



HILLINGDON
LONDON



Health and Social Care Select Committee

Councillors on the Committee

Councillor Nick Denys (Chairman)
Councillor Philip Corthorne (Vice-Chairman)
Councillor Labina Basit
Councillor Tony Burles
Councillor Reeta Chamdal
Councillor Alan Chapman
Councillor June Nelson (Opposition Lead)

Date: WEDNESDAY, 22 JUNE
2022

Time: 6.30 PM

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

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

**This agenda and associated
reports can be made available
in other languages, in braille,
large print or on audio tape.
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information.**

Published: Tuesday, 14 June 2022

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This Agenda is available online at:

<https://modgov.hillingdon.gov.uk/ieListMeetings.aspx?Committeed=421>

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Head of Democratic Services
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Terms of Reference

Health & Social Care Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none">• Cabinet Member for Health & Social Care
Relevant service areas	<ol style="list-style-type: none">1. Adult Social Work2. Adult Safeguarding3. Provider & Commissioned Care4. Public Health5. Health integration / Voluntary Sector

Statutory Health Scrutiny

This Committee will also undertake the powers of health scrutiny conferred by the Local Authority

(Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. It will:

- Work closely with the Health & Wellbeing Board & Local HealthWatch in respect of reviewing and scrutinising local health priorities and inequalities.
- Respond to any relevant NHS consultations.

Duty of partners to attend and provide information

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, imposes duties on 'responsible persons' to provide a local authority with such information about the planning, provision and operation of health services in the area of the authority as it may reasonably require to discharge its health scrutiny functions through the Health & Social Care Select Committee. All relevant NHS bodies and health service providers (including GP practices and other primary care providers and any private, independent or third sector providers delivering services under arrangements made by clinical commissioning groups, NHS England or the local authority) have a duty to provide such information. Additionally, Members and employees of a relevant NHS body or relevant health service provider have a duty to attend before a local authority when required by it (provided reasonable notice has been given) to answer questions the local authority believes are necessary to carry out its health scrutiny functions. Further guidance is available from the Department of Health on information requests and attendance of individuals at meetings considering health scrutiny.

Cross-cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Domestic Abuse services and support

Agenda

CHAIRMAN'S ANNOUNCEMENTS

- 1 Apologies for absence
- 2 Declarations of Interest in matters coming before this meeting
- 3 Minutes of the meeting held on 12 May 2022 1 - 2
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Minutes

HEALTH AND SOCIAL CARE SELECT COMMITTEE

12 May 2022

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



HILLINGDON
LONDON

	Committee Members Present: Councillors Labina Basit, Tony Burles, Reeta Chamdal, Alan Chapman, Philip Corthorne, Nick Denys and June Nelson
1.	ELECTION OF CHAIRMAN (<i>Agenda Item 1</i>) RESOLVED: That Councillor Denys be elected as Chairman of the Health and Social Care Select Committee for the 2022/23 municipal year.
2.	ELECTION OF VICE CHAIRMAN (<i>Agenda Item 2</i>) RESOLVED: That Councillor Corthorne be elected as Vice-Chairman of the Health and Social Care Select Committee for the 2022/23 municipal year.
	The meeting, which commenced at 8.51pm, closed at 9.01pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran on 01895 250472. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

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INTRODUCTION TO OVERVIEW & SCRUTINY IN HILLINGDON

Committee name	Health & Social Care Select Committee
Officer reporting	Mark Braddock, Democratic Services & Statutory Scrutiny Officer
Papers with report	Appendix A – List of previous Policy Reviews Appendix B – Scrutiny Call-in App Guidance Appendix C – Chapter 5, Select Committees – Constitution

HEADLINES

As a councillor, you have been elected by your residents because you will represent them in ensuring the Council provides the services they need, to the standard they expect. By understanding their needs, councillors who sit on select committees can bring a different and independent perspective to the governance and policy-making processes of the Council, which can help drive improvement and positive change in local services.

This introductory report provides Committee Members with information about:

1. The role of select committees and overview & scrutiny in Hillingdon;
2. How the select committees operate and;
3. Scrutiny rules, support and guidance.

Democratic Services will give a visual presentation at the meeting outlining the key information within this report and answer any questions Members may have.

RECOMMENDATION:

That the Committee notes the report and seek any clarifications required.

The Select Committee's role

What is "overview and scrutiny"?

Larger councils are required in law to have more than one overview and scrutiny committee as part of their core governance arrangements. The structure is local choice and most larger councils like Hillingdon, have a number of such committees usually structured around cross-cutting service areas, engaging Councillors (not in the Cabinet) in a variety of activity.

Their role is somewhat analogous to that of Select Committees in Parliament, broadly to:

1. Assist in the development of Council policy and the improvement of services and efficiency;
2. Review and evaluate the actions of the executive (i.e. Cabinet / Cabinet Member) before and after decisions are taken;
3. Have the power to make reports and recommendations on such matters and;
4. Scrutinise local health services and crime and disorder (if in a committee's remit).

As set out in statutory scrutiny guidance, issued in 2019, the principles of effective overview and scrutiny are to:

- provide constructive ‘critical friend’ challenge
- amplify the voices and concerns of the public
- be led by independent people who take responsibility for their role
- drive improvement in public services

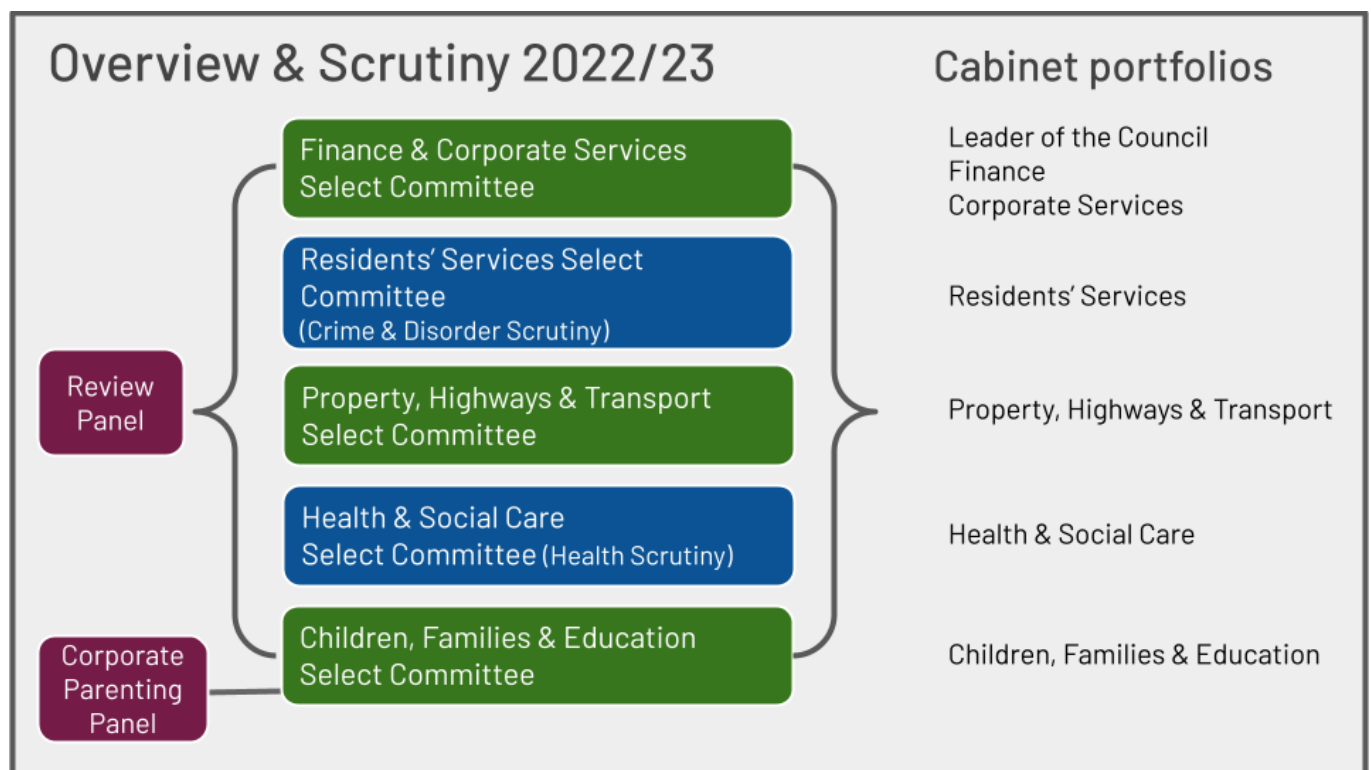
Stressed in this guidance, is that “*all Councillors and officers should recognise and appreciate the importance and legitimacy the scrutiny function is afforded by the law. It was created in 2000 to act as a check and balance on the executive and is a statutory requirement for all authorities operating executive arrangements.*”

The guidance adds that “*Councillors have a unique legitimacy derived from their being democratically elected. The insights that they can bring by having this close connection to local people are part of what gives scrutiny its value.*”

In Hillingdon, this important overview and scrutiny work is undertaken through ‘select committees’, who each undertake a wide range of work in support of the above roles. This is demonstrated through the Annual Reports to Full Council listed in *Appendix A*.

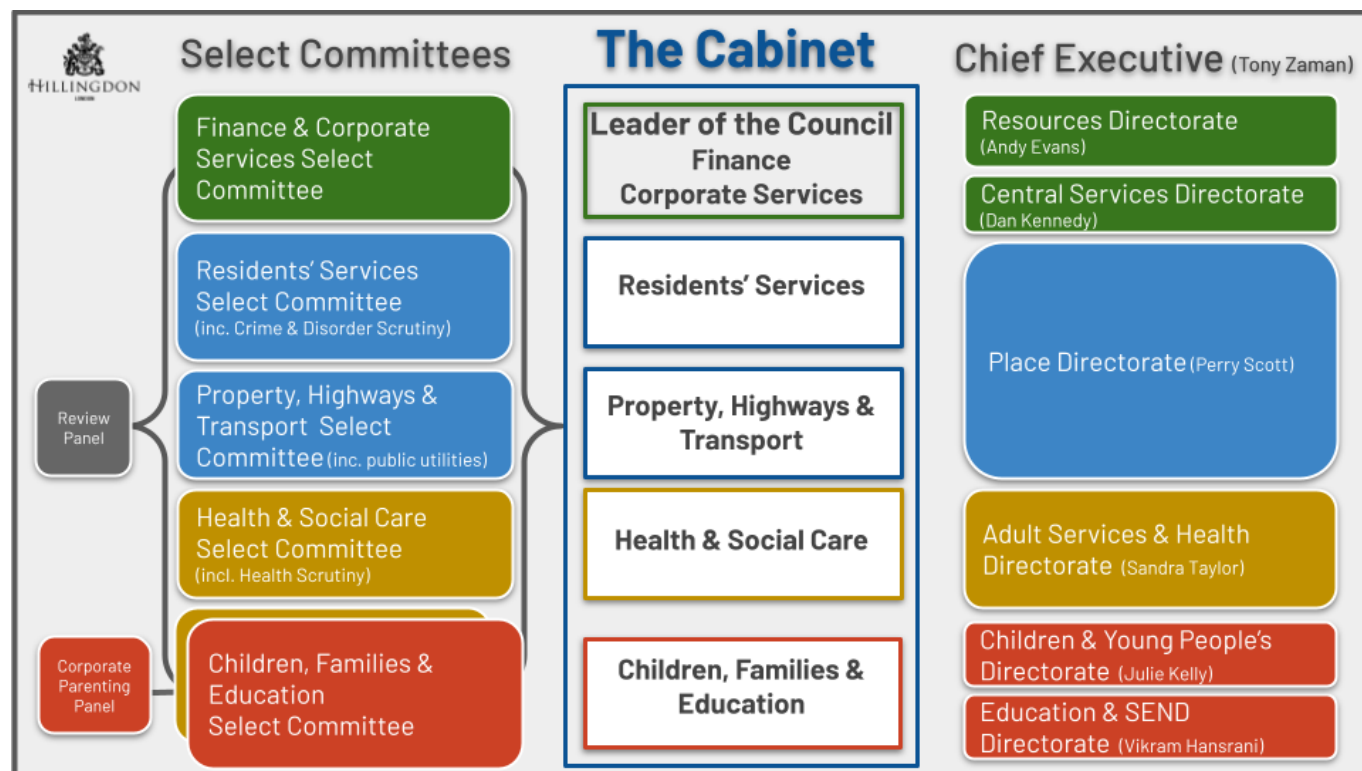
How overview and scrutiny in Hillingdon is arranged

As part of the new remodelled Council Constitution, full Council agreed changes to the Council’s overview and scrutiny arrangements, creating 5 new select committees as set out below, with remits aligned neatly to the relevant Cabinet Member portfolios. This alignment is important, as it secures an accountable framework to the Council’s governance as shown in the chart below:



The Children, Families & Education Select Committee has established a Corporate Parenting Panel to undertake development activity with Children in the Council's Care / Care Leavers, who also attend such meetings. Here, Councillors listen to their view and propose changes where required. Select Committee Chairmen may, on an exceptional basis, agree a single review panel to undertake, for example, a cross-cutting policy review, reporting back to a Select Committee.

