborough's CIPFA nearest neighbours (socio-demographically similar local authorities) and provides information on year on year trends.

8. IMPLICATIONS

8.1 This report sets out details of the work being carried out across the Council and partner organisations which will deliver improvements in public health outcomes for Peterborough's residents. We will ensure that Scrutiny Members are kept informed and engaged in this work throughout the process.

9. CONSULTATION

9.1 The joint Health and Wellbeing Strategy for Peterborough is currently out for engagement and consultation.

10. NEXT STEPS

10.1 In addition to next steps already outlined, these will be guided by feedback from the consultation on the HWB strategy.

11. BACKGROUND DOCUMENTS

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

- Annual Public Health Report – www.peterborough.gov.uk/healthcare/public-health/annual-public-health-report/
- Joint Strategic Needs Assessment Core Dataset – www.peterborough.gov.uk/healthcare/public-health/JSNA/
- Draft Health and Wellbeing Strategy – www.peterborough.gov.uk/council/consultations/health-and-wellbeing-strategy-consultation/

12. APPENDICES

- Appendix A – Public Health Services: Performance

Commissioned Services Overview – Peterborough City Council

February 2016

Elizabeth Wakefield - Public Health Analyst

Elizabeth.wakefield@peterborough.gov.uk

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1. Introduction

This document summarises information pertaining to the commissioning of public health services in Peterborough, sourced from data provided by the Public Health delivery and commissioning team.

This document concentrates on the targets and achievements of the following commissioned services:

- Stop smoking service
- Health checks programme
- More Life weight management
- Let's get moving physical activity programme
- Sexual Health and Long-acting reversible contraception (LARC)
- Drugs and Alcohol services.

Further information on some of the topic areas is available via URL: <http://fingertips.phe.org.uk/>




2. Peterborough Stop Smoking Service 2015/16

Quarter 3 results show that 488 year-to-date smoking quits have been achieved in Peterborough, which is 47% of the year-to-date target. Similarly the percentage for performance against quarterly targets stands at 45% which is a decrease in performance achievement upon quarter 2 results. Additionally the percentage of people who have successfully quit at 4 week (Confirmed by CO Monitor) has improved upon the previous quarter's results improving from 71% for quarter 2 to 74% in quarter 3.

Figure 1: Peterborough Stop Smoking Service 2015/16

	Year end target	Per Quarter				Previous quarter	
		Target	Number of people who have successfully Quit at 4 weeks	Performance against quarterly targets	Percentage of people who have successfully Quit at 4 week (Confirmed by CO Monitor)	RAG status	Direction of travel
Quarter 1	1,380	345	162	47%	70%		n/a
Quarter 2		345	172	50%	71%		↑
Quarter 3		345	154	45%	74%		↓

Target = 100% of the target reached

	More than 10% away from target
	Within 10% of target
	Target met




3. Peterborough Health Check Programme 2015/16

Quarter 3 results show that 3,892 year-to-date health checks have been completed in Peterborough, which is 86% of the year-to-date target. Similarly the percentage for performance against quarterly targets stands at 75% which is a decrease in performance achievement upon quarter 2 results. Additionally the percentage of people who been offered a health check that received a health check improved has remained the same as the previous quarter's results.

Figure 2: Peterborough Health Check Programme 2015/16

	Year end target	Per Quarter					Previous quarter	
		Target (received)	Number of patients who received an NHS Health Check	Performance against quarterly targets (received)	Number of patients offered an NHS Health Check	Percentage of people offered a health check that received a health check	RAG status	Direction of travel
Quarter 1	6,060	1,515	1,329	88%	3,985	33%		n/a
Quarter 2		1,515	1,421	94%	2,881	49%		↑
Quarter 3		1,515	1,142	75%	2,313	49%		↓

Target = 100% of the target reached

	More than 10% away from target
	Within 10% of target
	Target met

4. Peterborough More Life - Family Weight Management Programme 2015/16

Quarter 4 results show 68 families year-to-date have completed the 'More Life' weight management programme in Peterborough, which is a 61% year-to-date completion level. The percentage for programme completion for quarter 4 stands at 47% which remains the same completion level as quarter 3 results. Additionally the number of 'More Life' weight management programmes increased between quarter 3 and 4 from one to two.

Figure 3: Peterborough More Life - Family Weight Management Programme 2015/16

	Per Quarter					Previous quarter	
	Number of More Life programmes	Percentage of families beginning the programme that completed the programme	Number of families beginning programme	Number of families completing programme	RAG status	Direction of travel	
Quarter 1	1	54%	28	15	■	n/a	
Quarter 2 (Holiday Club)	1	90%	31	28	■	↑	
Quarter 3	1	47%	17	8	■	↓	
Quarter 4	2	47%	36	17	■	↔	

Target = 100% completing the programme

- More than 10% away from target
- Within 10% of target
- Target met

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5. Peterborough Let's Get Moving Physical Activity Programme 2015/16

Quarter 3 results show 70 people year-to-date have completed the 'Let's Get Moving' physical activity programme in Peterborough, which is a 45% year-to-date completion level. Similarly the percentage for programme completion stands at 56% which is an improvement on quarter 2's 40% completion results. Additionally the number of 'Let's get moving' physical activity programmes has decrease between quarter 1 and 2 from four physical activity programmes to three.

Figure 4: Peterborough Let's Get Moving Physical Activity Programme 2015/16

	Per Quarter					Previous quarter
	Number of Let's Get Moving programmes	Percentage of people beginning the programme that completed the programme	Number of people beginning programme	Number of people completing programme	RAG status	Direction of travel
Quarter 1	4	42%	55	23		n/a
Quarter 2	3	40%	55	22		↓
Quarter 3	3	56%	45	25		↑

Target = 100% completing the programme

	More than 10% away from target
	Within 10% of target
	Target met

6. Peterborough Adult Drugs Service 2015/16

There has been a small decrease in the percentage of drug users in treatment between quarters 1 and 2 however it is still above national average (KPI 1). Peterborough also maintains a penetration level of above 58% for both quarter 1 and 2. Additionally Peterborough also maintains an opiate/crack completion level which remains in the upper quartile of Peterborough's cluster group.

Figure 5: Peterborough Adult Drugs Service 2015/16

		Quarter 1	Quarter 2
Number of people in treatment (opiate)	New presentations	144	
	Total in treatment	722	
Number of people in treatment (non-opiate)	New presentations	57	
	Total in treatment	90	
KPI 1 Maintain an increase of drugs users into treatment by at least 1% above the national average	Peterborough	96.6%	96.2%
	England	89.6%	89.7%
	RAG status	Target met	
Maintain a penetration level of at least 58%	Peterborough	65.9%	63.7%
	RAG status	Target met	
KPI 2 Maintain the number of opiate/crack users (OCUs) who successfully complete treatment as a proportion of the total number in treatment in line with the upper quartile of Peterborough's cluster group	Peterborough	9.7%	9.5%
	Upper Quartile range	8.61% - 12.43%	8.22% - 14.05%
	RAG status	Target met	

 Target not met
 Target met

7. Peterborough Adult Alcohol Service 2015/16

All of Peterborough's target requirements have been met for quarter 1 and 2 with 136 new presentations to the adult alcohol service. The combined discharge in care planned way/referred on indicators remain above 75% for both quarters with an achievement level of 77.3% for quarter 1 and an achievement level of 75.3% for quarter 2.

Figure 6: Peterborough Adult Alcohol Service 2015/16

		Quarter 1	Quarter 2
Number of people in treatment	New presentations	136	
	Total in treatment	254	
Upload data requirements for Core Dataset H to NATMS by set deadlines	Peterborough	Achieved	Achieved
	RAG status		
100% of care plans started	Peterborough	Achieved	Achieved
	RAG status		
75% discharged in a care planned way/referred on	Planned exits	72.0%	71.8%
	Transferred not in custody	5.3%	3.5%
	RAG status		
Evaluate service user experience	Peterborough	Achieved	Achieved
	RAG status		
Provide narrative to accompany report to explain data issues, trends and new service activity/developments	Peterborough	Achieved	Achieved
	RAG status		

 Target not met
 Target met

8. Peterborough Young People and Family work substance misuse service 2015/16

Quarter 2 shows an increase in the number of young people receiving structured treatment compared to quarter 1. 20% of young people receiving treatment during quarter 1 stopped their drug or alcohol misuses by the end of the reporting period. This rate increased to 28% by quarter 2. Similarly 21% of young people during quarter 1 and 29% of young people by quarter 2 had reduced their drug/alcohol uses by the end of the reporting period.

Figure 7: Peterborough Young People and Family work substance misuse service 2015/16

		Quarter 1	Quarter 2
Structured treatments commenced with vulnerable young people under the age of 18	Peterborough	76	82
	Direction of travel	n/a	↑
Of whom the number who stopped their drug and/or alcohol misuse at the end of the reporting period	Peterborough	15	23
	Direction of travel	n/a	↑
Of whom the number who had reduced their drug and/or alcohol use at the end of the reporting period	Peterborough	16	24
	Direction of travel	n/a	↑

9. Peterborough Sexual health service 2015/16

The percentage of people with STI needs seen or assessed by a healthcare professional within 2 working days of first contact was 89% in December 2015, above the target of 80%. The number of IUCD insertions and checks decreased between quarters 2 and 3. Similarly, the number of Implanon/Nexplanon insertions and removals decreased between quarter 2 and 3.

