



HILLINGDON
LONDON



Social Services, Housing and Public Health Policy Overview Committee

Date: TUESDAY, 21 JUNE 2016

Time: 7.00 PM

Venue: COMMITTEE ROOM 5 -
CIVIC CENTRE, HIGH
STREET, UXBRIDGE UB8
1UW

**Meeting
Details:** Members of the Public and
Press are welcome to attend
this meeting

Councillors on the Committee

Wayne Bridges (Chairman)

Jane Palmer (Vice-Chairman)

Teji Barnes

Peter Davis

Becky Haggar

Shehryar Ahmad-Wallana

Beulah East

Tony Eginton

Peter Money

Co-Opted Member

Published: Monday, 13 June 2016

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<http://modgov.hillingdon.gov.uk/ieListMeetings.aspx?CId=324&Year=2015>

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Lloyd White

Head of Democratic Services

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SOCIAL SERVICES, HOUSING & PUBLIC HEALTH

To perform the policy overview role outlined above in relation to the following matters:

1. Adult Social Care
2. Older People's Services
3. Care and support for people with physical disabilities, mental health problems and learning difficulties
4. Asylum Seekers
5. Local Authority Public Health services
6. Encouraging a fit and healthy lifestyle
7. Health Control Unit, Heathrow
8. Encouraging home ownership
9. Social and supported housing provision for local residents
10. Homelessness and housing needs
11. Home energy conservation
12. National Welfare and Benefits changes

Agenda

CHAIRMAN'S ANNOUNCEMENTS

- 1 Apologies for Absence and to report the presence of any substitute Members
- 2 Declarations of Interest in matters coming before this meeting
- 3 To receive the minutes of the meeting held on 20 April 2016 and 12 May 2016 1 - 10
- 4 To confirm that the items of business marked in Part I will be considered in Public and that the items marked Part II will be considered in Private
- 5 Review Topics for First Major Review of 2016/17 11 - 14
- 6 Forward Plan 15 - 18
- 7 Work Programme 19 - 22

Minutes

SOCIAL SERVICES, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE

20 April 2016



Meeting held at Committee Rooms 6 - Civic Centre, High Street, Uxbridge, Middlesex UB8 1UW

	<p>MEMBERS PRESENT: Councillors: Wayne Bridges (Chairman) Teji Barnes (Vice-Chairman) Shehryar Ahmad-Wallana Peter Davis Beulah East (Labour Lead) Becky Haggar Manjit Khatra June Nelson Jane Palmer</p> <p>Co-Opted Member Mary O'Connor</p>
	<p>OFFICERS PRESENT: Steve Hajioff, Director of Public Health Gary Collier, Better Care Fund Manager Nigel Dicker, Deputy Director Residents Services Paul Richards, Head of Green Spaces, Sport and Culture Ajay Gajree, Senior Well Being Officer Shikha Sharma, Public Health Gary Collier, Better Care Fund Manager Charles Francis, Democratic Services</p> <p>Joan Veysey, Acting Chief Officer, Hillingdon CCG Dr Hussain, Consultant Cardiologist Dr Thakar, GP Jacqui Guyett, Stroke Association Caroline Humphrey, Stroke Association</p>
1.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>None.</p>
2.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>None.</p>
3.	<p>TO RECEIVE THE MINUTES OF THE MEETING HELD ON 24 MARCH 2016 (<i>Agenda Item 3</i>)</p>