Council Directorates, run by the relevant Corporate or Executive Director, are also closely aligned to Cabinet portfolios and Select Committees, further aiding accountability at officer level:



What are the general responsibilities of select committees?

All 5 select committees have general responsibilities, which they undertake on a regular basis, and are built into each of their multi-year work programmes. These are:

- 1) Monitoring the Cabinet Forward Plan, which lists future reports for decision to the Cabinet and Cabinet Members over the coming months and year;
- 2) Post-decision scrutiny - this is the statutory call-in procedure, which can be exercised up to 5 working days after a Cabinet or Cabinet Member decision is made, should the committee agree via a majority to do this (further guidance below);
- 3) Undertaking the statutory external scrutiny of local public agencies, e.g. Safer Hillingdon Partnership, Police, Fire Brigade, NHS, Health services etc... (if in Terms of Reference)
- 4) May undertake a review into past Cabinet or Cabinet Member decisions taken, e.g. after 6 months to check their implementation;
- 5) Undertake in-depth or single meeting policy reviews on topics within their remit to improve services and recommend changes to the decision-making Cabinet – this is a substantial area of committee activity and explained further below in this report.
- 6) Monitor the implementation of previous committee policy reviews, which have been

approved by the Cabinet. A list of recent reviews is set out in *Appendix A*;

- 7) Commenting on the annual draft budget approved by Cabinet, as part of statutory consultation on it, before the budget and Council Tax is approved each February;
- 8) Help shape key policy framework documents before they go to Cabinet and full Council for final approval, e.g. Local Plan, Housing Strategy, Licensing Policies;
- 9) Monitor the budget mid-year and receives quarterly performance reports (with performance indicators) so Councillors can monitor services and ask questions;
- 10) Receive information reports on specific areas within their remit, and may undertake site visits or other activities as part of their work;
- 11) May exercise the statutory “Councillor Call for Action” (mechanism of last resort) which has not yet been used in Hillingdon.

Remit of this Select Committee

This Committee’s specific Terms of Reference are set out below, as per the Council’s Constitution. They set the parameters (Cabinet Member portfolios and service areas) in which the Committee can undertake reviews, monitor, request reports from and provide input to Cabinet on matters, as per its general responsibilities above:

Cabinet Member Portfolios	<ul style="list-style-type: none"> • Cabinet Member for Health & Social Care
Relevant service areas	<ol style="list-style-type: none"> 1. Adult Social Work 2. Adult Safeguarding 3. Provider & Commissioned Care 4. Public Health 5. Health integration / Voluntary Sector

Statutory Healthy Scrutiny

This Committee will also undertake the powers of health scrutiny conferred by the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. It will:

- Work closely with the Health & Wellbeing Board & Local HealthWatch in respect of reviewing and scrutinising local health priorities and inequalities.
- Respond to any relevant NHS consultations.

Separate guidance will be given to the committee about its important statutory role scrutinising local health services and how this is best achieved.

Cross-cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Domestic Abuse services and support

It is important that the Committee remains wholly within its Terms of Reference when undertaking

scrutiny activity and Democratic Services can advise further on this if required at meetings, as and when potential items are requested to be looked into by the committee.

How committees operate

Multi-year work programme

The way that each select committee plans their work is via the multi-year work programme, which is on the agenda for every meeting. It's an important 'live' document, as it sets out the programme of activity at each committee meeting. It is developed and steered with the chairman and owned by the Committee, who can shape and adapt it, as the time progresses.

The work programme will span across municipal years to provide more flexibility in undertaking in-depth reviews, timetabling and reporting of any findings to Cabinet. Also, as there is not a 'deadline' of completing reviews within a traditional municipal year, this opens up greater opportunities to engage with witnesses and residents, increasing the value of the Committee's findings. Multi-year work programmes also enable the Committee to better plan ahead for monitoring purposes, e.g., past reviews and update reports on matters at the most suitable time interval.

Multi Year Work Programme																	
May 2021 - April 2022						2021						2022					
Corporate, Finance and Property Select Committee																	
	June 8	July 20	August No meeting	September 7	October 21	November 24	December No meeting	January 12	February 2	March 2	April 20						
Review E: Performance Monitoring and Reporting																	
Topic selection / scoping stage	Selection		Scoping Report		Witness Session		Witness Session		Findings		Final report						
Witness / evidence / consultation stage											Cabinet						
Findings, conclusions and recommendations																	
Final review report agreement																	
Target Cabinet reporting																	
Regular service & performance monitoring																	
Mid year Budget Update	x				x												
Annual complaints & service update report					x												
Biennial Safety Review - Sports Grounds (tbc)									x								
Cabinet's budget proposals for next financial year									x		x						
All Select Committee Budget Response	x		x		x		x		x		x						
Cabinet Forward Plan Monthly Monitoring	x		x		x		x		x		x						
One-off service monitoring																	
The Council's Engagement with the Armed Forces	x																
How the Council helps local small businesses with their procurement processes									x								
Disability Access in Public Buildings	x																
Hillingdon Digital Connectivity Strategy *					x												
Energy Efficiencies in the Civic Centre					x				x								
Information Governance					x												
Cyber Security					x												
Repairs and Maintenance							x										
Website upgrade / performance									x								
Financial Assistance to local voluntary organisations											x						
Corporate Communications											x						
HOAC											x						
Past review delivery																	
Recruitment											x						
Homophobic, Biphobic & Transphobic Bullying											x						
Local Commerce, Employment, Skills & Job Creation (date tbc)											x						
Voluntary Sector Response during COVID-19 Pandemic											x						
Internal use only																	
Report deadline	21-May-21	08-Jul-21		24-Aug-21	08-Oct-21	12-Nov-21		21-Dec-21	21-Jan-22	18-Feb-22	08-Apr-22						
Agenda published	26-May-21	12-Jul-21		27-Aug-21	13-Oct-21	16-Nov-21		04-Jan-22	25-Jan-22	22-Feb-22							

(example work programme)

Multi-year work programmes can cover:

1. Policy reviews (which can span months with witness sessions)
2. Regular service / performance reports
3. One off information reports
4. Cabinet Forward Plan

5. Any external scrutiny (if applicable)
6. Past review monitoring
7. Other activity, e.g. site visits

It is important to keep the work programme manageable, and thereby the activity undertaken at each meeting, achievable. For example, each additional information report requested by the Committee will have additional resource implications for council service areas. Good timing is also a factor to enable officers sufficient notice to prepare any information or committee report given competing demands on their service areas.

A report later in this agenda sets out a proposed “draft” multi-year work programme that the Committee will update and refine as the months and years progress.

Undertaking policy reviews

A key role of select committees are to shape and develop policies and deliver improvements to council services. Over the years, committees have undertaken successful in-depth reviews and this has resulted in a number of positive changes locally, with some also affecting policy at a national level. The typical cycle of a more in-depth policy review is as follows:

1. Selection of topic;
2. Scoping and structuring the review;
3. Witness & evidence stage (this is the main activity seeking out evidence);
4. Draft recommendations considered;
5. Final report, with recommendations, approved by Committee;
6. Report referred to Cabinet for consideration and decision;
7. If agreed by Cabinet, monitoring of the approved recommendations at a later date.

Some committees opt for quick single meeting reviews where the topic and service area to be scrutinised is very focussed. It is advisable that any review is done one at a time, given resources.

In undertaking reviews, committees have a lot of tools at their disposal to get the best outcome. This is usually gained from the external witnesses that participate, the evidence and data considered but importantly the voice of users or residents concerned. It is vital for the committee to have both qualitative and quantitative data to support their inquiries. Committees are also not bound by their formal structure of evening meetings. Site visits, informal meetings and workshops can sometimes be more productive in gathering evidence.

Useful things that Councillors themselves can also do in preparation for reviews are:

- Prepare your own draft questions for witnesses in advance;
- Find out more about any individual or external organisation invited;
- Do your own additional research on the topic - you may find something officers don't!
- Use your network of councillors in other local authorities to seek any views;
- Talk to residents at surgeries about the review - get their thoughts.

Policy reviews will be a matter for a more detailed discussion at the July meeting of the committee.

However, for information, *Appendix A* to this report, sets out the previous reviews undertaken by Overview and Scrutiny Committees in Hillingdon over the last 5 years.

Scrutiny call-in procedure

One of the statutory duties of select committees are to scrutinise decisions just after they are made by the Cabinet and Cabinet Members. Such decisions cannot take effect, until a period of 5 working days has elapsed, which is called the “scrutiny call-in period”.

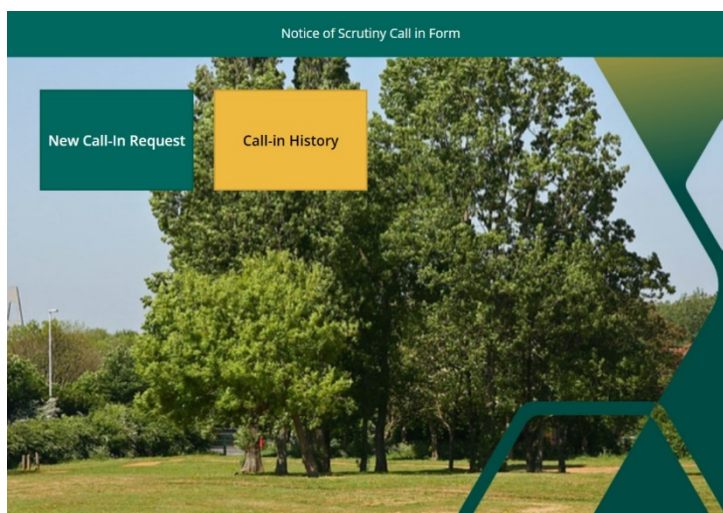
This period of 5 working days provides, in exceptional cases, for a Councillor on the relevant select committee to request the “call-in” of a particular decision and ask for it to be re-considered by the Cabinet or Cabinet Member. Upon a majority of the committee agreeing to this request, the decision is then formally called-in and cannot be implemented by officers until it is reconsidered by the decision-maker.

In 2021, a new [Scrutiny call-in App](#) was introduced to make this process modern and automated, believed to be the only one in the UK. It can be used on mobile devices, along with laptops. It enables a councillor on the relevant select committee to make a request to call-in a decision.

All Cabinet and Cabinet Member decisions published by Democratic Services include a link to the App, so Councillors can exercise this duty, in the exceptional event it is needed. More guidance on how the call-in process works using the App is set out in *Appendix B*. It’s a very straightforward process, so the guidance, whilst it needs to be comprehensive, does not do the ‘App’ itself justice.

To set up or access the App, Democratic Services have two user guides depending on devices to be used, e.g. mobile or laptop. These guides will be circulated internally to Councillors.

When it comes to exercising this scrutiny call-in procedure, it is important to note that there are certain Cabinet or Cabinet Member decisions that cannot be called-in. These include budget and policy framework documents, like the annual budget and also urgent decisions made (see below).



Urgency decisions

In exceptional circumstances the chairmen of the relevant select committee has the prerogative to decide to (or not to) waive the 5 working day scrutiny call-in period, where Cabinet or Cabinet Member decisions are deemed urgent and/or where a key decision has not been given notice on the Forward Plan and the chairman agrees that it can be taken urgently. These are called “urgent” or “special urgency” decisions and you will be notified of these by Democratic Services.

Rules, support and guidance

The rules relating to Overview and Scrutiny

Appendix C sets out Chapter 6 of the Council’s Constitution. These are the formal rules by which

the select committees operate and carry out their responsibilities, and summarised in this report. Members are advised to keep a copy of this for future reference. It is also available on the Council's website.

The Committee's relationship with Cabinet

Select Committees should be a constructive, and where required, critical friend of the Cabinet. Set out at the end of Chapter 6 of the Constitution, is the *Protocol on Overview & Scrutiny and Cabinet Relations*. This sets out the practical expectations of each party, to ensure an effective relationship that adds value to overview and scrutiny in Hillingdon.

Support to the Committee

Primary support will come from **Nikki O'Halloran**, your Clerk to this Committee and Democratic Services Manager. Nikki will act as the primary link with the Chairman, Committee and Council Officers, witnesses and other parties involved in carrying out the planned work. They will also lead on research and commissioning information to support the work of the Committee.

Additionally, service areas in the Council will be able to offer support, for example, in the execution of any surveys or more in-depth research or statistical information that may be required, if reasonable in nature.

As required in law, the Council has appointed a Statutory Scrutiny Officer who will oversee support to committee and give guidance.

Information to select committees

Select committees will have access to a wide range of public, internal and possibly confidential information when undertaking their reviews and other scrutiny activity. Select committees also have access to all Cabinet and Cabinet Member reports once published, including all those that are confidential in nature.

Any information requests should be directly linked to the committee's work being undertaken and made via the committee meeting itself. Usually, the Clerk to the Committee will then arrange for that information to either be brought back to a subsequent meeting or circulated around outside the meeting if more desirable.