Figure 8: Peterborough sexual health service 2015/16

		Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15
Number of people in treatment	New Attendances	766	749	871	778	696	913	894	768	732
	Follow up Attendances	818	759	839	855	723	933	956	797	848
	Total Attendances	1584	1508	1710	1633	1419	1846	1850	1565	1580
% of people with STI needs seen or assessed by healthcare professional within 2 working days of first contact	Target Measure 80%	97%	97%	95%	76%	55%	81%	86%	89%	89%
	RAG status	Target met			Target not met		Target met			

 Target not met
 Target met

		Quarter 1	Quarter 2	Quarter 3
Number of IUCD Insertions	Peterborough	152	169	117
	Direction of travel	n/a	↑	↓
Number of IUCD 6 week checks	Peterborough	46	91	72
	Direction of travel	n/a	↑	↓
Number of Implanon/Nexplanon insertion	Peterborough	186	191	145
	Direction of travel	n/a	↑	↓
Number of Implanon/Nexplanon removal	Peterborough	171	173	151
	Direction of travel	n/a	↑	↓

SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No.6
15 MARCH 2016	Public Report

Report of Jill Houghton, Director of Quality, Safety & Patient Experience, Cambridgeshire and Peterborough Clinical Commissioning Group

Contact Officer(s) – Cambridgeshire and Peterborough CCG Engagement Team
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CAMBRIDGESHIRE COMMUNITY SERVICES GENERAL PRACTICE OUT OF HOURS SERVICE: CARE QUALITY COMMISSION REPORT FINDINGS

1. PURPOSE

- 1.1 The purpose of this report is to present to the Scrutiny Commission the findings of the Care Quality Commission (CQC) Inspection findings of the Cambridgeshire Community Services NHS Trust (CCS) GP Out of Hours service, based at the City Care Centre, Peterborough that took place 3 and 4 November 2015. This service is commissioned by Cambridgeshire and Peterborough CCG.

2. RECOMMENDATIONS

- 2.1 Note the report, the oversight process that is in place and the improvement being made against the agreed improvement plan. The Scrutiny Commission are also asked to note the proposed changes to the Provider of this service from 1 April 2016.

3. BACKGROUND

- 3.1 The outcome of the CQC inspection resulted in an overall rating of Inadequate for the Cambridgeshire Community Services NHS GP Out of Hours Service. The performance of this service is measured against the *National quality Requirements in the Delivery of Out of Hours Services, October 2004*.
- 3.2 The CQC reported that they found the service inadequate in the following domains:
- Providing safe and effective services, and
 - Being well led.
- 3.3 As a result of this rating, the service has been placed in Special Measures.
- 3.4 The CQC report also noted performance in the following domains:
- Providing responsive services - Requires Improvement, and
 - Providing a caring service – Good.

4. KEY ISSUES

- 4.1 The key findings across all areas inspected were as follows :
- Patients were at risk of harm because systems and processes were not always in place to keep them safe e.g. the triage process was unsafe because nurses were undertaking tasks without the support of triage protocols and guidance or evidence of appropriate training.
 - Staff were clear about reporting incidents, near misses and concerns. However the scope for on-going learning and improvement from incidents was limited.

- The system for assessing the competency of staff who were administering medicines under PGD was not effective.
- Staff files and recruitment procedures were not documented or governed thoroughly.
- There was insufficient assurance to demonstrate people received effective, timely care and treatment. For example, response times for call backs to patients.
- Patients were positive about their interactions with staff and said they were treated with compassion and dignity.
- Consumable clinical equipment was found to be out of date in some areas, for example gauzes in the storage cupboards and care.
- Safeguarding referral processes were not audited and there was no process in place to ensure that safeguarding referrals had been tracked and effectively followed up.
- Leadership arrangements were ineffective due to a lack of understanding between the Board and frontline delivery of the Out of Hours Service.
- Governance arrangements were fragmented and ineffective with clinical and managerial leads having limited oversight of the risks to patients and to staff.

5. IMPLICATIONS

- 5.1 Possible implications include immediate concerns regarding patient safety and patient experience.
- 5.2 There were also possible implications to be considered in respect of the other services delivered by Cambridgeshire Community Services NHS Trust (CCS).

6. NEXT STEPS

- 6.1 Prior to publication of the CQC report (4 Feb 2016), a Quality Summit was held by the CQC and a recovery improvement plan developed – this has been in place since November 2015. This plan is monitored on a weekly basis by a joint CCS/CCG Oversight Group and is progressing to timescale and demonstrating the required level of improvement. It is expected this will be fully completed by April 2016.
- 6.2 There is further scrutiny and assurance of all CCS services provided in Cambridgeshire and Peterborough through a monthly Clinical Quality Review process, which reports to the CCG Patient Safety and Quality Committee.
- 6.3 Prior to the date of the CQC inspection in early November 2015, Cambridgeshire Community Services were in the process of finalising plans to sub-contract the operational management of the NHS GP Out of Hours Service to the local NHS 111 provider, Herts Urgent Care. The plans were subsequently put on hold, pending the outcome of the CQC inspection.
- 6.4 With effect from 1 January 2016, CCS engaged the services of Herts Urgent Care to provide management oversight and guidance to the Peterborough Out of Hours Service rather than a full sub contract arrangement. This is in place until 3rd March 2016, after which the current contract with CCS will terminate.
- 6.5 Herts Urgent Care has been commissioned to provide the Out of Hours Service for the Peterborough area for the period from 1 April 2016 to 19 October 2016. The NHS 111 service provided by Herts Urgent Care for Cambridgeshire & Peterborough has been co-located at the City Care Centre in Peterborough with the CCS Out of Hours Service since November 2012.

6.6 The CCG are in the process of procuring an Integrated Urgent Care Model for NHS 111/Out of Hours with plans to award contract and mobilise by the 1 November 2016.

7. BACKGROUND DOCUMENTS

7.1 Cambridgeshire Community Services NHS Trust (CCS) GP Out of Hours Services at City Care Centre, Peterborough (4 Feb 2016)

<http://www.cqc.org.uk/location/RVVY2>

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No.7(i)
15 MARCH 2016	Public Report

Report of the Stephen Graves, Chief Executive Officer, Peterborough and Stamford Hospitals NHS Foundation Trust

**Contact Officer(s) – Jane Pigg, Company Secretary, Peterborough and Stamford Hospitals NHS Foundation Trust
Contact Details – 01733 677926**

HINCHINGBROOKE AND PETERBOROUGH AND STAMFORD HOSPITALS NHS FOUNDATION TRUST COLLABORATIVE PROJECT BOARD

1. PURPOSE

1.1 This information is for Scrutiny Committee members to use, if necessary, should any questions about the collaboration work between PSHFT and HHCT be directed to them. This information has been agreed by both Trusts for external use.

2. RECOMMENDATIONS

2.1 The Committee to note the content of this briefing on the HHCT/PSHFT Collaboration Project.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

3.1 N/A

4. BACKGROUND

4.1 Both Trusts have signed a Memorandum of Understanding which sets out terms for working together to consider how they could collaborate clinically to develop more sustainable services and improve outcomes for patients, how they might benefit from sharing of ‘back office’ functions, plus examine the potential benefits of any changes to organisational form.

4.2 This project is part of the wider Cambridgeshire and Peterborough work to develop a Sustainability and Transformation Plan (a national requirement) by June 2016.

5. KEY ISSUES

5.1 The following organisational form options are being considered as part of this work:

Option 1 – Do nothing for now.

Option 2 – Some clinical collaboration and back office shared working.

Option 3 – Single operational and back office function, joined up clinical teams, but two separate board of directors and each organisation remaining a separate entity.

Option 4 – Full merger of both Trusts.

5.2 Potential merging of ‘back office’ services would include departments that are not directly involved in delivering patient care, including the boards of both Trusts and departments such as Finance, HR, IT and specific leadership/management roles.

5.3 Collaboration of clinical services involves all specialties delivered by both organisations.

5.4 The work **does not** include any review of maternity services or emergency care provided by either Trust. However, a national report on maternity services (Baroness Cumberledge’s

Maternity Review) has recently been published and includes recommendations that all Trusts need to consider. In addition, urgent and emergency care provision, including the designation of local sites and services, is currently under review as part of the national Urgent and Emergency Care Vanguard programme, which is being led by Cambridgeshire and Peterborough Clinical Commissioning Group.

- 5.5 A review of paediatric services is also taking place as part of the CCG-led Sustainability and Transformation Plan. These are all national-level reviews outside of the control of each Trust and will have to be responded to as and when any outcomes are reached.