	<p>Were agreed as an accurate record.</p>
4.	<p>TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED IN PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART II WILL BE CONSIDERED IN PRIVATE (<i>Agenda Item 4</i>)</p> <p>All items were considered in public.</p> <p>BETTER CARE FUND - UPDATE</p> <p>The Better Care Fund Programme Manager provided a presentation on the Fund (BCF).</p> <p>The BCF is a national scheme intended to encourage health and social care to work together more closely, as required by the 2014 Care Act, with the expectation of a three year Plan from April 2017 to achieve "full integration" by 31 March 2020. It was anticipated that the definition of "full integration" would be included in the guidance that was expected to be issued by the end of the current quarter.</p> <p>The key objectives of this initiative were:</p> <ul style="list-style-type: none"> • Individuals with care needs to receive more joined up care; • That the independence of residents was maximised or maintained through better prevention and early intervention; • Scarce resources were used more effectively; and • Formation of joint plans with agreed priorities to achieve a greater positive impact for local people. <p>It was noted that BCF funding was not new money. For the 2016/2017 Plan, HCCG and the Council were pooling £22.5m, which was more than the required minimum value of £20m. Government had allocated £1.5bn of new money for the three year plans.</p> <p>Highlighting the achievements in 2015/2016, it was noted these included:</p> <ul style="list-style-type: none"> • A reduction in the number of emergency admissions; • A reduction in the number of falls-related emergency admissions; • A reduction in the delayed transfers of care; • A reduction in the number of permanent admissions to care homes; • Improved working relationships across health and social care - a self assessment was undertaken in December 2015 and staff identified a commitment to working together and an understanding of each others' roles across health and social care. • An increased involvement of GPs and the voluntary sector. <p>The 2016/2017 BCF Plan included the following:</p> <ul style="list-style-type: none"> • Extending existing schemes where benefits could be achieved for other groups, e.g., supported living and carers; • Adding funds to the pool where demonstrable benefits for residents would be delivered, e.g., specialist palliative care; • Extending scope to cover new activities, e.g., dementia; <p>The intended outcomes for the 2016/2017 BCF Plan were:</p> <ul style="list-style-type: none"> • A move towards a more stable, cost effective care market that met local needs;

- A better resident/patient experience of care;
- A reduction in the number of emergency admissions;
- A reduction in the hospital admission rate;
- A reduction in the number of permanent admissions to care homes; and
- A reduction in the demand for ongoing care, where possible.

Eight BCF schemes had been identified for 2016/17:

1. Early identification of people at risk of falls, stroke, dementia and/or social isolation;
2. Better care for people at the end of their life;
3. Rapid response and integrated intermediate care -
4. Seven day working - to even out discharges across the whole week
5. Integrated community-based care and support -
6. Care home and supported living market development;
7. Supporting carers - aimed at carers of all ages and ensuring that services were in place to meet their needs; and
8. Living well with dementia.

The Committee was advised that the final version of the BCF Plan 2016/2017 would be submitted by 3 May 2016 and would address a number of national conditions that had been rolled forward from 2015/2016.

Noting the Better Care Fund was reliant on a number of partnerships working in unison, Officers confirmed that each individual scheme had an action plan and would be monitored through a series of core meetings. In addition, a quarterly performance report would also be considered by the Health and Wellbeing Board.

In response to a question about how the BCF planned to address inequalities, Officers explained that the Plan incorporated health and equalities impact assessments and one of the key considerations of the Plan moving forward, was to help staff to work differently and share information more efficiently.

In terms of overall performance in respect of delayed transfers of care, Officers explained that the Council was well placed compared to other London Boroughs and was currently leading in North West London. With regard to emergency admissions from Care Homes and why this was occurring, Officers explained that the nature of the work and high turnover of staff along with the stability of the Care market made it a dynamic environment. In some respects, the word 'emergency' was unhelpful. Officers explained that this was used for any scenario which was unexpected and in many respects, lots of instances were not true emergencies but emergencies were a tag that was used to describe unplanned situations.

Work was underway to ensure that care plans could move electronically from one organisation to another, although it was likely to be some time before this was operational.

The Committee was encouraged by the work that had been undertaken and welcomed the suggestion by officers that the POC would become a consultee on the development of the Plan going forward in the future.

RESOLVED: That:

1. The report be noted.
2. The Committee's comments be agreed by the Chairman and Labour Lead outside the meeting to be included in the Cabinet

6. **SECOND REVIEW 2015/16 - SUPPORTING INFORMATION** (*Agenda Item 5*)

The Director of Public Health introduced the witness session.