Councillors will need to be aware that there will understandably be some information, under the domain of the Cabinet or Cabinet Member that they will not have automatic access to, unless the Leader of the Council or Cabinet Member permits its release. This will include, for example, briefing note or draft reports before they are published by Democratic Services. However, as per the *Protocol on Overview & Scrutiny and Cabinet Relations*, good information-sharing between the Committee and Cabinet Member is always encouraged, where feasible.

Should it be required in exceptional circumstances, select committees can operate in a closed (private) session where the information to be discussed meets the legal test not to disclose such matters to the public.

Questioning attendees

Council officers will inevitably attend most committee meetings to answer questions about matters on the agenda. Similarly, Cabinet Members may also attend if invited. There are also formal procedures for compelling attendance by senior officers and Cabinet Members, though this has yet to be used in recent times. External witnesses and residents will also attend as part of policy reviews. In any questioning, Councillors should take care to ensure this is conducted in a fair and balanced manner and not extend to personal criticism.

What select committees cannot do

Select committees, by their very nature are 'non-executive' in function. What this means, is that committees cannot make formal decisions like the Cabinet or other decision-making bodies of the Council. They also cannot formally instruct officers attending meetings to take a particular course of action or make a decision. Select committees may, however, seek to suggest matters to officers and ultimately can make formal recommendations to decision-makers, namely the Cabinet.

Select committees, understandably given their nature, cannot be a mechanism to raise an individual complaint that may have been received from a resident, particularly if it includes personal information. However, anecdotal information gained through a councillors' insight can be useful to highlight matters when appropriate. It is usual for select committees to discuss more general findings and issues, rather than individual matters.

Broadcasting of meetings

All Select Committees are broadcast live on the Council's YouTube channel: [Hillingdon London](#). Whilst meetings are required to be held in person with Councillors present, the Council has the capability for witnesses and external parties to attend virtually and give evidence, if required.

Essential reading and references

- [The Good Scrutiny Guide – Centre for Governance and Scrutiny](#)
This expert guide book is recommended for reading, and covers all aspects of scrutiny.
- [Statutory Scrutiny Guidance 2019](#)
This is the latest guidance issued by the Government on how overview and scrutiny should operate. The Council considered this in full at its meeting in September 2019.
- [Councillors' Work Book on Scrutiny](#)
This Local Government Association guide, whilst prepared before the above statutory guidance was issued, is still relevant and has been designed as a learning aid for elected councillors, whether you have been a councillor for some time, or whether you have been elected more recently.

BACKGROUND PAPERS

[Council Constitution](#)

Appendix A - List of recent Policy Reviews

(with hyperlinks)

2021/22

- [Select Committee Annual Report – 2021/22](#)
- [The Council's offer of Assisted Living Technologies](#)
(considered at the [Cabinet meeting on 21 April 2022](#))
- [Electric Vehicles, Infrastructure and Future Policy Development for the Borough](#)
(considered at the [Cabinet meeting on 24 March 2022](#))
- [Our engagement with tenants and leaseholders](#)
(considered at the [Cabinet meeting on 17 February 2022](#))
- [Performance Reporting and Monitoring in Hillingdon](#)
(considered at the [Cabinet meeting on 17 February 2022](#))
- [Adult & Community Learning Service \(ACE\)](#)
(considered at the [Cabinet meeting on 11 November 2021](#))
- [Children's Dental Health](#)
(considered at the [Cabinet meeting on 14 October 2021](#))
- [Voluntary Sector Response to Covid-19](#)
(considered at the [Cabinet meeting on 27 May 2021](#))

2020/21

- [Policy Overview & Scrutiny Annual Report – 2020/21](#)
- [Making the Council More Autism Friendly](#)
(considered at the Virtual [Cabinet meeting on 22 April 2021](#))
- [Review into Littering and Fly-tipping](#)
(considered at the Virtual [Cabinet meeting on 22 October 2020](#))

2019/20

- [Policy Overview & Scrutiny Annual Report – 2019/20](#)
- [Review into GP Pressures](#)
(considered at the [Cabinet meeting on 23 January 2020](#))
- [Universal Credit: likely favourable and adverse impacts, risks and local partnership response](#)
(considered at the [Cabinet meeting on 14 November 2019](#))
- [Community safety and new policing structures in Hillingdon](#)
(considered at the [Cabinet meeting on 25 July 2019](#))
- [Combating the homophobic, biphobic and transphobic bullying of young people in Hillingdon](#)
(considered at the [Cabinet meeting on 20 June 2019](#))

2018/19

- [Policy Overview and Scrutiny Annual Report – 2018/19](#)
- [Digital broadcasting of Policy Overview, Scrutiny and Select Committees](#)
(considered at the [Cabinet meeting on 30 May 2019](#))
- [Payment modernisation for key resident services](#)
(considered at the [Cabinet meeting on 30 May 2019](#))

Appendix B – Scrutiny Call-in App Guidance

Below is a summary of the full guidance which will be issued to Councillors on how to use the App, alongside user guides to download / access the App:

1. All Cabinet and Cabinet Member decisions notices clearly identify the relevant Select Committee, and thereby Members of, who can attempt to call-in any decision. Select Committee remits and Council service areas / Cabinet portfolios (who generate the reports based on the decision) are clearly aligned to enable this.
2. The decision notices clearly show the last date and time any call-in request can be made, i.e. which is 5 working days at 5pm after the date the decision notice was published.
3. It can only be a Member of the Select Committee shown on the decision notice that can initiate any call-in request. A Member cannot initiate a call-in on behalf of another select committee membership.
4. The call-in request is done via the [Scrutiny call-in App](#). This 'App' can be accessed via a link for a computer or laptop - or downloaded via an App if you have an iPad or mobile device. Details how to do access the App will be provided.
5. The App has a simple online form to complete where you can provide details.
6. Once the online form is submitted, the call-in request is then sent via an automated email to ALL Members on the Select Committee including the Councillor on the committee that initiated it.
7. Councillors do not have to respond to the email, but if they wish to indicate their approval (or rejection) of the request, they will need to click on the link in the email to do so. Importantly, this also applies to the Councillor initiating the call-in request too.
8. Upon a majority of Members indicating their approval via the App (and before the end of the scrutiny call-in period), it then becomes a valid call-in and Democratic Services are automatically alerted via the App. The decision of the Cabinet or Cabinet Member is then put on hold and cannot be implemented.
9. On the App there is a handy "call-in history" section where you can view the status of any current and past call-in requests.

Call-ins requests cannot be initiated at formal committee meetings. So, those requests that do not receive a majority are not reported to the Committee. Only those that are valid with a majority of Members approving will then be heard at a Committee meeting as part of the next steps in the scrutiny call-in process.

Helpful user guides available to download the App – these will be sent to Councillors internally:

- iPad/mobile
- Laptop

Appendix C – Chapter 6, Select Committees (Extract from Council Constitution)

Chapter 6 – Select Committee arrangements

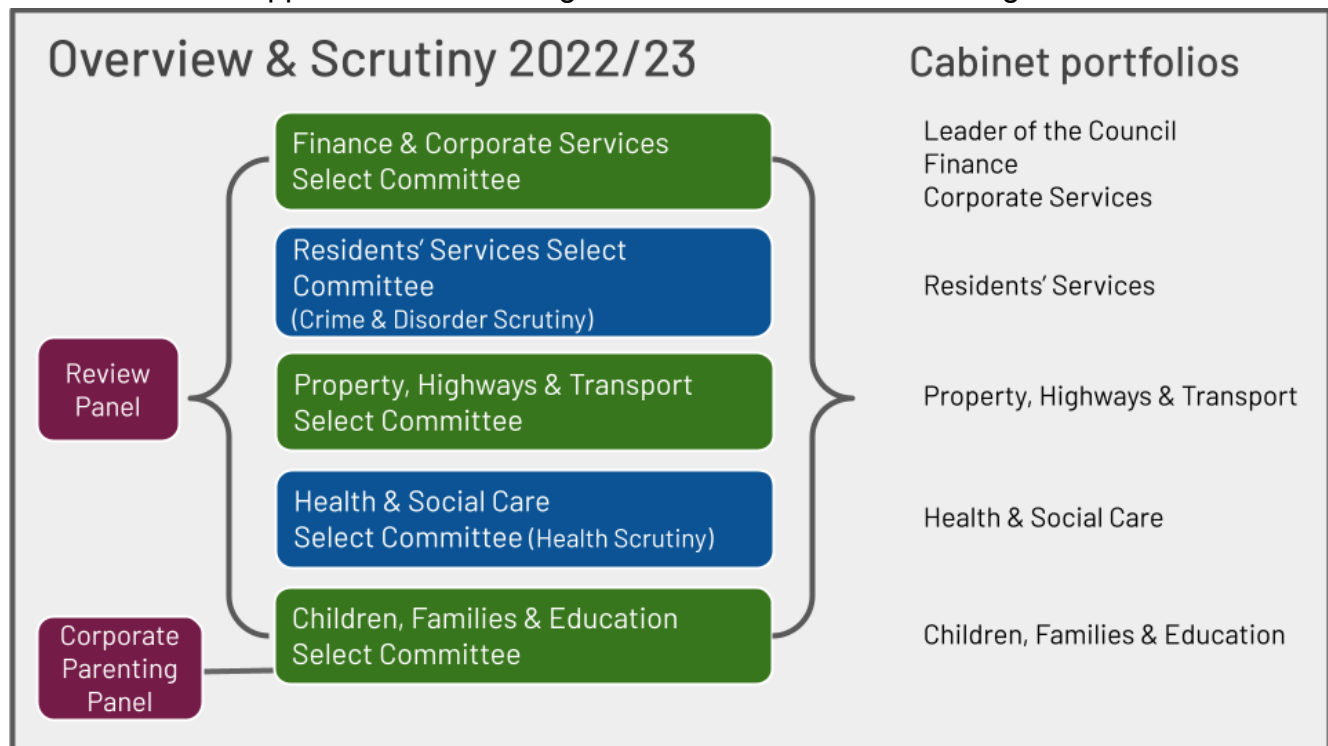
The Council has established Select committees to:

5. Assist in the development of Council policy and the improvement of services and efficiency
6. Review and evaluate the actions of the Cabinet before and after decisions are taken;
7. Have the power to make reports and recommendations on such matters;
8. Scrutinise local health services and crime and disorder reduction.

These committees exercise the Council’s statutory overview and scrutiny functions under the Local Government Act 2000, Health and Social Care Act 2001, Police and Justice Act 2006 (and later Acts and regulations).

About the Select Committees

The Council has appointed the following Select Committees to discharge these functions:



The Select Committees will mirror Cabinet Member portfolios and Directorate Structures as far as practicable. The Residents’ Services Select Committee and the Health & Social Care Select Committee will undertake the statutory external scrutiny functions on crime & disorder and health respectively. Chairmen of the Committees may jointly agree to establish a Task and Finish Review Panel to undertake detailed reviews. The Children, Families & Education Select Committee will establish a Panel to oversee the corporate parenting responsibilities of the Council. The terms of reference for each of these Committees and their Panels, where established, are set out in this Chapter.

Councillor Membership and attendance

The Council will appoint to these committees as it considers appropriate from time to time. The current membership number is 7 Councillors appointed on a proportional basis to each Select Committee. For the Children, Families & Education Select Committee, membership may also include co-opted Members as set out.

All Councillors except Members of the Cabinet and Cabinet Assistants may be Members of a Select Committee. However, no Member may be involved in scrutinising a decision with which he/she has been directly involved or has a prejudicial interest. All Councillors, including Cabinet Members, may attend a Select Committee meeting and address the Chairman of that Committee only at his/her discretion.

Committee members shall hold office until they resign, are removed from office or their successors are appointed.

Co-opted Members & Education Representatives

Each Select Committee shall be entitled to recommend to Council the appointment of permanent non-voting co-optees, or agree as a committee a non-voting co-optee for a limited duration as an advisor to assist with a specific review or work activity, for example, a subject matter expert from the local community.

The Children, Families & Education Select Committee shall additionally include in its membership the following Co-opted voting education representatives, where duly appointed or elected:

- 1) 1 Church of England diocese representative;
- 2) 1 Roman Catholic diocese representative; and
- 3) Such other representatives of faiths and denominations as may be appointed by the Council subject to a direction being issued by the Secretary of State.
- 4) A minimum of 2 and maximum of 5 parent governor representatives elected by parents.

Education representatives may only vote on matters relating to education, whether in respect of schools or wider educational issues, that are on the agenda. They may in addition speak, but not vote, on any other matters within the remit of the committee.

All co-opted members of a select committee are bound by the Members and Co-opted Members Code of Conduct as set out in Part 3, [Chapter 21](#).

Quorum

The quorum for a Select Committees shall be 4 Members of the committee.

Chairmen and Vice-Chairman

The posts of Chairmen and Vice-Chairman of the Committees will be decided by the Membership of that particular committee.