6. IMPLICATIONS

- 6.1 N/A

7. CONSULTATION

- 7.1 Engagement with staff and stakeholders is underway.

8. NEXT STEPS

8.1 Current messages – February 2016

- 8.1.1 Since making the announcement in early January, about the plans for both Trusts to work together to examine the benefits of working more collaboratively in the future, hundreds of staff in both hospitals have attended open forum sessions with their respective CEOs to pose questions and share comments.
- 8.1.2 The Trusts are working with their local and regional union reps to ensure staff can direct any concerns through them if they feel unable to pose a query through internal channels.
- 8.1.3 Work continues on scoping the benefits of closer working – from sharing of some services through to a merger option. Key areas of focus are options that will help us deliver clinically sustainable services and improved outcomes for patients.
- 8.1.4 This scoping work is likely to be complete in April by when the boards of each Trust will make a decision based upon the outcome of this work.
- 8.1.5 The work is being overseen by a Project Board, made up of executives and non-executives from both Trusts and our regulators, which meets fortnightly.
- 8.1.6 Several joint board sessions are planned to be held between now and April to discuss progress of the project.
- 8.1.7 The chairmen from both Trusts are meeting with Huntingdon MP Jonathan Djanogly after he raised concerns about the impact this work might have on the future of some services at Hinchingsbrooke Hospital. This meeting is taking place in March. The Chairs are also engaging/meeting with other local MPs.
- 8.1.8 Both Trusts are keeping their local authority Overview and Scrutiny Committees (for health) briefed on the work as it develops.

9. BACKGROUND DOCUMENTS

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

- 9.1 None.

10. APPENDICES

- 10.1 None.

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No.7(ii)
15 MARCH 2016	Public Report

Report of the Stephen Graves, Chief Executive Officer, Peterborough and Stamford Hospitals NHS Foundation Trust

**Contact Officer(s) – Jane Pigg, Company Secretary, Peterborough and Stamford Hospitals NHS Foundation Trust
Contact Details – 01733 677926**

PETERBOROUGH AND STAMFORD HOSPITALS – PATHOLOGY SERVICES

1. PURPOSE

1.1 In response to a request for information by the Scrutiny Committee.

2. RECOMMENDATIONS

2.1 The Committee to note the content of this briefing on pathology services.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

3.1 N/A

4. BACKGROUND

4.1 N/A

5. KEY ISSUES

5.1 The Trust provides pathology services to the local population. The two primary sources of activity are tests that are requested by GPs and those that are requested by hospital staff.

5.2 The latter is funded as part of a hospital visit, whether outpatient, day case or inpatient. The former is funded through a contract with the CCGs and amounts to about £5.8m.

5.3 In 2011, the then Strategic Health Authority led a competitive procurement process on behalf of commissioners and GPs across the whole of the East of England for the GP workload. This followed a national report on pathology by Lord Carter of Coles, which identified savings across the NHS.

5.4 The contracts let across the East of England were normally for 5 years with an extension of 2 years. This Trust was successful in keeping the work locally, in all other parts of the East of England a consortium of providers won the work.

5.5 GP pathology is capable of being transported around the country; and the UK system of it being carried out in the local hospital is not replicated in the majority of the western world. The norm is for pathology services to be transported, including by air, to a large centre with the results sent electronically to the requesting clinician. The consequence is that such a service is provided at scale and extra marginal activity is very cost effective.

5.6 Therefore the NHS is in a process of consolidation with centralised pathology services and all around us are partnerships of NHS providers, with and without private sector partners delivering the service.

5.7 Trusts therefore need to consider the clinical sustainability and affordability of their service, if

and when there is another contracting round, as GP workload is often half the total number of tests that a pathology laboratory undertakes. It is against this position that this Trust is considering its options.

6. IMPLICATIONS

6.1 N/A

7. CONSULTATION

7.1 N/A

8. NEXT STEPS

8.1 N/A

9. BACKGROUND DOCUMENTS

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

9.1 None.

10. APPENDICES

10.1 None.

SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 8
15 MARCH 2016	Public Report

Report of Jessica Bawden, Director, Corporate Affairs, Cambridgeshire and Peterborough Clinical Commissioning Group

Contact Officer(s) – Cambridgeshire and Peterborough CCG Engagement Team
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OLDER PEOPLES’ AND ADULT COMMUNITY SERVICES CONTRACT UPDATE

1. PURPOSE

- 1.1 The purpose of this report is to update the Scrutiny Commission for Health Issues on the actions taken by the CCG since the announcement that the contractual arrangement between the CCG and UnitingCare was coming to an end.

2. BACKGROUND

- 2.1 Following the announcement on 3 December 2015 that the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and UnitingCare LLP were ending their contractual arrangement to deliver urgent care for the over 65s and adult community services, the Scrutiny Commission for Health Issues received a report at its meeting on 13 January 2016 providing an initial overview of the situation.

3. KEY ISSUES

- 3.1 This report updates the Commission on the actions taken by the CCG since the previous meeting.
- 3.2 Immediately following the announcement the CCG’s priority was to reassure patients that older peoples’ and adult community services were still in place and have not been disrupted by this change.
- 3.3 If patients or carers have any concerns they can call PALS at Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) on the Freephone telephone number 0800 376 0775.

4. SUPPLEMENTARY REPORT

- 4.1 At the time of writing this report, further updated information is not available. Following the outcome of external enquires, a further update will be provided to the Commission at its meeting on 15 March 2016.

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 9
15 MARCH 2016	Public Report

Contact Officer(s):

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MINOR ILLNESS AND INJURY UNIT UPDATE

1. PURPOSE

- 1.1 This report is an information update to the Scrutiny Commission on the work being done to scope the potential for a relocation of the Minor Illness and Injury Unit (MIIU), based at the City Care Centre, Thorpe Road, Peterborough.

2. RECOMMENDATIONS

- 2.1 The Scrutiny Commission is asked to receive and note this briefing report.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 The subject matter of this briefing relates to the NHS Minor Illness and Injury Unit (MIIU) and urgent care walk-in services. These services are important operational units that underpin the delivery of the Peterborough Health and Wellbeing Strategic Objectives. The MIIU service provides seven day access for unscheduled care of minor health problems, illnesses, and injuries.

4. BACKGROUND

- 4.1 In July 2015, the Scrutiny Commission discussed the prospect of relocating the current MIIU service from the City Care Centre to the Peterborough City Hospital site. The Scrutiny Commission heard from Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and Peterborough and Stamford Hospitals NHS Foundation Trust (PSHFT) that they would work together to scope out the feasibility of transferring the MIIU service to the Peterborough City Hospital (PCH) campus. It was made clear that the work was at a very early stage and would need considerable detailed analysis prior to reaching any conclusion to set before the Scrutiny Commission for Health Issues. It was agreed at the last meeting that a lot more work was needed on the early proposals, which is why we are bringing an update to this meeting.
- 4.2 This paper is a briefing to update the Scrutiny Commission on the progress made to decide if it is feasible to relocate the MIIU to the PCH campus. PSHFT appointed Cliniplan Ltd to work on the project. Cliniplan Ltd is an independent clinical planning consultancy providing healthcare capital developments in the NHS and private sector. PSHFT selected Cliniplan Ltd as they had significant relevant experience working in major acute hospitals on projects very similar to this assignment. PSHFT tasked Cliniplan Ltd to gather information on patient activity at both the MIIU service and the Emergency Department (ED) at PCH and to then evaluate whether the MIIU could be re-provided within PCH's ED. Cliniplan Ltd have completed the initial phase of work and PSHFT recently received their interim draft feasibility study, which was shared with the CCG. Earlier this month PSHFT and the CCG's Local Chief Officer met with Cliniplan Ltd to review the interim report and discuss next steps.

- 4.3 The interim draft feasibility study confirmed that it would be possible to relocate the MIU service to the ED at PCH, but that this would depend on a number of internal relocations. This indicated that further work is required to review the practicalities of such a reconfiguration. PSHFT has agreed to take forward the work with Cliniplan Ltd to consider all possible options for optimal reconfiguration of services at the PCH site. This work will include looking at issues of parking at the PSHFT site. The CCG is aware that parking is a significant issue for the commission when considering this relocation. The CCG will work closely with PSHFT to scope where additional parking or reconfigured parking for patients could be considered.
- 4.4 PSHFT and the CCG are committed to working closely together to ensure that the MIU service is developed in accordance with national policy direction for Urgent Care Centres. In recent months, the Cambridgeshire and Peterborough health system was selected for Vanguard status for the fast-track development of urgent and emergency care services. One of only a handful of localities across England with this status, we are expected to accelerate the implementation of national best practice recommendations relating to urgent and emergency care. The co-location of urgent primary care services with emergency departments is consistent with national policy and is aligned with the Peterborough and Borderline System Resilience Group local strategy for the development of urgent and emergency care provision. It is now accepted that there is a confusing range of unscheduled care and support services available, offering different hours of service, and staffed and equipped in different ways; this calls for simplification and co-ordination. In coming months the Vanguard programme will support the changes needed to ensure we have a safe, sustainable urgent and emergency care offer to our public.
- 4.5 Last summer, GPs within Peterborough and Borderline Local Commissioning Group (LCG) were successful in bidding to become one of England's first localities to benefit from the Prime Minister's Challenge Fund (GP Access Fund). This achievement has secured substantial investment into the city of Peterborough to extend primary care access and to bring about GP presence within the hospital ED over extended weekend hours. In recent months this has proved to be a most welcome initiative for the ED team who previously would also have needed to see and treat urgent primary health care-type activity – as well as the much more serious emergency workload. Since the GP in ED service started, it has been well used by the public seeking urgent primary health care advice, care, and treatment. PSHFT looks forward to developing the close working relationships with our local GPs and senior primary care nurses. It is important to promote integrated joint working between the community and the hospital.