The following witnesses attended the meeting:

- Joan Veysey, Acting Chief Officer, Hillingdon CCG
- Dr Hussain, Consultant Cardiologist
- Dr Thakar, GP
- Jacqui Guyett, Stroke Association
- Caroline Humphrey, Stroke Association

Points raised at the meeting and during the second witness session included:

Prevention

The best way to prevent strokes is:

1. healthy eating.
 2. being physically active
 3. smoking cessation
 4. keeping your weight down
 5. and sensible drinking.
- Although exercise is an important element in reducing weight and managing stroke risk, 80% of the management of obesity is through better nutrition.
 - In 2016/17 a Pilot Programme investigating the early detection of people with stroke will take place under the BCF. Identifying AF (Atrial fibrillation - one of the risk factors for stroke) has been added to the programme. Checking adequate numbers of residents is likely to increase the Council's capacity to prevent more strokes.
 - In terms of current preventative action, the Council commissions the statutory NHS Health checks programme via local pharmacists and GPs. This is aimed at the population group aged 40-74 years for identifying the risk of vascular diseases including strokes.
 - With regards to the work being conducted by GP's, the Hillingdon CCG currently have a Working Group investigating stroke prevention.
 - In terms of treating stroke, GPs were working with the CCG and looking at anti-colagulation. When the blood is thinner, there is less prevalence of stroke among AF afflicted people.
 - Scoping work was also taking place at Hillingdon and Harefield Hospitals to see how the stroke prevention service could be delivered in a different way

Health and Wellbeing Team

- The Team offer a range of activities to assist residents keep active.
- Let's Get Moving, Hillingdon, is offering residents the opportunity to

take part in a 12 week physical activity on referral programme. This is free, and anyone can join who is currently inactive, or overweight or suffering from a medical condition

- Lets Get Moving can:-
 1. Provide support on choosing an activity that's right for the individual.
 2. Assist with setting realistic and achievable goals.
 3. Provide on-going support and encouragement.
 4. Advice and guidance on how to be active taking into account your personal circumstances.
 5. A personal plan on how to get active.
- Positive outcomes arising from the Let's Get Moving campaign have included: fewer GP visits, less pain and tiredness, better sleep patterns and improved general fitness.

The Stroke Association

- Stroke Association is the leading charity in the UK for people affected by stroke
- In the last 20 years the number of people dying of stroke has halved while the number of major strokes has decreased by 40 per cent. More people than ever are benefitting from cutting-edge treatments and making full recoveries. And more people now understand the need to seek emergency treatment for stroke.
- In Hillingdon, the Stroke Association provide information , advice and guidance about preventing stroke but also offer support and referral programmes for survivors of stroke.
- The Stroke Association try and target those groups at highest risk and raise awareness of the condition. In many cases, lots of people do not realise that they have high blood pressure which is one of the most significant risk factors .

Previous and planned activities of the Stroke Association included:

Stroke Prevention Activities - October 2015 – May 2016

- Information stall at older persons wellbeing day at West Drayton Community centre.
- Information stand/Blood pressure checks at Hillingdon Carers health MOT day.
- Stroke awareness presentation & manned information stand at Older Persons Assembly.
- Regular contact with various statutory and voluntary sector organisations.
- Information stand and blood pressure checks at Barclays Bank, Uxbridge.
- Health Awareness Day at Hillingdon Leisure Centre including information stand and blood pressure checks
- Information stall and blood pressure checks at Healthy Heart Month launch event at Uxbridge Library.
- Stroke awareness talk at Northwood Hills Dementia Café.
- Facilitated Know Your Blood Pressure event at Royal Mail Heathrow Airport.

Planned Stroke Prevention activities for 2016

- Information stand / Blood pressure checks at Brunel Festival
- Awareness talk at Hayes Dementia Café
- Information Stand / Blood pressure checks at Botwell Green, Highgrove and Hillingdon Leisure Centre
- Information Stand / Blood Pressure checks at Hillingdon Carers Fair.
- Awareness talk / Blood Pressure checks at Age UK Interactive Older People's Club
- Awareness talks to a variety of community groups, including talks to high risk community groups such as BME groups.
- Information stand / blood pressure checks at local businesses and community events.