Role and Remit

General Terms of Reference

The Following Terms of Reference are common to the select committees:

1. To conduct reviews of policy, services or aspects of service which have either been referred by Cabinet, relate to the Cabinet Forward Plan, or have been chosen by the Committee according to the agreed criteria for selecting such reviews;
2. To monitor the performance of the Council services within their remit (including the management of finances and risk);
3. To comment on the proposed annual service and budget plans for the Council services within their remit before final approval by Cabinet and Council;
4. To consider the Forward Plan and comment as appropriate to the decision-maker on Key Decisions which relate to services within their remit (before they are taken by the Cabinet);
5. To review or scrutinise decisions made or actions taken by the Cabinet, a Cabinet Member, a Council Committee or an officer.
6. To make reports and recommendations to the Council, the Leader, the Cabinet, a Select Committees or any other Council Committee arising from the exercise of the preceding terms of reference.
7. To exercise the right set out in this Chapter of the Call-in Procedure Rules and to call-in and recommend for reconsideration any key decisions made but not yet implemented by the Cabinet, a Cabinet Member, a Council Cabinet Sub-Committee or an officer. This would include any key decision that needs further information from the decision-maker to explain why it was taken.
8. In accordance with the Local Government and Public Involvement in Health Act 2007, to consider 'Councillor Calls For Action' (CCfA) submissions.

Select Committees will not investigate individual complaints.

Councillor Call for Actions

The CCfA is a process designed to help Councillors resolve issues and problems on behalf of their residents, acting as a last resort for people who have been unable to get issues resolved through other means. CCfA should not be regarded merely as a scrutiny process and an issue can only become a CCfA once a Councillor has exhausted all other steps to resolve an issue in his or her ward such as a petition hearing, correspondence with elected Members and officers, questions to Council etc. Whilst CCfA's may be submitted by all Councillors on any issue, there are certain exceptions which are:

- (a) An issue relating to a planning appeal, licensing appeal or where a person has an alternative avenue to resolve an issue (e.g. through an appropriate complaints process)
- (b) Any matter which is vexatious, discriminatory or not reasonable to be included in the agenda for, or to be discussed at, a meeting of the Select Committee

Procedure

- 1) A Member may submit a CCfA in writing to the Head of Democratic Services who will seek to confirm with the Member concerned if all other potential avenues to resolve the issue in question have been exhausted and that the request does not fall within the exemptions detailed above. If necessary the Head of Democratic Services will discuss the matter with the Leader of the Council, the appropriate Cabinet Member and the Chief Whip.
- 2) If satisfied that the CCfA is valid the Head of Democratic Services will submit the request to the appropriate Committee Chairman for inclusion on the agenda for the next meeting of the Select Committees.
- 3) Relevant officer(s) and / or representatives from partner organisations may be invited to attend and information can be requested from such organisations.
- 4) Discussion would take place at Committee to explore potential solutions and the item would end with the Committee recommending a course of action to the appropriate body – including detailed financial consequences and budgetary proposals.
- 5) The process may not necessarily resolve the issue immediately but the process will act as a spur for Members and officers to work together to jointly develop policies to overcome the problem.

Finance & Corporate Services Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none">• Leader of the Council• Cabinet Member for Corporate Services• Cabinet Member for Finance
Relevant service areas	<ol style="list-style-type: none">1) Democratic Services2) Corporate Communications3) Corporate Finance4) Procurement5) Exchequer & Business Assurance Services6) ICT7) Legal Services8) Human Resources9) Business Administration10) Business Performance11) Customer Access12) Business Improvement Delivery (BID)

Cross cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Resident Experience

Residents Services’ Services Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolio	<ul style="list-style-type: none"> • Cabinet Member for Residents’ Services
Relevant service areas	<ol style="list-style-type: none"> 1) Community Safety, Licensing, Standards and Enforcement 2) Planning & Regeneration 3) Housing policy, homelessness & tenancy management 4) Green Spaces, Sport & Culture 5) Waste Services

Statutory Crime and Disorder Scrutiny

This Committee will act as a Crime and Disorder Committee as defined in the Crime and Disorder (Overview and Scrutiny) Regulations 2009 and carry out the bi-annual scrutiny of decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions.

Duty of partners to attend and provide information

The Crime and Disorder (Overview and Scrutiny) Regulations 2009 permits this Select Committee to make a request in writing for information to bodies who form the local Crime and Disorder Reduction Partnership (Safer Hillingdon Partnership), which includes the Police. The Committee should scrutinise the work of the partnership at least once a year and may also require the attendance before it of an officer or employee of a responsible authority or of a co-operating person or body in order to answer questions. The Committee may not require a person to attend unless reasonable notice of the intended date of attendance has been given to that person.

Cross-cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Climate Change
- Local impacts of Heathrow expansion
- Local impacts of High Speed 2
- Community Cohesion

Property, Highways & Transport Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolio	<ul style="list-style-type: none"> • Cabinet Member for Property, Highways & Transport
Relevant service areas	<ol style="list-style-type: none"> 1) Property & Estates 2) Capital Programme - Major Projects 3) Transportation 4) Highways 5) Repairs & Engineering (including housing repairs) 6) Building Safety / Facilities Management

Cross-cutting topics

This Committee will scrutinise and review the work of utility companies whose actions affect residents of the Borough.

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Civic Centre, Property and built assets

Health & Social Care Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none"> • Cabinet Member for Health & Social Care
Relevant service areas	<ol style="list-style-type: none"> 1. Adult Social Work 2. Adult Safeguarding 3. Provider & Commissioned Care 4. Public Health 5. Health integration / Voluntary Sector

Statutory Healthy Scrutiny

This Committee will also undertake the powers of health scrutiny conferred by the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. It will:

- Work closely with the Health & Wellbeing Board & Local HealthWatch in respect of reviewing and scrutinising local health priorities and inequalities.

- Respond to any relevant NHS consultations.

Duty of partners to attend and provide information

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, imposes duties on ‘responsible persons’ to provide a local authority with such information about the planning, provision and operation of health services in the area of the authority as it may reasonably require to discharge its health scrutiny functions through the Health & Social Care Select Committee. All relevant NHS bodies and health service providers (including GP practices and other primary care providers and any private, independent or third sector providers delivering services under arrangements made by clinical commissioning groups, NHS England or the local authority) have a duty to provide such information. Additionally, Members and employees of a relevant NHS body or relevant health service provider have a duty to attend before a local authority when required by it (provided reasonable notice has been given) to answer questions the local authority believes are necessary to carry out its health scrutiny functions. Further guidance is available from the Department of Health on information requests and attendance of individuals at meetings considering health scrutiny.

Cross-cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Domestic Abuse services and support

Children, Families, & Education Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none"> • Cabinet Member for Children, Families & Education
Relevant service areas	<ol style="list-style-type: none"> 1. Children's Services (including corporate parenting) 2. Children’s Safeguarding 3. Youth Justice 4. Youth Services 5. SEND 6. Education 7. Children and Families Development 8. Skills & lifelong learning

This Select Committee will establish a Panel to support strong oversight of the Council’s corporate parenting responsibilities. The Committee may appoint 3 Members to this Panel based on political balance. Membership may include non-Cabinet Members not on the Committee. The Committee may also appoint relevant Council officers and other external stakeholders to the Panel and agree its chairmanship and operation. In agreeing its operation, the Committee will provide for the Panel not to be able to establish any other sub-group or body to carry out its responsibilities.

Corporate Parenting Panel

Terms of Reference as approved by the parent Select Committee

The purpose of the Panel is to support the Select Committee in championing corporate parenting across the Council, directly engaging children in the Council's care and care leavers in the democratic and decision-making process, working with them and partners to monitor relevant service and improve outcomes and life chances.

Membership will comprise of:

Voting Members

- a) 3 Elected Members, who be appointed by the Select Committee based upon political balance, one of whom to be appointed as Chairman. A Vice-Chairman may also be appointed. Elected Members do not need to be Members of the parent Committee but cannot be Cabinet Members. 3 named substitutes, appointed by the Select Committee may attend in the absence of the appointed Members of the Panel and that they be from any of the five Select Committees based on political balance.

Non-voting Members

- b) Up to 5 Children in Care Council Members (one of whom the Chairman or Vice-Chairman may ask to assist them informally in chairing a specific meeting).*
- c) Senior Officer from Children's Services
- d) Corporate Parenting Manager
- e) The Virtual School Head Teacher
- f) The Local Authority's designated LAC Nurse or Doctor
- g) 1 x Foster Carer representative

Advisors

Relevant Council officers, e.g. from Social Care, Early Intervention and Prevention, Housing Service, along with external representatives, e.g. Department for Work and Pensions, may attend relevant Panel meetings as advisors. Council officers should attend the Panel to present any reports to the Panel regarding their service area.

**This gives Children in Care Council representatives, in an informal capacity, a unique opportunity to get experience of assisting the Chairman or Vice-Chairman in the running of the meeting.*

Meetings and Operation

The Panel will meet four times a year and in private*

- a) The Panel will have in place a work programme for its activity.
- b) The Chairman of the Panel, in conjunction with other members, shall agree the dates of the Panel for the ensuing year, where possible.
- c) The Chairman of the Select Committee should authorise any additional meetings that may be required or requested by the Chairman of the Panel.

- d) The Panel will allow themes and agenda topics to be brought to them from the Children in Care Council (CiCC), with themes identified at each meeting.
- e) The Chairman of the Panel will agree agenda items in advance of the meeting.
- f) The Panel cannot establish any other sub-groups or bodies to carry out its responsibilities.

**Unlike the parent Select Committee, the Panel is not required to operate under statutory procedures outlined in the Local Government Act 1972 and access to information rules do not apply. This allows the Panel to be conducted in a flexible way to suit the requirements of the Members and young people participating in it.*

Terms of Reference

- a) To champion the seven corporate parenting principles introduced by the Children and Social Work Act 2017.
- b) To support the work of the Select Committee overseeing the Council's corporate parenting responsibilities by providing a strategic overview and monitoring of the statutory services for Looked After Children (LAC) and care leavers across the Borough, reporting back to the Committee on any findings, as appropriate.
- c) To actively engage young people who are looked after by the Council, along with care leavers, in order to ensure they have an opportunity to influence the development of services, participate in the decision-making and democratic process.
- d) To receive annual reports of the work of the Independent Reviewing Officers, LAC Health Team, LAC & Leaving Care Service, Virtual School and Fostering and Adoption Service.
- e) To consider the impact on outcomes for children on other relevant activities linked to LAC and care leavers lived experiences, e.g. emotional wellbeing.
- f) To undertake any associated activity, review or task as requested by the Select Committee, reporting back to the Committee if directed.
- g) That through the Chairman of the Panel, to advise the Select Committee and relevant Cabinet Member on matters relating to corporate parenting.
- h) To present the minutes of the Panel to a subsequent meeting of the Select Committee, where the Chairman of the Panel, along with any Children in Care Council Members, may attend to update the Committee on the Panel's work.

Task and Finish Review Panels

Membership

Membership of a Review Panel may include non-Cabinet Members not on the 'parent' Committee(s) or co-opted Members. Panel membership will be subject to the usual political balance rules.

'Review' Panel Terms of reference

Chairmen of the five select committees may jointly agree to establish Task and Finish Review Panels as set out in these Procedure Rules on the following matters:

1. Focussed reviews within a particular Committee's remit
2. Cross-cutting reviews that cover the remit of more than one Committee;
3. Any functions, but within the purview of the Council, not included within the remit of any Committee;

A single Task and Finish Review Panel may be in operation at any one time and co-ordination of this will be by the five Select Committees Chairmen and any Panel will be subject to the approval of the Leader of the Council. The Chairmen will jointly agree the review topic, terms of reference, membership and chairmanship of any Panel. They will also agree the timescale for undertaking the review, including which Committee it will report back its findings to for consideration, prior to any report being presented to Cabinet. For reviews that span across the remit of more than one committee, any findings from a Panel will be reported to the Finance & Corporate Select Committee, unless the Chairmen jointly agree otherwise.

North West London Joint Health Overview and Scrutiny Committee

The Council agreed on 18 November 2021 that the Council would join the North West London Joint Health Overview and Scrutiny Committee (NWL JHOSC) comprising representatives from the boroughs of Brent, Camden, Ealing, Hammersmith and Fulham, Harrow, Hillingdon, Hounslow, Kensington and Chelsea, Richmond, Wandsworth and Westminster. It meets with representatives of NHS inner North West London to consider matters concerning health care subject to consultation.

How Select Committees operate

Meetings and Multi-Year Work Programmes

Each Select Committee will operate a timetable of meetings, approved by Full Council, in order to carry out its programme of work. The Select Committees will be responsible for setting their own work programme, within their terms of reference. In doing so, they shall take into account the wishes of members on that Committee who are not members of the largest political group on the Council. Work programmes will span across municipal years, to provide for in-depth reviews and ensure flexibility in reporting to Cabinet.

Select Committees and any Panels shall, as a default, consider the following business:

- 1) minutes of the last meeting;
- 2) declarations of interest ;
- 3) referrals from Cabinet/Council for reviews by the Select Committees if applicable; and
- 4) the business otherwise set out on the agenda for the meeting as determined by the Committee's Work Programme or the Chairman.

Special meetings and cancellation of meetings

The Chairman of a Select Committee may call a special meeting or cancel a meeting having consulted the Chief Whips of Party Groups and/or Opposition Lead(s). A special meeting may

also be called on the requisition of at least two thirds of the whole number of the Committee delivered in writing to the Head of Democratic Services.