5. KEY ISSUES

- 5.1 This briefing discusses work underway in the local NHS that might affect the future location of the MIU, which is based currently at the City Care Centre on Thorpe Road. The NHS bodies are not bringing forward any specific and definitive plans now, but this paper indicates that during 2016 there may be a formal proposal for service change or reconfiguration.

6. IMPLICATIONS

- 6.1 Should PSHFT and the CCG determine at a later date that the current MIU service based at the City Care Centre should be relocated, this would have significant implications city-wide. An impact analysis would be undertaken on any identified implications arising.

7. CONSULTATION

- 7.1 There are no firm proposals for change at the present time. The Scrutiny Commission is not asked to reach any decision as to consultation, but both PSHFT and the CCG have taken note of the Scrutiny Commission's earlier comments (July 2015) on the topics to be addressed during any forthcoming process of consultation. The CCG has a duty to consult on any major service change and, if a consultation on the MIU is needed, we will work with the Scrutiny Commission to ensure that any consultation takes account of its views. Prior to any proposals being set out, PSHFT and the CCG will ensure that the Scrutiny Commission and the Peterborough System Resilience Group partners are advised of any emerging proposals and

take account of feedback from local statutory and non-statutory stakeholders.

8. NEXT STEPS

- 8.1 This paper is an interim briefing on work in progress. PSHFT and the CCG will need to complete the feasibility study for the relocation of the MIIU service and return to the Scrutiny Commission later this year, setting out our conclusions and recommendations for change.

9. BACKGROUND DOCUMENTS

- 9.1 None.

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No.10
15 MARCH 2016	Public Report

Report of the Design and Implementation Group

Contact Officer(s) – Kim Sawyer, Director of Governance, and Councillor Thulbourn, Chairman of the Design and Implementation Group

Contact Details – 01733 452361, kim.sawyer@peterborough.gov.uk

ALTERNATIVE GOVERNANCE ARRANGEMENTS

1. PURPOSE

- 1.1. This report updates Members on the next steps following Council's decision on 27 January 2016 to confirm its earlier decision to adopt a hybrid model of governance to take effect from the Annual Council meeting in May 2016. It agreed the type of hybrid model it would implement and a scrutiny structure that is aligned to the new model.

2. RECOMMENDATIONS

- 2.1. To update Members on the outcome of the Scrutiny Workshops.
- 2.2. To note the actions to be taken following the Annual Council meeting in May to embed the hybrid model and in particular to advise Scrutiny Members of the impact of those proposals on their work programme.
- 2.3. To comment on the induction programme at Appendix B.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 N/A

4. BACKGROUND

- 4.1 The changes to the governance arrangements were reported to Council on 27 January 2016. Council agreed a hybrid model of executive decision making to take effect from the Annual meeting in May. Under our hybrid model, the Leader/Cabinet system of decision making is retained but Scrutiny Committees select decisions they wish to review in advance of the decisions being considered by the Executive. Scrutiny Committees may endorse the proposals or make alternative recommendations on those reports. The Executive will take into account any recommendations before making their final decision. The new role played by scrutiny allows for backbench and opposition members to take part in the formulation of policy and executive decision making and so provides more inclusivity for Members.

- 4.2 In summary, the agreed arrangements are as follows:

- 1) The Chairman of the relevant Scrutiny Committees in consultation with the

relevant Cabinet Member will call forward any executive decisions that should be taken to a scrutiny committee before that particular executive decision is made.

- 2) On the matters selected, the executive report with recommendations will be considered by the Scrutiny Committee the week before it goes to Cabinet or to the Cabinet Member for decision. The Scrutiny Committee will discuss the report and make recommendations to the Cabinet, and in the case of Cabinet Member Decisions, to the relevant Cabinet Member.
- 3) Where the Scrutiny Committee agrees with the Officer recommendations, Cabinet/Cabinet Member note this. Where they disagree a “reference-up” process ensures that Cabinet takes account of this as detailed below.
- 4) To implement this model scrutiny committees had to be aligned to Member and Officer portfolios. Therefore, Council has established the following three Scrutiny Committees: These are:
 - (a) Children and Education Scrutiny Committee
 - (b) Adults, Communities and Health Scrutiny Committee
 - (c) Growth, Environment & Resources Scrutiny Committee

4.3

Each Scrutiny Committee will consist of 10 Members.

5. KEY FEATURES

Pre-Decision Scrutiny

- 5.1. Under the new arrangements, pre-decision scrutiny as described above will take priority over post decision scrutiny. Therefore, the role of scrutiny will significantly change. Every 4-6 weeks before a Cabinet meeting, the forward plan will be published and the Chairman of the relevant Scrutiny Committee in consultation with the relevant Cabinet Member will decide:
 - (a) matters that scrutiny would like to have early involvement in at the policy development stage, for example major policy documents, and
 - (b) those reports coming before an individual Cabinet Member that month or before the next Cabinet meeting that the relevant Scrutiny Committee wishes to see before the decision is made.
- 5.2. All Scrutiny Committees will meet the week before the Cabinet meeting. Any individual Cabinet Member decisions and Cabinet reports that have been selected for pre-decision scrutiny will be put on the agenda of the appropriate Scrutiny Committee.
- 5.3. To avoid any delay in decision making, it is important that these reports are the first items on the Scrutiny Committee agenda. The Committee will discuss the report and the Officer recommendations. The Director submitting the report, or his/her representative, and the relevant Cabinet Member will attend the Scrutiny Committee to answer any questions. The Scrutiny Committee will then decide if it agrees with the Officer recommendations or if it wishes to make alternative recommendations. The Scrutiny Committee will need to give reasons if they make alternative recommendations. The Officer report will then either go to the Cabinet Member to make the decision for Cabinet Member Decision Notices (CMDNs), or to the next meeting of Cabinet if the decision is to be made by the Cabinet. At that

time they will also take account of the Scrutiny Committee's recommendations.

- 5.4. For CMDNs, if a Cabinet Member does not agree with the Scrutiny Committee recommendations, he or she will refer the Officer report to the Cabinet to decide. If the matter is considered by Cabinet and the Cabinet do not agree with the Scrutiny Committee's recommendations, they will give reasons.
- 5.5. If a minority of voting members on the Scrutiny Committee do not agree with the majority's views/recommendations, they may put forward alternative recommendations, known as minority reporting. The minority report will be considered by the Cabinet before it makes its decision. For CMDNs, the matter will be referred up to the Cabinet for decision. The Chairman of the Scrutiny Committee and any Members submitting a minority report will be able to speak in support of their views at the Cabinet meeting.
- 5.6. Cabinet meets 10 times a year but two of these relate to the budget for which there is a separate consultation process. Therefore, Scrutiny Committees will need to meet at least 8 times a year, more frequently than they do now. Officers and Cabinet Members will also need to attend the Scrutiny Committees to answer any questions.
- 5.7. Attached is an example timetable (Appendix A).

Work Programme And Managing Workload

- 5.8. Councillors who attended the scrutiny workshops held in October and December recognised that they would need to manage their work programme differently. They wanted to provide a positive input into decision-making at an early stage; both at the policy development stage and prior to decision making. This work would need to take priority over post decision scrutiny which they saw as lacking influence. However, scrutiny of external partners such as Police and Health remain the same, as Scrutiny Committees still have a statutory responsibility for this work.

The workshop agreed they would use prioritisation to manage their workload as follows:

- (a) Any matters relating to pre-decision scrutiny would take priority.
- (b) Scrutiny Committees would be selective in choosing items for scrutiny for example, choosing two or three themes a year to inform their work programming rather than considering a wide range of issues.
- (c) The agenda and programme should be member-led.
- (d) Once the work programme is set the workshop agreed that Scrutiny Committees should avoid adding other items throughout the year unless absolutely necessary.
- (e) Rather than monitoring a myriad of performance indicators for every function, scrutiny should receive performance indicators on key areas of importance and follow a dashboard/ traffic light system; green for on target; red for target not achieved etc.
- (f) "Items for information" should be circulated outside of committee meetings and should not appear on the agenda.