Secondary Prevention

- The Stroke Association's local co coordinators also promote secondary prevention through:-
- Providing generic information about lifestyle and risk factors to stroke survivors and their families.
- Identifying individual risk factors, providing specific information and, where appropriate, referring on to statutory and voluntary agencies such as smoking cessation, stroke rehabilitation classes, physiotherapy, GP, Age UK active aging etc.
- Inviting representatives from health and fitness organisations to give information talks at Long Term Communication Group.
- The local coordinators are also looking to arrange some activities to promote a healthier lifestyle such as a walking group, swimming after stroke lessons and walking football.

Points raised by the Committee in the course of discussions included:

- Although a considerable number of initiatives were taking place across a variety of organisations, the Committee enquired how a member of the public would be made aware of what help was available?
- Members agreed that more emphasis needed to be placed in the future on how this information got into the open forum.
- It was ironic that those with the best knowledge needed the least care and vice versa.
- Taking on board the points raised by GPs, the Committee agreed that existing mail shots like the flu campaign or electoral registration could be used as vehicles to disseminate helpful information about stroke and practical preventative measures which could easily be taken.
- The Committee agreed the Health Checks the Council had a duty to provide in partnership with the Hillingdon CCG offered an opportunity for greater awareness and preventative work to be done in the future.
- In terms of further preventative ideas, the Committee suggested that TVs and or message boards in GP surgeries might be used to provide reflective messages, which could then be read by patients awaiting treatment.
- Hearing about the excellent work done by the Stroke Association in conjunction with its partners, the Committee suggested that the Stroke Association might consider exploring existing networks such

	<p>as Council supported sports clubs when looking to recruit future volunteers.</p> <p><u>Stroke Association social event 18 April 2016</u> Councillors whom attended a social event with stroke survivors on 18 April 2016 made the following general points:</p> <ul style="list-style-type: none"> • Many of the stroke survivors stated that they did not have an assistance package on discharge from hospital and were unsure who to approach for further help. • All the attendees at the social function were impressed by the level of support the Stroke Association provided. • It was highlighted that the loss of motor skills was a major challenge after a stroke. Attendees highlighted that the number of physiotherapists at Hillingdon hospital had declined which made recovery more protracted. • Carers of stroke sufferers did an excellent job. However, some of the carers found arranging respite care difficult. • A hidden side of stroke was the impact it could have on the survivor and other family member's mental health. <p>Resolved -</p> <p>1. That the report be noted.</p>
7.	<p>FORWARD PLAN (<i>Agenda Item 6</i>)</p> <p>The Committee considered the latest version of the Forward Plan.</p> <p>Resolved –</p> <p>1. That the report be noted.</p>
8.	<p>WORK PROGRAMME (<i>Agenda Item 7</i>)</p> <p>Reference was made to the work programme and timetable of meetings.</p> <p>Resolved -</p> <p>1. The Committee noted the Work Programme 2015/16.</p>
	<p>The meeting, which commenced at 7.00 pm, closed at 8.50 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Charles Francis on 01895 556454. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

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Minutes

SOCIAL SERVICES, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE

12 May 2016

Meeting held at Council Chamber - Civic Centre,
High Street, Uxbridge UB8 1UW



	<p>MEMBERS PRESENT: Councillors: Wayne Bridges (Chairman) Jane Palmer (Vice-Chairman) Teji Barnes Peter Davis Beulah East (Labour Lead) Tony Eginton Becky Haggar Peter Money</p>
1.	<p>APOLOGIES FOR ABSENCE (<i>Agenda Item</i>)</p> <p>Apologies for absence were received from Councillor Ahmad-Wallana.</p>
2.	<p>ELECTION OF CHAIRMAN (<i>Agenda Item 1</i>)</p> <p>RESOLVED: That Councillor Wayne Bridges be elected as Chairman of the Social Services, Housing and Public Health Policy Overview Committee for the 2016/2017 municipal year.</p>
3.	<p>ELECTION OF VICE CHAIRMAN (<i>Agenda Item 2</i>)</p> <p>RESOLVED: That Councillor Jane Palmer be elected as Vice Chairman of the Social Services, Housing and Public Health Policy Overview Committee for the 2016/2017 municipal year.</p>
	<p>The meeting, which commenced at 9.05 pm, closed at 9.10 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Charles Francis on 01895 556454. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

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Agenda Item 5

SOCIAL SERVICES, HOUSING AND PUBLIC HEALTH POC REVIEW TOPICS FOR FIRST MAJOR REVIEW OF 2016/17

Contact Officer: Kiran Grover
Telephone: 0693

REASON FOR ITEM

To enable the Committee to agree a topic to be developed into a draft scoping report to be considered at the next meeting of the Committee.