Requests from Council / Cabinet to review specific matters

Select Committees shall respond, as soon as their work programme permits, to requests from the Council and the Cabinet, including individual Cabinet members for matters for which they have delegated authority, to review particular areas of Council activity. Where they do so, Select Committees shall report their findings and any recommendations back to the Cabinet, or if it is outside the budget and policy framework, the Council. The Council and/or the Cabinet shall normally consider the report of the Select within one month of receiving it.

Policy Review and Development

- 1) Select Committees are to be consulted on the Council's budget and policy framework documents as set out in the Budget and Policy Framework Procedure Rules.
- 2) In relation to the development of the Council's approach to other matters not forming part of its policy and budget framework, Select Committees may make proposals to the Cabinet for developments in so far as they relate to matters within their terms of reference.
- 3) Select Committees (or a Panel) may hold enquiries and investigate the available options for future direction in policy development and may appoint advisers and assessors to assist them in this process. Such advisors and assessors would only be invited to speak on matters connected with their appointment. The Committees may go on site visits, conduct public surveys, hold public meetings, commission research and do all other things that they reasonably consider necessary to inform their deliberations. They may ask external witnesses to attend to address them on any matter under consideration and may pay to any advisers, assessors and witnesses a reasonable fee and expenses for doing so, provided that the budget provision is not exceeded. The Senior Democratic Services Manager will manage the overall budget, allocating amounts to individual Select Committees to spend as necessary.

Principles of undertaking reviews

Where a Select Committees or Panel conducts reviews or investigations (e.g. with a view to policy development), the Committee may also ask people to attend to give evidence at Committee meetings which are to be conducted in accordance with the following principles:

- 1) that the investigation be conducted fairly and all Members of the Committee be given the opportunity to ask questions of attendees, and to contribute and speak;
- 2) that those assisting the Committee by giving evidence be treated with respect and courtesy; and
- 3) that the investigation be conducted so as to maximise the efficiency of the investigation or analysis.

Reporting to Cabinet (or Council)

- 1) Once it has formed recommendations on proposals for development, the Select Committee will prepare a formal report and submit it to the Head of Democratic Services for consideration by the Cabinet if the proposals are consistent with the existing budgetary and policy framework.

- 2) Reviews will be submitted to the full Council, via the Cabinet for comment first, if recommendations require a departure from or a change to the agreed budget and policy framework.
- 3) If a Select Committee cannot agree on one single final report, a single minority report may be prepared and submitted for consideration by the Cabinet or Council with the majority report.
- 4) The Cabinet or Council shall normally consider the report of the Committee within one month of it being submitted to the Head of Democratic Services.
- 5) Reports from Panels must be presented to Cabinet from and on behalf of their parent Committee.
- 6) Reports from Committees within the remit of the Health & Wellbeing Board or any other Council Committee shall be referred to Cabinet first with a recommendation that the report then goes to the Board/Committee concerned.
- 7) Select Committees and Panels may undertake reviews and submit reports spanning across municipal years, except in the year leading up to local council elections.
- 8) Select Committees must report at least annually to Full Council on their workings and make recommendations for future work programmes and amended working methods if appropriate.

To ensure that such reports are considered by the Cabinet:

- 9) The Forward Plan or agenda for Cabinet meetings shall include an item entitled 'Reports from Select Committees'. Only one item from each Select Committee is to be permitted for each Cabinet meeting or a meeting of a Cabinet Sub-Committee (unless they have been considered in the context of the Cabinet's deliberations on other substantive items on the Cabinet agenda) and shall be included on the Cabinet meeting agenda normally within one month of the Committee completing its report/recommendations.

Formal comments to Cabinet and consultations

Committee Members will have access to the Cabinet's timetable for decisions and also its intentions for consultation on matters, as set out in the Forward Plan, including those on budget and policy framework documents.

The committees may submit formal comments on forthcoming Cabinet or Cabinet Member reports, where the committee has had the ability to consider the matter. To facilitate this, a standard section will be included within all executive reports called '*Select Committee Comments*' for such comments to be included and considered by the Cabinet or Cabinet Member at a later date when they make a decision.

In such cases, a Select Committee may agree comments:

- 1) by majority vote at the meeting the matter is being considered; or
- 2) if additional time is required to devise the comments, by delegation to the Democratic Services Officer in conjunction with the Chairman (and in consultation with the Opposition Lead(s)).

Notwithstanding the process above to submit formal comments, committees will also be able to participate, where timetabling permits, in the course of any other public consultations by the Council.

Additional rights to information

As referenced in the Rules on Access to Information in Part 3 of the Constitution, in addition to their rights as Councillors, Members of Select Committees have the additional right to documents and to notice of meetings.

Subject to the limits specified below, a Select Committee (including any of its sub-committees or Panels) will be entitled to copies of any document which is in the possession or control of the Cabinet or its committees and which contains material relating to:

- (a) any business transacted at a public or private meeting of the Cabinet or its committees; or
- (b) any decision taken by an individual member of the Cabinet;
- (c) any decision that has been made by an officer of the authority in accordance with executive arrangements.

The Cabinet, Cabinet Member or Officer must provide that document as soon as reasonably practicable and, in any case, no later than 10 clear days after the request has been received.

Limits on these rights apply to:

- (a) any part of a document that contains exempt or confidential information, unless that information is relevant to an action or decision they are reviewing or scrutinising or intend to scrutinise; or
- (b) any document or part of a document that contains the advice of a political adviser.

Nothing outlined above in this section prevents more detailed liaison between the Cabinet, Cabinet Members and Select Committees as appropriate depending on the particular matter under consideration as set out in the Cabinet and Overview and Scrutiny Protocol.

Informal attendance at meetings

Any Cabinet Member, Member, senior officer and also more junior officers may be invited to attend to assist any Select Committees or a Panel on policy topics or any other matter within their work programme or remit. A Select Committees or Panel may also invite any other person to discuss issues of local concern and/or answer questions. It may for example wish to hear from residents, other stakeholders and shall invite such people to attend.

Formal duty to attend by officers

In accordance with their terms of reference, a relevant Select Committees or Panel may review or scrutinise any decisions made or actions taken in connection with the discharge of any Council functions, subject to the matter being within their Terms of Reference. As well as reviewing documentation, in fulfilling the scrutiny role, it may require any Member of the Cabinet, the Head of Paid Service and/or any senior officer (Service Manager or above) to attend before it to explain in relation to matters within their remit:

- 1) any particular decision or series of decisions;
- 2) the reasons for their action;

- 3) the extent to which the actions taken implement Council policy; and/or
- 4) their performance

and it is the duty of those persons to attend if so required.

When calling senior officers and/or Members to account, the Committee or Panel will remain bound by the Code of Conduct for Members and Co-opted Members. Any discussion concerning an employee's salary or conditions of service would normally be dealt with in the confidential part of the meeting.

Committees and Panels shall take care to ensure that the questioning of Members, officers and individuals from outside the Council is conducted in a fair and balanced manner.

Committees and Panels have the right to criticise the Council and its actions but this shall not extend to personal criticism of individuals.

Where any Member or officer is required to attend a Committee or Panel under this provision, the Chairman of that Committee will inform the Head of Democratic Services. The Head of Democratic Services shall inform the Member or officer in writing or by email giving at least 10 working days' notice of the meeting at which he/she is required to attend. The notice will state the nature of the item on which he/she is required to attend to give account and whether any papers are required to be produced for the Committee or Panel. Where the account to be given to the Committee or Panel will require the production of a report, then the Member or officer concerned will be given sufficient notice to allow for preparation of that documentation.

Where, in exceptional circumstances, the Member or officer is unable to attend on the required date, then the Committee or Panel shall in consultation with the Member or officer arrange an alternative date for attendance.

Officer Support

The appointed Statutory Scrutiny Officer will arrange for dedicated officer support to assist the Select Committees in carrying out their official business. The Select Committees may exercise overall responsibility for the finances made available to them. However, the Head of Democratic Services has responsibility for allocating finances to the individual committees.

Call-in Procedure Rules

This can be exercised by all Select Committees:

- 1) When a decision is made by the Cabinet, a Cabinet Member, Cabinet Sub-Committee, or a Key Decision is made by an officer with delegated authority from the Cabinet, or under joint arrangements, the decision shall be published, including by electronic means, and shall be available at the Civic Centre normally within 2 working days of being made. The notice of the decision will bear the date on which it is published and notified to all Members of the Council and will specify that the decision will come into force, and will then be implemented, on the expiry of 5 working days from 5pm, after the publication of the decision, unless that decision is called-in.
- 2) During that period, the Head of Democratic Services shall arrange for a call-in of a decision for scrutiny if so requested in writing by a majority of members of the relevant Select

Committee who shall give their reasons for requesting that the decision be called in at the time of making the request.

- 3) The request to call-in must be via the approved online form [[Scrutiny Call-in App](#)] issued by the Head of Democratic Services and the ruling by the Head of Democratic Services on the relevant Select Committee (and therefore Members of) to initiate and hear a call-in based on their Terms of Reference shall be final.
- 4) The Head of Democratic Services shall then notify the relevant decision-maker (Cabinet, Cabinet Member or Officer), Chief Executive and Corporate / Executive Director that a valid call-in has been received and that the decision must be put on hold and not implemented.
- 5) The Head of Democratic Services, in consultation with the Chairman of the relevant Select Committee, will then call a meeting of that Committee as soon as possible and in any event, to be held within 10 working days of the valid call-in request.
- 6) The Select Committee will receive the original report on the decision, any additional information required given the reasons for the call-in and may invite relevant officers / Cabinet Member(s) to the meeting to give account.
- 7) If the Select Committee agrees to uphold the decision made, then via majority vote, the decision stands and can be implemented with immediate effect.
- 8) If, having considered the decision further, the Select Committee object to or are still concerned about the decision, then via majority vote, it may:
 - a) refer it back to the decision-making person or body for reconsideration, setting out in writing the nature of its concerns. The decision-making body or person, considering all factors, then will make a final decision on the matter and that decision stands and comes into immediate effect.
 - b) refer the matter to Full Council, but only in the circumstances set out below.

If for any reason following a valid call-in request, the Select Committee does not formally meet within 10 working days of the date of the request, the original decision shall take effect at the end of the 10-day period.

Referral of call-in to Full Council

A decision will not be referred to Full Council unless either the Committee believes it to be contrary to the Policy Framework or Budget or considers that it was a Key Decision that was not dealt with as such by the Cabinet and that the advice of the Monitoring Officer / Section 151 Officer concurs with this. If it is referred to the decision maker, they shall then reconsider within a further 5 working days, amending the decision or not, before adopting a final decision.

If the matter was referred to Full Council and the Council does not object to a decision which has been made, then no further action is necessary, and the decision will be effective in accordance with the provision below.

If the Council does object, it has no authority to make decisions in respect of a Cabinet decision unless it is contrary to the policy framework, or contrary to or not wholly consistent with the budget. Unless that is the case, the Council will refer any decision to which it objects back to the decision-making person or body, together with the Council's views on the decision. That decision-making body or person shall choose whether to amend the decision or not before reaching a final decision and implementing it. Where the decision was taken by the Cabinet as a whole or a committee of

it, a meeting will be convened to reconsider within 10 working days of the Council request. Where the decision was made by an individual, the individual will reconsider within 10 working days of the Council request.

If the Council does not meet, or if it does but does not refer the decision back to the decision-making body or person, the decision will become effective on the date of the Council meeting or expiry of the period in which the Council meeting should have been held, whichever is the earlier.

Waiver of call-in period for urgent or special urgency decisions

In accordance with the Rules on Access to Information in Part 3 of the Constitution, the call-in procedure set out above shall not apply where the decision being taken by the Cabinet or Cabinet member is urgent. A decision will be urgent if any delay likely to be caused by the call-in process would seriously prejudice the Council's or the public's interests or could lead to an (increased) risk of damage to people or property. The record of the decisions, and notice by which it is made public shall state whether in the opinion of the decision-making person or body, the decision is an urgent one, and therefore not subject to call-in.

The Chairman of the relevant Select Committee (or Vice-Chairman in their absence) must be informed that the decision will be implemented immediately upon him/her agreeing that the decision is reasonable and to it being treated as a matter of urgency. In the absence of the Chairman or Vice-Chairman then the Mayor (or Deputy Mayor if required) can take this decision. Decisions taken as a matter of urgency must be reported to the next available meeting of Council, together with the reasons for urgency.

Matters that cannot be called-in

The following decisions cannot be called-in by Members of a Select Committee:

- a) Any decision relating to a non-executive function, e.g. licensing or planning decision;
- b) Non-key decisions delegated by Cabinet to Council officers (e.g. operational, i.e. to implement the Cabinet's decision);
- c) Decisions taken certified as urgent, under urgency or special urgency provisions (where the Chairman of the relevant Select Committee has waived the scrutiny call-in period);
- d) A decision that has already been the subject of a call-in during the previous 6 months;
- e) Any decision that is required to be taken by the full Council (e.g. Annual Budget, Policy Framework documents, or reports to Cabinet making recommendations to full Council);
- f) Decisions that are not technically decisions, i.e. "to note" or "to receive";
- g) Previously taken decisions by Cabinet Members that are later 'ratified' by Cabinet.