- 5.9. At the beginning of the municipal year Scrutiny Committees normally hold a planning meeting. The Scrutiny Workshops requested more assistance in deciding their work programme, in identifying priorities and in deciding their information needs to enable them to add value in a much more focused way.
- 5.10. Following the local elections in May and after Council at its Annual meeting has appointed the Members to the Scrutiny Committees, an induction event will be arranged. It is proposed that this is an afternoon/evening event or an all-day event. This will include (a) a session on the hybrid model and how it will work in practice and (b) a work planning session.
- 5.11. The work planning session will be supported by Ed Hammond, Head of Programmes (Local Accountability) at the Centre for Public Scrutiny who supported the workshops. It will include:
- a) Corporate Directors, relevant Service Directors and relevant external bodies who will give an overview of their service areas, and highlight any key issues over the following municipal year, such as future service and legislative changes
 - b) Members will identify their key themes for the following year, and discuss their working arrangements for the year including how they will prioritise their workload.
- 5.12. Ed Hammond will assist Members with their work programme, deciding their future information needs and how they might access them. It would be a key role of the Chairman to lead this work. The proposed programme is attached (Appendix B)
- 5.13. Members' views are requested on the proposed work programme event, and whether this should be a full day event or an afternoon and evening event.

Co-Opted Members

- 5.14. Scrutiny Members at the workshop and Members of the Design and Implementation Working Group recognised the importance of having co-opted members on the new scrutiny committees to reflect additional knowledge, skills and experience which might need to deliver their work programme. Under the revised procedure rules, all scrutiny committees have the ability to co-opt up to four non-voting members. This is in addition to the statutory co-opted Members.
- 5.15. At their first induction meeting, Members will want to discuss the types of experience, knowledge and skills they will need to implement their work programme, and to identify any appointments to any co-opted member positions.

Rural Matters

- 5.16. It was decided not to have a separate rural committee. Councillors when deciding their working arrangements at the work planning stage will want to ensure whether rural issues are adequately represented and how they should be represented in the future.

Charter – Role Of Chair

- 5.17. The Design and Implementation Group recognised that the Chairman would have a much stronger role in managing the agenda, particularly in working with the relevant

Cabinet Member on agreeing items for pre-decision scrutiny and ensuring that the Committee had a manageable work programme. They recommended that there should be a Chairman's charter outlining their rights and responsibilities under the new hybrid model. Members saw the role as:

- (a) Providing leadership to the Committee and managing the business through setting its agenda and work programmes
- (b) Managing the agenda in consultation with committee members to ensure the work of the Committee is member led, and is in accordance with member priorities
- (c) Ensuring that its work primarily focused on pre-decision scrutiny, and adding value
- (d) Leading on the development of the work programme to ensure it is focused
- (e) Working with the relevant Cabinet Members to review the forward plan to identify key issues for pre-decision scrutiny both at the policy development stage or prior to decision making liaising with members of the committee and taking the views of Group Representatives as necessary
- (f) When making recommendations to the executive, ensure there is consensus that members take account of officer advice and where the Committee do not agree with the officer or Cabinet Member recommendations, clear reasons are given
- (g) Ensuring the Committees' input to executive decision making is efficient and effective
- (h) To represent the Committee at Cabinet meetings
- (i) To foster relationships founded on mutual respect and open communications between Directors, the Executive and Scrutiny members

Other Training Matters

- 5.18. In previous years, there has been an induction session on the role of scrutiny for new members and training in chairing skills for Chairman of Scrutiny Committees. Members feedback on the usefulness of this training and any other training requirements would be welcome.

6. IMPLICATIONS

- 6.1. Financial Implications: There are no direct financial costs in relation to this report. The cost of training will be met from the Democratic Services budget. Provision has been made in the budget for the additional cost of supporting this process.

Legal Implications: There are no legal implications in relation to this report.

7. CONSULTATION

- 7.1. Not applicable in the context of this report

8. NEXT STEPS

- 8.1. CMT have set up an Officer Working Group involving cross directorate representatives to work with Democratic Services to ensure that processes are in place to ensure a smooth implementation of the new arrangements. This will include planning the work programming event and induction programme.

9. BACKGROUND DOCUMENTS

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

- 9.1. None.

APPENDICES

- Appendix A – Calendar
- Appendix B – Scrutiny Programming Event

Appendix A
Timetable for revised process (modelled on March 2016 Cabinet meeting)

	Mon	Tues	Wed	Thurs	Friday	Sat	Sun
	February						
	8 Day 43	9 Day 42	10 Day 41	 Day 40	12 Forward Plan published (for Cabinet in March) (At least 28 clear (calendar) days) Day 39	13 Day 38	14 Day 37
	15 Day 36	16 Chairman of Scrutiny & relevant Cabinet Members with officers present to discuss items for pre scrutiny Day 35	17 Day 34	18 Day 33	19 Day 32	20 Day 31	21 Day 30
	22 Day 29	23 Day 28	24 Day 27	25 Day 26	26 Day 25	27 Day 24	28 Day 23
	March						
	29 Day 22	1 Day 21	2 Day 20	3 Day 19	4 Cabinet agenda (part 1) and CMDNs published and included on the agenda of the relevant Scrutiny Committee Day 18	5 Day 17	6 Day 16
	7 Day 15	8 Day 14	9 Day 13	10 Day 12	11 Statutory deadline for publication of Cabinet agenda (part 2) Day 11	12 Day 10	13 Day 9
	14 Scrutiny Committee meeting Day 8	15 Scrutiny Committee meeting Day 7	16 Scrutiny Committee meeting Day 6	17 Scrutiny Recommendations circulated Day 5	18 Day 4	19 Day 3	20 Day 2
	21 Cabinet Day 1	22	23	24	25	26	27

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Induction for Scrutiny Members Working in Peterborough's Hybrid Model

Timing: 1 day or afternoon and evening, or two evenings

Lead: Ed Hammond, Head of Programmes, Local Accountability
Kim Sawyer, Director of Governance

	Lead
<p>Part 1 - Introduction – What is scrutiny? What is Scrutiny?</p> <p>Peterborough's Hybrid Model</p> <p>How we adapt it to the Peterborough model</p> <p>Followed by Questions and Answers</p>	<p>Ed Hammond</p> <p>Kim Sawyer</p>
Break	
<p>Part 2 – Work programming Introduction to Work Programming in Scrutiny Work Programming –The Peterborough model</p>	Ed Hammond
<p>Presentations 10 min presentation from each Director – Highlighting key Challenges, Legislation, and Major Policy Reviews</p> <ul style="list-style-type: none"> - People and Communities - Growth Regeneration and Resources - Resources - Public Health - Governance 	Directors
<p>Producing the Work Programme - Table work Deciding key themes and work programme For example - Major Policies coming up for early review, Any statutory items from Partners What type of performance reports, annual reports – list and do we need them, Common style performance</p>	Members supported by Ed Hammond and Directors
Break – Lunch	
<p>Part 3 - Implementing the work programme including group work</p> <ul style="list-style-type: none"> - Dos and Don'ts - Information needs, sources and how to research 	Ed Hammond
Questions and Answers	
Next Steps	

Attendance

Scrutiny members/CMT/Partners – relevant Cabinet Members/Democratic Services Staff

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SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 11
15 MARCH 2016	Public Report

Report of the Director of Governance

Report Author – Philippa Turvey, Senior Democratic Services Officer

Contact Details – 01733 452460 or email philippa.turvey@peterborough.gov.uk

FORWARD PLAN OF EXECUTIVE DECISIONS

1. PURPOSE

- 1.1 This is a regular report to the Scrutiny Commission for Health Issues outlining the content of the Forward Plan of Executive Decisions.

2. RECOMMENDATIONS

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

3. BACKGROUND

- 3.1 The latest version of the Forward Plan of Executive Decisions is attached at Appendix A. The Plan contains those Executive decisions, which the Leader of the Council believes that the Cabinet or individual Cabinet Member(s) can take and any new Executive decisions to be taken after 4 April 2016.
- 3.2 The information in the Forward Plan of Executive Decisions provides the Commission with the opportunity of considering whether it wishes to seek to influence any of these Executive decisions, or to request further information.
- 3.3 If the Commission wished to examine any of the Executive decisions, consideration would need to be given as to how this could be accommodated within the work programme.
- 3.4 As the Forward Plan is published fortnightly any version of the Forward Plan published after dispatch of this agenda will be tabled at the meeting.

4. CONSULTATION

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

5. BACKGROUND DOCUMENTS

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

- 5.1 None.

6. APPENDICES

- Appendix A – Forward Plan of Executive Decisions

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PETERBOROUGH CITY COUNCIL'S FORWARD PLAN OF EXECUTIVE DECISIONS

PUBLISHED: 4 MARCH 2016

FORWARD PLAN

PART 1 – KEY DECISIONS

In the period commencing 28 clear days after the date of publication of this Plan, Peterborough City Council's Executive intends to take 'key decisions' on the issues set out below in **Part 1**. 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.