OPTIONS OPEN TO THE COMMITTEE

The Committee is asked to select a single area within its remit to be developed into a scoping report. This will require the Committee to provide specific rather than broad areas to focus on. By so doing, officers will be able to produce a scoping report that addresses Members' main concerns and put forward an effective plan for the review.

INFORMATION

1. The Committee is responsible for undertaking the 'policy overview' role in relation to Adult Social Care Services, Housing and Public Health responsibilities of the Council. The full range of services under the Committee's remit is outlined in the terms of reference at the start of the agenda.
2. Previous experience from both Hillingdon and other Councils indicates that the Committee can have the greatest impact by focusing on a work programme agreed at the start of the Council year. Similarly, focusing upon one or two items at each meeting can help Members engage with the major issues and encourage resident and stakeholder engagement.
3. As in previous years, the Committee is recommended to use this first meeting of the year to set a work programme for the next 12 months and select one or two topics for major review.
4. In selecting topics, Members are reminded of the Committee's work in from 2015 to 2010, which included reviews of:

2014/15

- Children's Oral Health
- Hillingdon's Shared Lives Scheme

2013/14

- The Causes of Tenancy Failure and how it can be Prevented

2012/13

- Review of Adult Community Mental Health Services

2011/12

- Personalisation and Disabilities with Reference to Transition

- Population Flows and the Impact on Housing Services in Hillingdon

2010/11

- To examine the use of Assistive Technology by Adult Social Care to Support Independent Living
- Hillingdon Centre for Independent Living (Looking at Efficiencies, Services & Fully Costed Options)

Officers have provided the following comments on these suggestions:

Employment of people with disabilities

The number of adult social care service users with a learning disability who are in employment is significantly below the national average. It currently stands at 2.3% and the national average is 6%.

The council is taking steps to work with its partners to ensure more people with disabilities can access paid employment. This includes the development of Project Search sites in the borough and the development of a range of other supported internship pathways.

With the introduction of Education, Health and Care Plans up to the age of 25 years this should encourage a focus on outcomes aimed at preparing young people for adulthood including employment. The national expectation is that these reforms will lead to improved employment statistics within the medium term. It is anticipated the review would provide an overview of current activities and develop proposals to improve employment prospects in the future.

Hospital Discharges

The length of time an older person is admitted to hospital is critical to their health and wellbeing. The Hospital team work jointly with Hillingdon Hospital to expedite timely discharges always putting our residents at the centre of their discharge planning.

The Council have taken steps to devise an integrated model of discharge with our partner agencies, focussing on admission prevention and timely discharge planning. An integrated team at the front door was implemented in October 2015, further work is underway to enhance the current model of the patient admission journey to ensure timely and safe discharges and appropriate follow up once back in the community.

Extra Care Housing

The Council currently has two Extra Care Housing Schemes, where adults aged 55+ are able to live in their flat, with a tenancy and have a number of 'core' care hours per week to ensure that their eligible social care needs are met. Housing management staff support residents of the schemes with their tenancy, budgeting etc.

The Council's strategy in promoting independence, supporting people in their communities and helping people to remain at home for longer means less reliance on Care Homes/residential care and more opportunities for residents to live in their own property with the support they require.

To meet demand and address the reduction in the use of residential care, the Council is now building two further Extra Care Housing Schemes at Parkview and Grassy Meadow with a strong emphasis on supporting people with dementia.. These modern scheme's will provide a real opportunity to create 'community hub's' where by they are offering a range of services to local older adults that addresses social isolation and prevent admission to hospital.. To deliver this model further work with health colleagues is needed to consider integrated Health & Social Care staff, who are able to provide a range of support that includes some clinical expertise, to help maintain people's health and well being for longer.