Protocol on Overview & Scrutiny and Cabinet Relations

In addition to the procedures set out in this Chapter, the following protocol sets out the practical expectations of Select Committees Members and Cabinet Members to ensure an effective relationship that adds value to overview and scrutiny governance in Hillingdon. It was adopted by Full Council on 12 September 2019:

This protocol sets out the practical expectations of Select Committee Members and Cabinet

Members to ensure an effective relationship that adds value to overview and scrutiny governance in Hillingdon.

Notwithstanding their independent role, Committee Members are expected to:

- Take into account suggestions from Cabinet Members as well as other stakeholders, on the development of their multi-year work programmes or policy reviews to ensure strong organisational and community support;
- Ensure appropriate early engagement with Cabinet Members on draft policy review recommendations in order to gauge support.
- Seek early engagement with the relevant Cabinet Member, Cabinet Member for Finance and Leader of the Council to consider the viability of draft policy review recommendations that may have a financial consequence;
- Seek the support of the relevant Cabinet Member, Leader of the Council and Corporate / Executive Director when it considers to compel a particular contractor providing Council services to provide information or attend a meeting;
- Through Democratic Services, ensure Corporate & Executive Directors and Cabinet Members are kept regularly informed about the committee's activity and multi-year work programmes.
- Liaise with the relevant Corporate / Executive Director, Cabinet Member and Leader of the Council should exceptional financial or officer resources be required in order to undertake a particular future work activity or policy review.

Respecting the independent role of the committees, Cabinet Members are expected to:

- Never personally seek to direct the activity of a committee, though they may make suggestions or request matters of interest to be considered by a Committee;
- Ensure their attendance to provide information when requested by the Committee (noting that further informal and formal provisions by a committee for this are set out in the Constitution).
- Actively support the provision of relevant council information and other requests from the Committee as part of their work programme;
- Fully and openly, consider any findings from a committee following a formal scrutiny call-in or from any final recommendations presented to Cabinet from a policy review.
- Where feasible, provide opportunities for committees to provide their input on forthcoming executive reports as set out in the Forward Plan to enable wider pre-decision scrutiny (in addition to those statutorily required to come before committees);
- Ensure all recommendations from committees approved by the Cabinet are implemented in a timely and effective manner by officers, and that this be monitored regularly by Corporate & Executive Directors, as it is with the Committees themselves.

In the unlikely event that that a difference in view occurs between the parties, the Committee Chairman, Committee Member or Cabinet Member should inform the Statutory Scrutiny Officer, who will seek to resolve the matter in accordance with this protocol, the Council's Constitution and other relevant guidance and will consider the best interests of both overview & scrutiny and the executive. Should the matter not be resolved, any final determination will be by the Monitoring Officer. The Statutory Scrutiny Officer will report on the effectiveness of this protocol as part of the Annual Report to Council each year.

POLICE AND MENTAL HEALTH ATTENDANCE AT A&E UPDATE

Committee name	Health and Social Care Select Committee
Officer reporting	Nikki O'Halloran, Democratic Services
Papers with report	None
Ward	n/a

HEADLINES

The External Services Select Committee previously heard from partners on 22 February 2022 about the pressures currently faced when dealing with mental health attendances at Accident and Emergency (A&E) departments.

RECOMMENDATION: That the Health and Social Care Select Committee notes the update.

SUPPORTING INFORMATION

1. Section 136 (s136) is part of the Mental Health Act that gives police officers emergency power under the Mental Health Act 1983 to remove a person from a public place (when they appear to be suffering from a mental disorder) and take them to a place of safety. The person will be deemed by the police to be in immediate need of care and control as their behaviour is of concern. Once in a place of safety, the person's mental health can be assessed
2. Depending on the situation, a place of safety is likely to be a hospital (a health-based place of safety (HBPoS)) or a police station. Although a police station is deemed to be a place of safety for an adult, the environment could exacerbate a person's mental ill health and is therefore avoided if possible. If the patient has a physical health issue, the police may need to take them to A&E to get that physical health need addressed before addressing the mental health issues. About 70% of the patients who need to go to a Section 136 suite end up in A&E as they need physical care at the same time as going into mental health crisis (as a result of things like self harm). They can be detained in a place of safety for up to 24 hours, but this can sometimes be extended for another 12 hours.
3. An Approved Mental Health Professional (AMHP) will need to interview the person who is being detained and their assessment will help professionals decide on the next steps, which could include admission to a Section 136 suite. The Council has worked hard to train and develop a large number of AMHPs, who are usually trained social workers. AMHPs are called upon to organise, coordinate and contribute to Mental Health Act assessments and sign off hospital detentions / "sectioning".
4. There may be times when the person taken by the police to A&E under s136 is under the influence of drugs and / or alcohol. In these circumstances, the police may have to wait with the patient whilst the effects of the drugs / alcohol wear off so that a mental health assessment can then be undertaken. There will be times when the patient is then released without needing to be admitted to the Section 136 suite as the issue was substance related rather than mental health related.

5. The Riverside Centre, based within the grounds of Hillingdon Hospital, has a two bed Section 136 suite. The Centre, which also has two adult inpatient wards that provide a safe and therapeutic environment for people with acute mental health problems, is provided by Central and North West London NHS Foundation Trust (CNWL). The service is commissioned by North West London Clinical Commissioning Group (NWL CCG).
6. It should be noted that any patient can be taken to any HBPoS in the country which means that the two s136 spaces at Riverside are not ringfenced to Hillingdon. As such, patients from places like Buckinghamshire or Surrey might be brought to Riverside and patients from Hillingdon might need to be taken to other s136 places such as Harrow depending upon availability.
7. 3-4 years ago, the local police issued around 225 s136s per year and about one in ten emergency calls in the West Area were in relation to a mental health crisis. By 2021, this had increased to around 330, with up to 20% of these instances being in relation to repeat patients, and officers were spending an average of more than 12 hours per s136 detention. A dedicated officer had been put in place in Hillingdon to focus on reducing the number of repeat mental health related attendances at A&E.
8. The London Compact for Mental Health Care¹ sets out the care that should be expected. This includes the need for someone to be seen by a mental health professional within one hour, even if in the community. Although some of the care set out in the Compact is deemed aspirational, it is clear that the minimum standards are not being met, for example, the police could be waiting for 9-12 hours in someone's house for a mental health professional to arrive.
9. In 2017, Healthy London Partnership looked at London's s136 pathway and HBPoS². A key part of improving crisis care is ensuring patients have access to a Health Based Place of Safety 24/7 which includes skilled, specialist staff around the clock. There are currently around twenty HBPoS sites in London. The demand across these sites means dedicated staff cannot be available at all sites 24/7 so work needs to be undertaken to see how these sites might be configured differently across London to improve the pathway for individuals detained under s136 and meet the key standards set out in the guidelines.
10. However, the impact of the increasing number of mental health crises being experienced by an increasing number of people across the country is not just being felt by acute health professionals. The inefficiencies and gaps in the mental health care pathways are impacting on the ambulance service, the police and other services. For example, the London Ambulance Service (LAS) is routinely called out to all s136 detentions in London but, with an increase in the demand for their service, they are unable to attend around a third of these incidents in Hillingdon.
11. It appears that there needs to be a reduction in demand, an increase quality and an increase in the resources available to deal with s136 detentions. Although initiatives such as street triage would likely address the quality of the service provided, it might also increase demand. Insofar as the availability of resources to meet demand is concerned, it is understood that consideration is currently being given to increasing the total number of s136 places available in NWL by increasing the number of beds at the Lakeside Section 136 suite in Isleworth.

¹ https://www.england.nhs.uk/london/wp-content/uploads/sites/8/2019/10/London-Mental-Health-Compact_June2019.pdf

² <https://www.healthylondon.org/wp-content/uploads/2018/01/In-focus-S136-and-health-based-places-of-safety-Dec-2017.pdf>

Future Action

12. Whatever action is taken to improve the s136 pathway and HBPoS in line with the Compact, it will be important to ensure that there is a mechanism in place for all of the partners involved to provide feedback on its effectiveness. This ongoing cyclical conversation would enable any shortcomings to be addressed in a timely manner to ensure that individuals who go into mental health crisis are helped to get better as quickly as possible, therefore taking the pressure off the system as a whole.
13. Representatives from CNWL, Hillingdon Health and Care Partners (HHCP), NWL CCG, The Hillingdon Hospitals NHS Foundation Trust (THH) and the West Area Basic Command Unit (Metropolitan Police Service) have been invited to attend this meeting to provide Members with an update on any action that has been taken to resolve the issue since the meeting on 22 February 2022. Members will then be able to determine what course of action, if any, they would like to take.

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CARERS STRATEGY: 2021/22 DELIVERY PLAN UPDATE

Committee name	Health and Social Care Select Committee
Officer reporting	Gary Collier – Adult Social Care and Health
Papers with report	Appendix 1: Case Studies Appendix 2: Summary of Carers' Strategy Governance Arrangements Appendix 3: Draft 2022/23 Carers' Strategy Delivery Plan Appendix 4: 2022/26 Strategy Proposed Metrics
Ward	All

HEADLINES

1. The contribution of carers to the health and wellbeing of those they care for is significant and the purpose of a carers' strategy is to demonstrate what the Council and its partners are doing to support carers in the borough. In Hillingdon the importance of supporting carers is recognised by all health and care partners as being critical to the sustainability of the local health and care system.

2. This report precedes the annual update to Cabinet on the delivery of the Carers' Strategy Delivery Plan that will be considered in July 2022. The report is intended to give the Committee the opportunity to consider the update before Cabinet so that any comments it may have can be reflected in that report. Cabinet requested an annual update in 2015 and this practice has continued.

3. The most recent carers' strategy covered the period between 2018 and 2021 and a new strategy is under development, which is addressed in more detail later in this report. The content of the new strategy will be informed by information from the 2021 census which, as with the 2011 census, included specific carer-related questions. Publication of this information is now expected in the autumn. It will also be informed by the results of the National Carers' Survey undertaken in November 2021.

4. Pending the completion of the new strategy a delivery plan was developed for 2021/22 that was considered by both the Families, Health and Wellbeing Select Committee and Cabinet. This report updates the Health and Social Care Select Committee on the delivery of the 2021/22 plan. It also gives the Committee the opportunity to comment on key aspects of the proposed new strategy and the 2022/23 delivery plan.

Who can be a carer?

5. There are two statutory definitions of who is a carer, and these are as follows:
- *Young Carer:* The Children Act, 1989 defines this term as being someone under 18 who helps to look after another person but not under a contract or scheduled voluntary work.
 - *Adult Carer:* The Care Act, 2014 defines this as an adult, i.e., a person aged 18 or over, who is providing care and/or support for another adult for free but not under a contract or scheduled voluntary work.

6. The Children Act places a duty on the Council to undertake an assessment where it appears that a young carer may have support needs. The Council is required to consider how needs identified from an assessment should be met.

7. The Care Act creates a statutory right to a carer's assessment for an adult carer and the Council may have an obligation to assist them even if the person they are caring for does not satisfy the national eligibility criteria. This would be subject to them satisfying the national eligibility criteria for carers. Where the cared for person is eligible for social care assistance from the Council then the support needs of the carer would generally be considered as part of an overall package of care to address their collective needs.

8. References to the '*review period*' in this report means the period from the 1st April 2021 to the 31st March 2022 unless otherwise stated.

9. The report is structured as follows:

- A. Strategic Context
- B. 2021/22 Delivery Plan Update: Challenges and Achievements
- C. Draft 2022 – 2026 Joint Carers' Strategy: Proposed Vision, Mission, Supporting Principles and Outcomes.
- D. Draft 2022/23 Delivery Plan

RECOMMENDATIONS

That the Committee:

- 1. endorses the alignment of reporting frequency on the delivery of support for carers to enable the Committee's views to be reflected in future update reports to Cabinet.**
- 2. notes progress against the Carers' Strategy delivery plan activity for 2021/22.**
- 3. endorses the proposed vision, mission, supporting principles and intended outcomes for the 2022 to 2026 Joint Carers' Strategy.**
- 4. endorses the 2022/23 delivery plan.**
- 5. questions officers and partners on any other aspect of the report.**
- 6. identifies any comments it wishes to include in the annual delivery plan update report to Cabinet.**

SUPPORTING INFORMATION

A. Strategic Context

9. Carers say that supporting someone to live an independent life at home, in the community they know, can be very rewarding. However, the cost to carers in terms of their own health, financial situation, employment position and independence can be considerable. In Hillingdon we want to enable our residents to recognise and identify their role as a carer, so they know where to access the right support.

10. There are only two sources of information about the numbers of carers in Hillingdon pending the publication of the 2021 census and these are:

- *The 2011 census*: This showed that in 2011 there were 25,000 people who self-identified as carers. The passage of time means that data from the 2011 census can no longer be relied on to draw meaningful conclusions that can apply to the needs of carers now.