If the decision is to be taken by an individual Cabinet Member, the name of the Cabinet Member is shown against the decision, in addition to details of the Councillor's portfolio. If the decision is to be taken by the Cabinet, this too is shown against the decision and its members are as listed below:
Cllr Holdich (Leader); Cllr Coles; Cllr Elsey; Cllr Fitzgerald (Deputy Leader); Cllr Hiller, Cllr Lamb; Cllr North; Cllr Seaton; Cllr Serluca.

This Plan should be seen as an outline of the proposed decisions for the forthcoming month and it will be updated on a fortnightly basis to reflect new key-decisions. Each new Plan supersedes the previous Plan and items may be carried over into forthcoming Plans. 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 Gemma George, Democratic Services Manager, Governance Department, Town Hall, Bridge Street, PE1 1HG (fax 08702 388039). Alternatively, you can submit your views via e-mail to gemma.george@peterborough.gov.uk or by telephone on 01733 452268. For each decision a public report will be available from the Governance Team one week before the decision is taken.

PART 2 – NOTICE OF INTENTION TO TAKE DECISION IN PRIVATE

Whilst the majority of the Executive's business at the Cabinet meetings listed in this Plan will be open to the public and media organisations to attend, there will be some business to be considered that contains, for example, confidential, commercially sensitive or personal information. In these circumstances the meeting may be held in private, and on the rare occasion this applies, notice will be given within **Part 2** of this document, 'notice of intention to hold meeting in private'. A further formal notice of the intention to hold the meeting, or part of it, in private, will also be given 28 clear days in advance of any private meeting in accordance with The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

The Council invites members of the public to attend any of the meetings at which these decisions will be discussed (unless a notice of intention to hold the meeting in private has been given).

PART 3 – NOTIFICATION OF NON-KEY DECISIONS

For complete transparency relating to the work of the Executive, this Plan also includes an overview of non-key decisions to be taken by the Cabinet or individual Cabinet Members, these decisions are listed at **Part 3** and will be updated on a weekly basis.

You are entitled to view any documents listed on the Plan, or obtain extracts from any documents listed or subsequently submitted to the decision maker prior to the decision being made, subject to any restrictions on disclosure. There is no charge for viewing the documents, although charges may be made for photocopying or postage. Documents listed on the notice and relevant documents subsequently being submitted can be requested from Gemma George, Democratic Services Manager, Governance Department, Town Hall, Bridge Street, PE1 1HG (fax 08702 388038), e-mail to gemma.george@peterborough.gov.uk or by telephone on 01733 452268.

All decisions will be posted on the Council's website: www.peterborough.gov.uk/executivedeisions. If you wish to make comments or representations regarding the 'key decisions' outlined in this Plan, please submit them to the Democratic Services Manager using the form attached. For your information, the contact details for the Council's various service departments are incorporated within this Plan.

PART 1 – FORWARD PLAN OF KEY DECISIONS

KEY DECISIONS FROM 4 APRIL 2016

<i>KEY DECISION REQUIRED</i>	<i>DECISION MAKER</i>	<i>DATE DECISION EXPECTED</i>	<i>RELEVANT SCRUTINY COMMITTEE</i>	<i>CONSULTATION</i>	<i>CONTACT DETAILS / REPORT AUTHORS</i>	<i>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</i>
Gladstone Park Community Centre Dual Use Agreement – KEY/04APR16/01 To formalise the agreement between the Community Centre and the school on the dual use areas.	Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University In consultation with Councillor David Seaton Cabinet Member for Resources	April 2016	Strong and Supportive Communities	Relevant internal and external stakeholders.	Caroline Rowan Community Capacity Assistant Manager Tel: 01733 864095 Caroline.rowan@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

<p>Award of Housing Related Support Grants 2016/17 – KEY/04APR16/02 To approve the award of Housing Related Support Grants.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>April 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Sharon Malia Housing Programmes Manager Tel: 01733 863764 Sharon.malia@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
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KEY DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
Transfer of Housing Needs Staff to Serco – KEY/29MAR16/01 To approve the transfer of Housing Needs Staff to Serco as part of the Council's Customer Experience Front Door Programme.	Councillor David Seaton Cabinet Member for Resources in consultation with Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development	April 2016	Strong and Supportive Communities	Relevant internal and external stakeholders.	Belinda Child Head of Housing and Health Improvement Tel: 01733 863769 Belinda.child@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. <i>The decision will include an exempt annexe. By virtue of paragraphs 1&3, information relating an individual and to the financial or business affairs of any particular person (including the authority holding that information).</i>
PREVIOUSLY ADVERTISED DECISIONS						

<p>Delivery of the Council's Capital Receipt Programme through the Sale of Dickens Street Car Park - KEY/03JUL/11 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Corporate Director Resources, the Corporate Property Officer and the Cabinet Member Resources, to negotiate and conclude the sale of Dickens Street Car Park. For Cabinet to consider future options for service delivery.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Consultation will take place with the Cabinet Member, Ward Councillors, relevant internal departments & external stakeholders as appropriate.</p>	<p>Richard Hodgson Head of Strategic Projects Tel: 01733 384535 richard.hodgson@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Sale of the Herlington Centre - KEY/21MAR14/03 Delivery of the Council's capital receipts programme through the sale of the Herlington Centre, Orton Malborne.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>David Gray Capital Projects Officer Tel: 01733 384531 david.gray@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Formalise Integrated Community Equipment Service Funding and Commissioning Arrangements - KEY/18APR14/01 To formalise integrated community equipment service joint funding arrangements.</p>	<p>Councillor Wayne Fitzgerald Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Jenny Beasley Commissioning Manager Tel: 01733 452482 Jenny.beasley@peterborough.ov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Award of Contract for Build of a Waste Transfer Station - KEY/18APR14/02 To award a contract for the build of a waste transfer station.</p>	<p>Councillor Gavin Eley Cabinet Member for Digital, Waste and Street Scene</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Paul Robertson Waste Project Officer Tel: 01733 864740 paul.robertson@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Print Managed Services - KEY/13JUN14/01 To enable Council officers to be able to print, copy and scan.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Vicki Palazon Financial Services Manager – Planning and Reporting Tel: 01733 864104 Vicki.palazon@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>

<p>Classroom Extension and Associated Works Heltwate School - KEY/06MAR15/01 To authorise the construction of an extension at Heltwate School and give authority to the Executive Director of Resources to award the construction contract within the approved budget.</p>	<p>Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University</p>	<p>March 2016</p>	<p>Creating Opportunities and Tackling Inequalities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Brian Howard Head of Schools Infrastructure Tel: 01733 863976 Brian.howard@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Wirrina Car Park – KEY/06MAR15/10 Disposal of Wirrina Car Park to Peterborough Investment Partnership.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital Scrutiny Committee</p>	<p>Relevant internal and external stakeholders.</p>	<p>Richard Hodgson, Head of Strategic Projects 01733 384535 Richard.hodgson@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

KEY DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	CONSULTATION	CONTACT DETAILS / REPORT AUTHOR	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
Real Time Passenger Information – KEY/10JUL15/02 To approve the expansion and maintenance contract.	Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing & Economic Development	March 2016	Sustainable Growth and Environment Capital	Relevant internal and External stakeholders.	Amy Pickstone Senior ITS Officer Tel: 01733 317481 Amy.pickstone@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
Delivery of the Council's Capital Receipt Programme through the sale of Welland House, Dogsthorpe – KEY/24JUL15/01 To authorise the sale of Welland House, Dogsthorpe – (non-key)	Councillor David Seaton Cabinet Member for Resources	March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	David Gray Capital Projects Officer Tel: 01733 384531 david.gray@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

<p>Delivery of the Council's Capital Receipt Programme through the sale of Pyramid Centre, Bretton North – KEY/24JUL15/02 To authorise the sale of the Pyramid Centre, Bretton North.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Gareth Dawkins Capital Projects Officer Tel: 01733 384618 Gareth.dawkins@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHOR</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Sale of Land at Rear of Braybrook School, Orton Longueville – KEY/24JUL15/03 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Corporate Director Resources, the Corporate Property Officer and the Cabinet Member Resources, to negotiate and conclude the sale of Land.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Brian Davies Sales and Acquisitions Tel: 01733 384547 Brian.davies@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Sale of the Lindens, Lincoln Road – KEY/24JUL15/04 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Corporate Director Resources, the Corporate Property Officer and the Cabinet Member Resources, to negotiate and conclude the sale.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Brian Davies Sales and Acquisitions Tel: 01733 384547 Brian.davies@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
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KEY DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<p>Sale of Bretton Court, Bretton North – KEY/24JUL15/05 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Corporate Director Resources, the Corporate Property Officer and the Cabinet Member Resources, to negotiate and conclude the sale.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Brian Davies Sales and Acquisitions Tel: 01733 384547 Brian.davies@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Expansion by One Form of Entry to Jack Hunt Secondary School – KEY/07AUG15/02 To approve expansion by 1 form of entry of Jack Hunt Secondary School to include award of building contracts for the required enhancement of facilities and any legal changes to the schools PFI contract.</p>	<p>Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University</p>	<p>March 2016</p>	<p>Strong and Supportive Communities Scrutiny Committee</p>	<p>Relevant internal and external stakeholders.</p>	<p>Brian Howard Head of Schools Infrastructure Tel: 01733 863976 Brian.howard@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Draft Housing Strategy – KEY/21SEPT15/03 For Cabinet to approve the Strategy for public consultation.</p>	<p>Cabinet</p>	<p>June 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Anne Keogh Housing and Strategic Planning Manager Anne.keogh1@peterborough.gov.uk Tel: 01733 863815</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Passenger Transport Services AMEY – KEY/27NOV15/01 To approve the award of six routes to Amey under the existing contract arrangements.</p>	<p>Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Sara Thompson Team Manager, Passenger Transport Operations Tel: 01733 317452 Sara.thompson@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