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Agenda Item 6

CABINET FORWARD PLAN

Contact Officer: Kiran Grover
Telephone: 0693

REASON FOR ITEM

The Committee is required to consider the Forward Plan and provide Cabinet with any comments it wishes to make before the decision is taken.

OPTIONS OPEN TO THE COMMITTEE

1. Decide to comment on any items coming before Cabinet
2. Decide not to comment on any items coming before Cabinet

INFORMATION

1. The Forward Plan is updated on the 15th of each month. An edited version to include only items relevant to the Committee's remit is attached below. The full version can be found on the front page of the 'Members' Desk' under 'Useful Links'.

SUGGESTED COMMITTEE ACTIVITY

1. Members decide whether to examine any of the reports listed on the Forward Plan at a future meeting.

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Ref	Upcoming Decisions	Further details	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Public / Private Decision & reasons
SI = Standard Item each month Cabinet – 23 June 2016 Council Departments: RS = Residents Services SC = Social Care AD = Administration FD= Finance									
124	Contractual arrangements relating to services provided by Mencap, Life Opportunities Trust and Comfort Care Services	Cabinet will be asked to consider contracts for the provision of care and support services provided by Mencap and Learning Opportunities Trust to reflect changes in provision from residential to supported living and to regularise contract end dates. Cabinet will also be requested to consider the extension of the care and support services provided by Comfort Care at 26-38 Glenister Gardens until 31 March 2017.	All / Townfield		Cllr Philip Corthorne	FD / SC - Clare Harris	Internal	NEW	Private (3)
105	Better Care Fund Plan 2016/17 Section 75 Agreement	Approval will be sought to enter into an agreement with Hillingdon Clinical Commissioning Group under section 75 of the National Health Service Act, 2006 to give legal effect to the financial arrangements contained in the 2016/17 Better Care Fund Plan, following approval by the Health and Wellbeing Board.	All		Cllr Ray Puddifoot MBE & Cllr Philip Corthorne	SC - Gary Collier	Health and Wellbeing Board		Public

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Agenda Item 7

WORK PROGRAMME 2016/17

Contact Officer: Kiran Grover
Telephone: 0693

REASON FOR ITEM

This report is to enable the Committee to review meeting dates and forward plans. This is a standard item at the end of the agenda.

OPTIONS AVAILABLE TO THE COMMITTEE

1. To confirm dates for meetings
2. To make suggestions for future working practices and/or reviews.

INFORMATION

All meetings to start at 7.00pm

Meetings	Room
21 June 2016	CR 4
28 July 2016	CR 6
6 September 2016	CR 5
4 October 2016	CR 6
2 November 2016	CR 4
18 January 2017	CR 6
21 February 2017	CR 6
23 March 2017	CR 5
19 April 2017	CR 5

Social Services, Housing and Public Health Policy Overview Committee
21 June 2016

PART I – Members, Public and Press

Social Services, Housing and Public Health Policy Overview Committee

2016/17 - DRAFT Work Programme

Meeting Date	Item
21 June 2016	Major Reviews Topics 2016/17
	Work programme for 2016/17
	Cabinet Forward Plan

28 July 2016	Budget Planning Report for SS,Hsg&PH
	Scoping Report for Major Review
	Work Programme
	Cabinet Forward Plan

6 September 2016	Major Review - Witness Session
	Cabinet Forward Plan
	Annual Complaints Report
	Work Programme

4 October 2016	Major Review - Witness Session
	Update on previous review recommendations (Shared Lives Review)
	Cabinet Forward Plan
	Work Programme

2 November 2016	Major Review - Draft Final report
	Consideration of Second Major Review
	Cabinet Forward Plan
	Work Programme

Social Services, Housing and Public Health Policy Overview Committee
21 June 2016

PART I – Members, Public and Press

18 January 2017	Budget Proposals Report for 2016/17
	Cabinet Forward Plan
	Scoping report for Second Review
	Work Programme

21 February 2017	Cabinet Forward Plan
	Work Programme
	Witness Session

23 March 2017	Cabinet Forward Plan
	Work Programme
	Witness Session

19 April 2017	Cabinet Forward Plan
	Major Review Second Final report

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