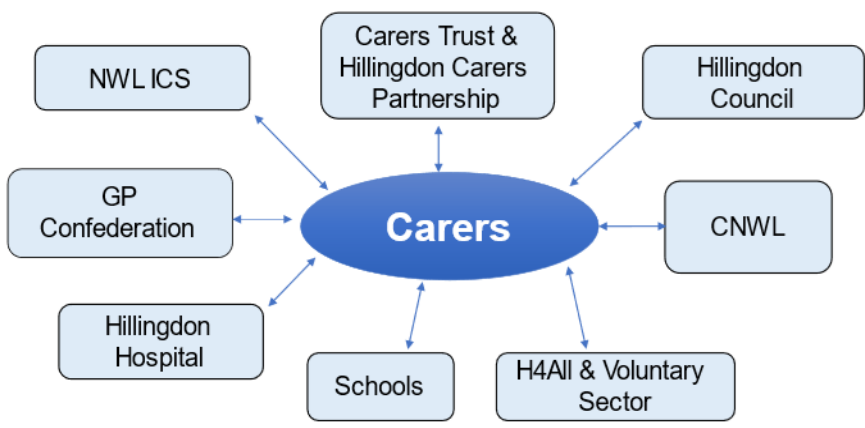
- *The Carer Register:* The Carer Register was established by Carers’ Trust Hillingdon and is maintained by them. Registration by carers is entirely voluntary but is a key route by which information can be targeted by Carers’ Trust. As of 31st March 2022, there were 970 young carers and 2,287 adult carers registered.

11. Data from the National Carers’ Survey undertaken in November 2021 will provide qualitative information about carers already known to the Council who completed the survey. This survey was commissioned by the Department of Health and Social Care and the Care Quality Commission (CQC) and the data sample and collection methodology are determined nationally. 677 of Hillingdon’s adult carers were sent a survey questionnaire. The results of the survey will be published in June 2022.

12. The main offer of support to young and adult carers in the borough comes through the Carer Support Service contract between the Council and Carers’ Trust Hillingdon (CTH), which is the lead organisation for the Hillingdon Carers’ Partnership. The latter is a consortium of local third sector organisations that has been created to support carers in the borough. In addition to Carers’ Trust, the consortium includes the Alzheimer’s Society, Harlington Hospice (including their homecare arm called Harlington Care) and Hillingdon Mind. The Committee may be interested to note that the funding for this service, i.e., £659k, is included in the Better Care Fund (BCF).

13. The multi-agency Carers’ Strategy Group (CSG), which is chaired by the Council, has responsibility for overseeing the development and delivery of the Joint Carers Strategy. The diagram below summarises the partners involved in supporting carers. Membership of the CSG during the review period also included Cllr Haggar in her capacity as the Council’s Carers’ Champion.

Partners Supporting Carers



Key
 CNWL = Central and North West London NHS Foundation Trust
 NWL ICS = North West London Integrated Care System

14. **Appendix 2** shows how the Carers’ Strategy Group fits in to the governance arrangements for Hillingdon’s health and care system.

B. 2021-22 Delivery Plan Update: Challenges and Achievements

15. This part of the report updates the Committee on the implementation of the 2021/22 Carers' Strategy Delivery Plan. The Committee will be aware that implementation of the 2021/22 delivery plan was within the context of the second year of the Covid-19 pandemic. Some of the challenges that this has presented include:

- People having to undertake caring responsibilities unexpectedly but not recognising themselves as carers.
- The reluctance of carers to take up short break opportunities over infection prevention and control concerns.
- Limited availability of some short break options during covid-related restrictions.
- Mental health implications of caring during covid-related restrictions, i.e., coping with the pressures of being a carer.
- Managing the financial implications of being a carer.

16. The agreed actions for 2021/22 shown below are aligned to the principles for supporting carers set out in the 2018 to 2021 strategy. **Appendix 1** illustrates the work of partners in supporting carers in Hillingdon with case studies.

Principle 1: We will support the identification, recognition and registration of Carers in primary care.

17. **Re-establish Carer leads in all GP surgeries.** *Deferred:* Prior to the pandemic work between Carers Trust and the GP Confederation had resulted in carer leads (please see below) being established in all 45 of Hillingdon's GP practices. By the end of 2021/22 this had reduced to 27 and prioritisation of the vaccination programme has resulted in this action being deferred to 2022/23.

18. **Explore with Carer Leads in GP practices how to identify and support Carers who may be reluctant to attend practices.** *Deferred:* Another impact of the pandemic has been to reduce the number of people attending practices, which has meant that this action has had less relevance in 2021/22. The issue concerning identification of carers in practices has been deferred to 2022/23.

19. **Ensure all practices have current and detailed information about support for carers in Hillingdon.** *Partially delivered:* A new updated information pack for Primary Care was created by Carers' Trust and distributed in May 2021, although practices were not properly open. This fact and the focus of practices on other priorities meant that the packs did not have the intended impact. Consequently, and also in taking into consideration the practices' focus on the vaccine programme, distribution of further information packs in Q4 was delayed and will be considered for 2022/23.

Carer Leads in GP Surgeries: The Role Explained

Key tasks include:

- Proactively identifying and supporting Carers, many of whom do not see themselves as Carers;
- Ensuring that a surgery Carer Register is maintained and updated regularly;
- Ensuring the practice provides active signposting to the Hillingdon Carers' Partnership;
- Ensuring that standardised packs of information for Carers are available within the waiting room;
- Feeding into The Confederation and its partners, e.g., Hillingdon Carers Partnership and the CCG, any gaps in provision or requirements to help practices to support Carers further;
- Working with colleagues in the practice to provide enhanced access and flexibility of appointments for Carers;
- Considering how else the practice might facilitate improved carer-health – monthly Carer Health checks for example;
- Attending any training/information sessions that relate to the support of Carers within General Practice.

Principle 2: Carers will have their support needs assessed and will receive an integrated package of support in order to maintain and/or improve their physical and mental health.

20. Review the process for assessing the needs of Young Carers and mechanism for recording the outcome of assessments. *Completed:* The assessment process is through the early help assessment (EHA), which serves as the referral form for all children with an additional need. Assessments are submitted via the Stronger Families portal and triaged by the Stronger Families Hub.

21. Review with partners the pathway for addressing the needs of Young Carers. *Completed:* A Schools Liaison Officer post has been established that links in with the Carers' Trust.

Principle 3: Carers will be empowered to make choices about their caring role and access appropriate services and support for them and the person they look after.

22. Face to face service provision will be restored following lifting of Covid restrictions. *Completed:* The majority of services delivered by Hillingdon Carers' Partnership organisations had restored face to face provision by the end of March 2022. However, some provision continues to be available online at the request of carers.

23. A guide for people who suddenly became Carers will be developed. *Completed:* This was co-produced between the Council and Carers' Trust. The latter consulted with carers in its production. The *Are you a carer?* leaflet was finally approved in April 2022 and is on the Council's website. It can be accessed via the following link [Am I a carer? - Hillingdon Council](#)

24. The Committee will see that the underlying message in the leaflet is to contact Carers' Trust

as Hillingdon's one stop shop for carers and a key route for information, advice and support.

Principle 4: Staff will be aware of the needs of Carers and of their value to our communities.

25. All new staff starting with Hillingdon Health and Care Partners (HHCP) undergo an hour's introductory training about the role of Carers in supporting the health and care system and the importance of identifying them and addressing their needs. *Completed:* Since February 2022 carer awareness training has been included within wider training about the role of H4All. This is now a business as usual activity.

More About HHCP

HHCP is an alliance of local, mainly NHS, organisations that includes The Confederation of Hillingdon-based GP practices, the Central and North West London NHS Foundation Trust, The Hillingdon Hospitals NHS Foundation Trust and H4All. HHCP's main objective is to improve the health and wellbeing of Hillingdon's residents and their experience of care through improved coordination and integration of services and earlier intervention to prevent crises.

About H4All

H4All is a local consortium that is also a registered community interest company and comprises of Age UK Hillingdon, Carers' Trust Hillingdon, the Disablement Association Hillingdon (Dash) and Harlington Hospice. The consortium provides opportunities for improving efficiencies across the four organisations by sharing resources in key areas, such as financial systems, HR advice, activity reporting.

Principle 6: Carers will be respected and listened to as expert care partners and will be actively involved in care planning, shared decision-making and reviewing services.

26. Review the role of the Carers' Strategy Group. *Completed:* Membership of the group has been expanded to include representatives from health partners, i.e., the GP Confederation, community health and community mental health, Hillingdon Hospital and North West London Clinical Commissioning Group.

27. Two Carer representatives will be recruited to the Carers Strategy Group. *Partially completed:* Carer representation on the Carers Strategy Group (CSG) is important to ensure that discussions and decisions reflect lived experience. One carer representative has been identified to be a part of the CSG and has attended one meeting. However, securing other representatives has proved a challenge to deliver as the roles require people who are able to take a more strategic view, i.e., think of their own experiences and how they may reflect those of the wider carer population.

28. Coordinate Carer engagement activity via regular Carer Forums. *Completed:* Forum meetings were held in October 2021 and March 2022. The October meeting was virtual and was joined by 42 carers. In March 2022 there was a face to face meeting attended by 20 carers and a further 10 carers on the online meeting. Issues raised from the carer forums feed into the CSG meetings and help to inform delivery plan priorities.

Principle 7: The support needs of Carers who are more vulnerable or at key transition points will be identified early.

29. **The process for identifying and recording Carers with multiple caring responsibilities within Adult Social Care will be refined.** *Completed:* A monthly performance report that identifies people with multiple caring relationships and the level of formal support they are in receipt of is now in place. The intention is to establish an auto-generated report, but this will be an action for 2022/23.

30. **The following issues will be monitored as Covid restrictions are lifted:**

- **People experiencing mental illness**
- **Management of death and bereavement**
- **Identification of safeguarding issues**

31. Carers Trust Hillingdon (CTH) Trustees have invested reserves into a new part time Health and Wellbeing (HWB) post to coordinate this activity and develop their end of life and bereavement offer.

32. Partner achievements during the review period that are in addition to the specific actions within the 2021/22 delivery plan are highlighted below for the Committee's consideration.

Council Achievements

33. **Carers Assessments:** There were 897 carers' assessments undertaken in 2021/22, which includes 299 triage assessments completed by Carers' Trust. This compares to 995 assessments in 2020/21 and 249 triage assessments undertaken by Carers' Trust. Triage assessments are much shorter than the full assessment and are used by Carers' Trust to help a carer identify whether they are likely to receive support from the Council, which would only be obtainable following a full assessment. In 2021/22 Carers' Trust referred 28 carers to the Council for a full assessment.

34. Carers are routinely identified by Adult Social Care through the Care Act assessment of need process and a carer assessment offered. Our experience, however, is that many carers decline the offer, which helps to explain the reduction in assessments in 2021/22 compared to the previous year. For example, in a one month snapshot out of the 258 households identified as having someone who was a carer, 79% (204) declined to have an assessment. The reasons given for declining an assessment include people who consider that the assessed care package for the person they are caring for sufficiently addresses their needs; people not identifying themselves as carers and those who feel that the services available through Carers' Trust meets their needs.

35. It is important that the Committee is aware that carers who do not wish to go through the carer assessment process may still access the universal services provided under the Carer Support Service contract previously mentioned. This is also the case with carers assessed as not meeting the national eligibility criteria for carers.

36. **Respite and other Carer-related service provision:** During 2021/22 208 Carers were provided with respite or another carer service at a cost of £2,059k. This compares to 201 Carers being supported at a cost of £1,916k during 2020/21 and 196 carers being supported at

a cost of £2,002k during 2019/20. This includes bed-based respite and home-based replacement care as well as voluntary sector provided services and those directly purchased via Direct Payments. The cost of services to meet needs identified as a result of a Care Act assessment of the cared for person that benefit the carer are not included as it is not possible to apportion the costs on the Council's case management IT system.

37. The Committee may also wish to note that 2021/22 has seen an increase in the number of carers receiving Direct Payments in their own right from 103 to 133.

More About Direct Payments

With Direct Payments the Council's financial contribution to meeting assessed social care needs is paid directly to the eligible person either in the form of a pre-paid card or directly into a bank account. This gives the eligible person more flexibility and control to directly employ their own care workers or a personal assistant who will, for example:

- Be the same person and be available when required.
- Speak the same language.
- Have an understanding of cultural and/or religious needs.

Hillingdon Carers' Partnership Achievements

38. **Responding to demand for emotional support:** Demand on Mind's support services increased by 45% during the review period, which led to more psychotherapy and peer support groups being established. 124 carers accessed the counselling service in 2021/22 and 96 received intensive support from Mind's Family Support Service. 145 carers continue to receive weekly support calls from trained volunteers.

39. **Breaks from caring:** During the review period 3,109 breaks were provided to adult carers through a combination of arts and cultural activities, learning workshops, carer cafés, peer support groups and actual replacement care delivered by Harlington Care. 1,622 breaks were provided to support young carers and included arts and crafts activities, development workshops, e.g., employability, school holiday activity programmes, residential weekends and whole family trips. Some activities, such as fitness session, were run online when restrictions on mixing households were in place.

40. **Improving income for Carers:** £1,052k was secured in carer-related benefits during the review period to improve the household incomes of carers in Hillingdon.