<p>Intelligent Transport Systems Infrastructure – KEY/11DEC15/01 To introduce the use of Variable Message Signs (VMS) on the road network to provide real-time driver information.</p>	<p>Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development</p>	<p>December 2015 to Mar 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Peter Tebb Network and Traffic Manager Tel: 01733 453519 Peter.tebb@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>
<p><i>KEY DECISION REQUIRED</i></p>	<p><i>DECISION MAKER</i></p>	<p><i>DATE DECISION EXPECTED</i></p>	<p><i>RELEVANT SCRUTINY COMMITTEE</i></p>	<p><i>CONSULTATION</i></p>	<p><i>CONTACT DETAILS / REPORT AUTHORS</i></p>	<p><i>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</i></p>
<p>Direct Payment Support Service – KEY/11DEC15/02 To approve the direct payment support service.</p>	<p>Councillor Fitzgerald Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health</p>	<p>June 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Jenny Beasley Commissioning Manager Tel: 01733 452482 Jenny.beasley@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

<p>Offtake Arrangements for Power from the Energy Recovery Facility – KEY/25DEC15/01 To approve putting into place arrangements for the sale of heat and/or electricity from the Energy Recovery Facility.</p>	<p>Councillor Gavin Elsey Cabinet Member for Digital, Waste and Street Scene</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Richard Pearn Waste Partnership Manager Tel: 01733 864739 Richard.pearn@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Delegation of Authority under the ASB, Crime and Policing Act 2014 to Registered Social Landlords – KEY/25DEC15/02 To authorise Peterborough City Council to designate authority to registered social landlords to enforce Part 4 Sections 43-48 of the Anti-social Behaviour, Crime and Policing Act 2014.</p>	<p>Councillor Nigel North Cabinet Member for Communities and Environment Capital</p>	<p>March 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders including social landlords through the Peterborough Registered Social Landlord Forum</p>	<p>Laura Kelsey Anti-Social Behaviour Co-ordinator Tel: 01733 453563 Laura.kelsey@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Extension of Expenditure with Providers on the Homecare Framework – KEY/11JAN16/01 To authorise the extension of expenditure with providers on the homecare framework agreement, in line with current terms and conditions.</p>	<p>Councillor Wayne Fitzgerald Cabinet Member for Integrated Adult Social Care and Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Jenny Beasley, Commissioning Manager, Tel: 01733 452482 jenny.beasley@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Peterborough Highway Services Contract – KEY/11JAN16/02 To award major transport schemes to Skanska to deliver via the Peterborough Highways Services Contract.</p>	<p>Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Amy Petrie Principal Programme and Project Officer Tel: 01733 452272 Amy.petrie@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Skills Strategy - KEY/25JAN16/01 For Cabinet to approve the Skills Strategy.</p>	<p>Cabinet</p>	<p>21 March 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Wendi Ogle-Welbourn Corporate Director People and Communities Tel: 01733 863749 Wendi.ogle-welbourn@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Review of Emergency Stopping Places – KEY/25JAN16/02 For Cabinet to review existing and proposed emergency stopping places.</p>	<p>Cabinet</p>	<p>June 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Belinda Child Head of Housing and Health Improvement Tel: 01733 863769 Belinda.child@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
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<p>Provision of Non Social Care Temporary Agency Workers – KEY/25JAN16/04 To approve the provision of temporary agency workers.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>James Fordham Recruitment and Retention Officer Tel: 01733 864581 James.fordham@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Commissioning of Care and Nursing Homes – KEY/25JAN16/05 For the Cabinet Member to consider a new Contract for the commissioning of Care and Nursing Homes under the Choice Directives LA circular 2004, ADASS Terms and Conditions.</p>	<p>Councillor Wayne Fitzgerald Deputy Leader and Cabinet Member for Integrated Social Care and Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Helene Carr Head of Commissioning Social Care Tel: 01733 864013 Helene.carr@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Community Based Supported Living Service – KEY/08FEB16/02 To award a 1 year contract for the period 1 April 2016 to 31 March 2017 to Turning Point Ltd to provide the Community Based Supported Living Service.</p>	<p>Councillor Wayne Fitzgerald Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health</p>	<p>Relevant internal and external stakeholders.</p>	<p>Mubarak Darbar Interim Head of Learning Disability Commissioning Tel: 01733 452509 Mubarak.darbar@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Bus Operator Concessionary Fare Reimbursement – KEY/22FEB16/01 To approve the reimbursement to operators for carrying free bus pass holders, under the English National Concessionary Travel Scheme.</p>	<p>Councillor Nigel North Cabinet Member for Communities and Environment Capital</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Richard Mayes Principal Passenger Transport Contracts and Planning Officer Tel: 01733 317451 Richard.mayes@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

<p>Local Transport Plan Programme of Capital Works 2016/17 - KEY/07MAR16/01 For the Cabinet Member to approve the Local Transport Plan programme of capital works for the 2016/17 financial year.</p>	<p>Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Amy Petrie Principal Programme and Project Officer Tel: 01733 452272 Amy.petrie@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
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<p>Former West Town Primary Academy – KEY/07MAR16/02 For the Cabinet Member to authorise the Director of People and Communities to approve the refurbishment works to the West Town Primary site up to the budget sum of £1m. Budget to include all associated costs.</p>	<p>Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University in consultation with Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Creating Opportunities and Tackling Inequalities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Emma Everitt Capital Projects and Assets Officer Tel: 01733 863660 Emma.everitt@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Section 75 Agreement Provision of School Nursing Services – KEY/07MAR16/03 To enter into Section 75 agreement with the Cambridgeshire and Peterborough Foundation Trust for the provision of School Nursing Services.</p>	<p>Councillor Diane Lamb Cabinet Member for Public Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Wendi Ogle-Welbourn Corporate Director People and Communities Tel: 01733 863749 Wendi.ogle-welbourn@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Provision of Permanency Services – KEY/21MAR16/01 To approve the award of the Provision of Permanency Services contract.</p>	<p>Councillor Andy Coles Cabinet Member for Children’s Services</p>	<p>July 2016</p>	<p>Creating Opportunities and Tackling Inequalities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Lou Williams Service Director Children’s Services and Safeguarding Tel: 01733 864139 Lou.williams@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>KEY DECISION REQUIRED</p>	<p>DECISION MAKER</p>	<p>DATE DECISION EXPECTED</p>	<p>RELEVANT SCRUTINY COMMITTEE</p>	<p>CONSULTATION</p>	<p>CONTACT DETAILS / REPORT AUTHORS</p>	<p>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</p>
<p>Council Office and Buildings Collection Contract – KEY/21MAR16/02 To approve the award of the Council office and buildings collection contract.</p>	<p>Councillor Gavin Elsey Cabinet Member for Digital, Waste and Street Scene</p>	<p>April 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant industry partners.</p>	<p>Richard Pearn Waste Partnership Manager Tel: 01733 864739 Richard.pearn@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

<p>Traffic Signals Maintenance and Supply Contract – KEY/21MAR16/03 To jointly procure a Traffic Signal Maintenance and Supply and Installation Contract with Cambridgeshire County Council, Central Bedfordshire, Bedford Borough, Luton and Peterborough City Council (5 authorities) through a NEC 3 contract with a Single Supplier Framework with call off contract for 5 plus 3 years.</p>	<p>Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development</p>	<p>May – July 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Peter Tebb Network and Traffic Manger Tel: 01733 453519 Peter.tebb@peterborou.gh.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>
<i>KEY DECISION REQUIRED</i>	<i>DECISION MAKER</i>	<i>DATE DECISION EXPECTED</i>	<i>RELEVANT SCRUTINY COMMITTEE</i>	<i>CONSULTATION</i>	<i>CONTACT DETAILS / REPORT AUTHORS</i>	<i>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</i>
<p>Increased Number of Connectivity/Access Points (CityFibre) Within the Managed ICT Contract – KEY/21MAR16/04 To approve the number of connectivity/access points within the ICT contract.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Sustainable Growth and Environment Capital</p>	<p>Relevant internal and external stakeholders.</p>	<p>Richard Godfrey Assistant Director Digital Tel: 01733 317989 Richard.godfrey@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

PART 2 – NOTICE OF INTENTION TO TAKE DECISIONS IN PRIVATE

KEY DECISIONS TO BE TAKEN IN PRIVATE

KEY DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER
<p>Future Delivery of Property Services – KEY/22FEB16/02 To agree to enter into a joint venture with NPS Property Consultants and to authorise the Corporate Director Growth and Regeneration to negotiate the terms and conditions.</p>	Cabinet	21 March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Duncan Blackie Interim Assistant Director Property Services Tel: 01733 452538 Duncan.blackie@peterborough.gov.uk	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>
<p>Council Office Consolidation – KEY/22FEB16/04 To approve the business case for the Council's office consolidation strategy and associated decisions relating to this.</p>	Cabinet	7 March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Duncan Blackie Interim Head of Property Tel: 01733 452538 Duncan.blackie@peterborough.gov.uk	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

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<p>Potential Energy Joint Venture – KEY/07MAR16/04 For Cabinet to consider and approve a potential energy joint venture.</p>	Cabinet	21 March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Richard Pearn Waste Partnership Manager Tel: 01733 864739 Richard.pearn@peterborough.gov.uk	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p> <p><i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i></p>

PART 3 – NOTIFICATION OF NON-KEY DECISIONS

NON-KEY DECISIONS						
<i>DECISION REQUIRED</i>	<i>DECISION MAKER</i>	<i>DATE DECISION EXPECTED</i>	<i>RELEVANT SCRUTINY COMMITTEE</i>	<i>CONSULTATION</i>	<i>CONTACT DETAILS / REPORT AUTHORS</i>	<i>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</i>
Smoke and Carbon Monoxide Alarm (England) Regulations 2015 – To authorise the level of penalty charge imposed under implementation of the Regulations.	Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development	March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Jo Bezant Senior Housing Enforcement Officer Tel: 01733 863785 Jo.bezant@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
To Adopt the Highway Asset Management Policy and Strategy To approve the adoption of the Highway Asset Management Policy and Strategy.	Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development	July 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Lewis Banks, Principal Transport Planning Officer Tel: 01733 317465 Lewis.banks@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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Empty Homes Strategy – To approve the Empty Homes Strategy.	Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development	July 2016	Strong and Supportive Communities	Relevant internal and external stakeholders.	Belinda Child Head of Housing and Health Improvement Tel: 01733 863769 Belinda.child@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
Empty Units Policy For Cabinet to approve the Empty Units Policy.	Cabinet	21 March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Brian Davies Project Manager – Sale and Acquisitions Tel: 01733 384547 Brian.davies@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
Regulatory Services: Shared Service Rutland County Council To approve renewal of a shared service agreement with Rutland County Council.	Councillor Nigel North Cabinet Member for Communities and Environment Capital	March 2016	Strong and Supportive Communities	Officers and relevant portfolio holders at Peterborough City Council and Rutland County Council	Peter Gell Head of Regulatory Services Tel: 01733 453419 Peter.gell@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<p>Citizens Advice Bureau Funding – To fund Citizens Advice Bureau £3731 until March 2016 (via DWP grant funding) to deliver Personal Budgeting Support to new UC claimants requiring assistance.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Ian Phillips Social Inclusion Manager Tel: 01733 863849 ian.phillips@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p>Vivacity Funding – To fund Vivacity £1278 until March 2016 (via DWP grant funding) to provide digital support for UC claimants to make benefit claims online at Central Library.</p>	<p>Councillor David Seaton Cabinet Member for Resources</p>	<p>March 2016</p>	<p>Strong and Supportive Communities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Ian Phillips Social Inclusion Manager Tel: 01733 863849 ian.phillips@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

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Extension to Sutton Conservation Area – For the Cabinet Member to approve the extension.	Councillor Peter Hiller Cabinet Member for Growth, Planning, Housing and Economic Development	March 2016	Sustainable Growth and Environment Capital	Relevant internal and external stakeholders.	Jim Daley Principal Built Environment Officer Tel: 01733 453522 Jim.daly@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
Vivacity Premier Fitness Invest to Save Scheme - To authorise investment in developing Vivacity Premier Fitness on an invest to save basis	Councillor David Seaton Cabinet Member for Resources	March 2016	Creating Opportunities and Tackling Inequalities	Relevant internal and external stakeholders.	John Harrison Corporate Director Resources Tel: 01733 452520 John.harrison@peterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. <i>The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).</i>

<p>Extension of Current Adult Social Care Contracts – To approve the extension of Mental Health Employment, Wellbeing and Recovery Services contracts from 1 October 2015 and 30 Nov 2016 due to reconfiguration of the contract.</p>	<p>Councillor Wayne Fitzgerald Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health</p>	<p>March 2016</p>	<p>Scrutiny Commission for Health Issues</p>	<p>Relevant internal and external stakeholders.</p>	<p>Mubarak Darbar Head of Commissioning Learning Disabilities Tel: 01733 452509 Mubarak.darbar@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
<p><i>DECISION REQUIRED</i></p>	<p><i>DECISION MAKER</i></p>	<p><i>DATE DECISION EXPECTED</i></p>	<p><i>RELEVANT SCRUTINY COMMITTEE</i></p>	<p><i>CONSULTATION</i></p>	<p><i>CONTACT DETAILS / REPORT AUTHORS</i></p>	<p><i>DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION</i></p>
<p>Delegation of Authority - To delegate authority for funding governance arrangements for care placements for Looked After Children to the Service Director – Safeguarding and Children for a period of 12 months.</p>	<p>Councillor Andy Coles Cabinet Member for Children’s Services</p>	<p>March 2016</p>	<p>Creating Opportunities and Tackling Inequalities</p>	<p>Relevant internal and external stakeholders.</p>	<p>Helene Carr Head of Service, Access to Resources and Specialist Commissioning Tel: 01733 863901 Helene.car@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>

<p>Personal Budgets in Peterborough - To agree to adopt Peterborough's Personal Budget Policy Statement as part of the revised statutory duties that apply to the Council as part of the SEND reforms, under the Children and Families Act 2014.</p>	<p>Councillor John Holdich Leader of the Council and Cabinet Member for Education, Skills and University</p>	<p>March 2016</p>	<p>Strong and Supportive Scrutiny Committee</p>	<p>Relevant internal and external stakeholders</p>	<p>Carrie Gamble Commissioner Tel: 01733 863931 Carrie.gamble@peterborough.gov.uk</p>	<p>It is not anticipated that there will be any documents other than the report and relevant appendices to be published.</p>
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DIRECTORATE RESPONSIBILITIES

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

City Services and Communications (Markets and Street Trading, City Centre Management including Events, Regulatory Services, Parking Services, Vivacity Contract, CCTV and Out of Hours Calls, Marketing and Communications, Tourism and Bus Station, Resilience)

Strategic Finance

Internal Audit

Schools Infrastructure (Assets and School Place Planning)

Corporate Property

Waste and Energy

Strategic Client Services (Enterprise Peterborough / Vivacity / SERCO including Customer Services, ICT and Business Support)

PEOPLE AND COMMUNITIES DEPARTMENT Director's Office at Bayard Place, Broadway, PE1 1FB

Adult Services and Communities (Adult Social Care Operations, Adult Social Care and Quality Assurance, Adult Social Care Commissioning, Early Help – Adults, Children and Families, Housing and Health Improvement, Community and Safety Services, Offender Services)

Children's Services and Safeguarding (Children's Social Care Operations, Children's Social Care Quality Assurance, Safeguarding Boards – Adults and

Children's, Child Health, Clare Lodge (Operations), Access to Resources)

Education, People Resources and Corporate Property (Special Educational Needs and Inclusion, School Improvement, City College Peterborough, Pupil Referral Units, Schools Infrastructure)

Business Management and Commercial Operations (Commissioning, Recruitment and Retention, Clare Lodge (Commercial), Early Years and Quality Improvement)

GOVERNANCE DEPARTMENT Director's Office at Town Hall, Bridge Street, Peterborough, PE1 1HG

Legal and Democratic Services

Human Resources (Business Relations, HR Policy and Rewards, Training and Development, Occupational Health and Workforce Development)

Performance and Information (Performance Management, Information Governance, Systems Support Team, Coroner's Office, Freedom of Information)

GROWTH AND REGENERATION DEPARTMENT Director's Office Stuart House, St Johns Street, Peterborough, PE1 5DD

Development and Construction (Development Management, Planning Compliance, Building Control)

Sustainable Growth Strategy (Strategic Planning, Housing Strategy and Affordable Housing, Climate Change and Environment Capital, Natural and Built Environment)

Opportunity Peterborough

Peterborough Highway Services (Network Management, Highways Maintenance, Street Naming and Numbering, Street Lighting, Design and Adoption of Roads, Drainage and Flood Risk Management, Transport Policy and Sustainable Transport, Public Transport)

Peterborough Investment Partnership

PUBLIC HEALTH DEPARTMENT Director's Office at Town Hall, Bridge Street, Peterborough, PE1 1HG