41. **Additional income:** Approximately £213k in additional income was raised during the review period to provide extra activities and events for carers. This includes £60k from the Triangle Trust for a schools' support programme and £148k from Carers' Trust UK to develop a supported transition service operating across Hillingdon and Harrow for carers aged 16 to 25.

CNWL Community Adult Mental Health Service Achievements

42. **Carers have continued to access to the Recovery and Wellbeing College courses**

delivered by CNWL: The term time programme is available on CNWL's website and is regularly advertised through local carer groups and Carers' Trust Hillingdon who are provided with timely updates by CNWL.

43. Triangle of Care continues to be established within Hillingdon mental health services: Carers' champions are now in all community and acute teams in Hillingdon mental health services. Co-produced training on carers needs has been provided to staff. CNWL has achieved stage 1 of the accreditation process from the National Carers' Trust.

Triangle of Care Expanded

There are six standards to the Triangle of Care, and these are:

1. Carers and the essential role they play are identified at first contact or as soon as possible thereafter.
2. Staff are '*carer aware*' and trained in carer engagement strategies.
3. Policy and practice protocols re: confidentiality and sharing information, are in place.
4. Defined post(s) responsible for carers are in place, e.g., Carers' leads or champions.
5. A carer introduction to the service and staff is available, with a relevant range of information across the care pathway, e.g., an introductory letter from the team or ward explaining the nature of the service provided and who to contact.
6. A range of carer support services is available.

44. Carers are a part of the involvement work in Hillingdon mental health supporting the transformation and quality of services: Carers attend the bi-monthly involvement group and it is co-chaired by a carer. Carers have been involved in co-production activities related to transformation including developing a public questionnaire, developing information materials and a website. The service manager for the community and primary care meets with a local carers' group to consult and update them on a regular basis.

C. Draft 2022 – 2026 Joint Carers' Strategy: Proposed Vision, Mission, Supporting Principles and Outcomes.

45. As with the 2018 – 2021 Joint carers' Strategy, the new strategy will detail how the Council, the NHS and the voluntary sector will work together to improve support for all unpaid carers who live – or provide care for someone who lives – in the London Borough of Hillingdon.

46. Carers have been consulted on the proposed vision, mission statements, supporting principles and outcomes through the Carer Forum and an online survey will be established in June.

Proposed Vision for Carers

47. The following has been developed jointly between the Carers' Trust Hillingdon and the Council.

Working together, and with carers, we will improve the health and wellbeing of carers of all ages in Hillingdon and deliver a positive experience of care and support services.

Mission Statements

48. The proposed mission statements shown below are based on the '*Making it real*' approach developed by *Think local, act personal*, a national partnership of more than 50 organisations, including local government, social care providers, the NHS, and the voluntary and community sector as well as people with lived experience, who are committed to transforming health and care through personalisation and community-based support.

49. The proposed mission is that by 2026 most unpaid carers can say:

- *I am supported to provide care to the extent that I wish and do so in a way that accommodates my own education, employment and health and wellbeing needs.*
- *I have received effective advice and support that minimises the financial impact of caring on our household.*
- *I have a voice: I am recognised both as an 'expert' partner in care planning for the person I care for, and my experiences and opinions are valued and used to inform the improvement of support for carers.*
- *I have access to appropriate support that suits my needs, including breaks from being a carer and a social life outside of caring.*
- *I know where to go for information and advice and this meets my needs.*
- *I have received the right training and support to deliver my caring role effectively and in a way that ensures my personal safety and the safety of the person I care for.*
- *The children and young people in my family who have caring responsibilities are given support to mitigate the negative effects of caring.*

Supporting Principles

50. It is proposed that the following principles will support the delivery of the vision:

- **Thinking carer:** We will take a carer focused approach to everything we do so that the potential impact on carers is considered.
- **Identification and recognition:** We will work together support the identification and recognition of carers.
- **Listening and respect:** We will listen to and respect carers as expert care partners and they will be actively involved in planning the care and support that the cared for person receives.

- **Choice and control:** We will support carers to have choice and control over how their needs are met, including working with the independent sector to develop more personalised options.
- **Engagement:** We will engage with carers to hear from them about how their needs are changing and to invite their views about priorities.
- **Innovative approaches:** We will be open to new approaches to meeting the needs of carers that have not been tried before or have not been tried before locally.

Outcomes for Carers

51. This section describes the proposed outcomes for carers that the new strategy will seek to achieve. It also outlines the scope of the work that will be undertaken to achieve the outcomes and deliver the vision for carers by 2026.

Outcome 1: The physical and mental health and wellbeing of carers of all ages is supported.

- Addressing health and wellbeing needs.
- Preventing loneliness and isolation.
- Access to education and employment opportunities.
- Addressing safeguarding issues.

Outcome 2: The financial impact of being a carer is minimised.

- Access to information, advice and support about allowance and benefit entitlements.
- Support and guidance to employers of people with caring responsibilities.
- Support via the Working for Carers Employment programme.

Outcome 3: Carers are identified, recognised and able to make a positive contribution.

- Development and maintenance of an understanding by professionals of the role of unpaid carers.
- Identification of carers in different settings, including Hillingdon Hospital.
- How we will engage with carers, learn from their experiences and provide opportunities for them to shape local priorities.

Outcome 4: Carers have a life alongside caring.

- Short break options.

- Emergency replacement care plans.
- Supporting working carers.

Outcome 5: Carers have access to quality information and advice at any point in their caring journey and know where to find this.

- Access to information and advice.
- Education of health and care professionals about sources of help and onward referral.

Outcome 6: Carers have the skills they need for safe caring.

- Identifying skills required
- Developing training and support for carers.

Outcome 7: Young carers are supported from inappropriate caring and provided with the support they need to learn, develop and thrive and enjoy being a young person.

- Identification of young carers and work with schools.
- Developing the young carers assessment process.
- Break opportunities for young carers
- Addressing safeguarding issues.

D. Draft 2022/23 Delivery Plan

52. The draft 2022/23 Carers' Strategy Delivery Plan is attached to this report as **Appendix 3**. The Committee is asked to note that the actions in the plan have been aligned to the outcomes in the draft strategy.

PERFORMANCE DATA

Current Performance Information

53. The only national comparative data that would allow the Committee to see Hillingdon's performance in supporting carers in context is the results of the National Carer Survey referred to in paragraph 11.

Proposed Performance Metrics

54. The proposed metrics that are aligned to the outcomes shown above are set out in **Appendix 4**. The challenge is how to measure the impact of support provision for carers without necessitating the creation of a resource intensive bureaucracy that detracts from service delivery. The Committee may wish to note the stated intention in the white paper, *Joining up*

care for people, places and populations: The government's proposals for health and care integration published by the Department of Health and Social Care (DHSC) on the 9th February 2022 to publish a shared health and social care outcomes framework in 2023, which is likely to impact on what is required of place-based health and care systems.

RESIDENT BENEFIT

55. The report identifies how carers have been supported by the Council and partners in 2021/22 and plans for continued support in 2022/23 and beyond.

FINANCIAL IMPLICATIONS

56. There are no direct financial implications arising from this report.

LEGAL IMPLICATIONS

57. There are no direct legal implications arising from this report.

BACKGROUND PAPERS

2018 – 2021 Joint Carers' Strategy.

Appendix 1 – Case Studies

Case Study A

Ms A is aged 39 and is a single parent who looks after her 20 year son who has bipolar disorder and treatment resistant depression. Ms A is also looking after a younger school age child.

Ms A presented to Carers' Trust with extreme trust issues which prevented engagement with services and inability to communicate effectively or be involved with agencies supporting her son. Ms A was looking for support to help her manage her caring role and advocacy input when liaising with agencies involved in the care of her son.

Initial engagement with Ms A was difficult due to her suspicion of professionals and their intentions. A person-centred approach was used to help build an effective working relationship with her and to help her learn that services could provide positive support.

The carer assessment process was tailored to Ms A's needs to ensure that she did not find the process overwhelming but instead saw the sessions as an opportunity to discuss needs and look at planning relevant and effective support. The goal was to empower Ms A to feel confident to liaise and be involved in the care planning for her son and be provided and engage with effective support for her own mental health.

Ms A was referred for Dialectical Behaviour Therapy (DBT), but she had difficulty engaging with the assessment process because of her mistrust. The psychologist contacted the Carers' Trust's Family Support Officer for input because of concerns over the criteria not being met due to fears over Ms A's long-term commitment. The Family Support Officer provided advocacy to help Ms A engage with this service and DBT was eventually offered. This provided support for her own mental health therefore enabling her to manage her caring role more effectively.

About Dialectical Behaviour Therapy

Dialectical behaviour therapy (DBT) is a type of evidence-based psychotherapy. that was created to help those diagnosed with borderline personality disorder. It focuses on helping people change their behaviour patterns, as opposed to trying to think or talk through the issues they are struggling with.

Whilst Ms A was involved in the Family Support Service, her son was sectioned due to a deterioration in his mental state. Ms A found it impossible to manage his care at this point and was becoming unwell due to the stress of her role. She needed a great deal of emotional support at this point and the Family Support Officer supported her through advocacy work with services involved in the care of her son. J. reported that this intervention helped prevent her mental health deteriorating further and allowed her to continuing caring for her other child.

The Family Support Officer engaged Ms A using a solutions-focused approach, working in partnership to identify goals and find ways to achieve them. Through psychoeducation Ms A was supported to change her mind set, trying new approaches to working with professionals and started to see positive outcomes. This resulted in her becoming less scared of services and began to build positive relationships with professionals involved in both her and her son's care.

Ms A now reports feeling more confident in herself and her ability to engage with services involved

in her care; the family are now benefiting from what support services have provided for them and are engaging well with those services. The Family Support Officer signposted the son to the Recovery Service at Mind. He is now actively involved in the Recovery Programme and engages well with the group activities.

Ms A will soon be joining the carers peer support coffee group, something she would never have considered at the beginning because of her fear of being judged by others. She has also begun a course at CNWL's Recovery College and is planning for a return to work, with the goal of one day becoming a qualified beauty therapist. Children's Services are no longer involved in her daughter's care as Ms A is managing her caring roles effectively and looking after her own mental health and her son is focused on his recovery.

Case Study B

Mr and Mrs B are joint carers for Mr A's mother who went to live with them as she was not coping on her own following a dementia diagnosis. Mr B works full time and Mrs B has taken a break from work to care for her mother-in-law. However, the stress of the caring role had significant impact on Mrs B which has significantly affected the family. Mr and Mrs B also have two school age children who were being adversely affected by the strain that caring for Mrs B's mother-in-law was putting on her.

Mrs B felt her mother-in-law showed no gratitude to her for all her efforts and she was rude to her. She believed her mother-in-law knew what she was doing because she was nice when she wanted to be. She was angry with her husband because she felt he put the needs of his mother first. Mrs B wanted her mother-in-law to move out, but her husband did not agree that that was the best solution. Mr B desperately wanted to get his family back together and contacted the Dementia Support Service for advice.

About the Dementia Support Service

The Carers' Trust Dementia Support Service is run in partnership with the Alzheimer's Society and offers one-to-one support to people with dementia and their carers, which can be provided face-to-face, over the telephone or via written communication. The team also offers a home-visiting service for those families that might struggle to get out of the house.

Following an initial assessment, Dementia Support Workers will provide information, guidance and practical support to help people to better understand dementia, to cope with day-to-day living and to plan for the future. The service also supports people to access other services.

The team offers a range of opportunities that include training, social activities, Dementia Cafes, singing for the brain sessions, care calling, emotional support and also offers access to a whole range of other support through the Hillingdon Carers Partnership and beyond.

The issues identified were:

- Mrs B did not understand dementia and what to expect.
- Mrs B felt she was not getting support from her husband and deeply resented this.
- Both Mr and Mrs B were struggling emotionally and the issues in their caring roles started affecting their marriage, leading to frequent arguments that then distressed their two children.
- Mr B had insight into dementia but felt unable to effectively communicate it to his wife.
- It was clear that Mrs B was tired and needed respite.

The actions taken to support family included:

- Information was given about Dementia Friends' sessions to help reinforce their understanding of dementia.
- Discussed coping strategies – ongoing.
- Referred to the Harlington Care short break service.
- Provided emotional support – ongoing.
- The two children were referred to Young Carers' Service for their own support.

Outcomes:

- Significant improvements in family relationships
- Mrs B has developed a better understanding of dementia and now feels that she is learning how to manage her expectations
- Both carers are receiving ongoing emotional support and are coping much better
- Replacement care is now in place so Mrs A can have a break from her caring role.

Case Study C

Mr and Mrs C are in their early 80s and have been co-dependent in addressing each other's needs. Mr C has needed assistance with activities of daily living for many years and this has been provided by Mrs C. Over the last two years Mrs C has developed signs of dementia and has found it increasingly difficult to support her husband. Their son has been visiting on a daily basis and has helped support his parents, but their increasing need and the pressures of his own young family mean that he is unable to continue with this level of support.

The family were referred to Adult Social Care by Mr and Mrs C's GP and a combined assessment was undertaken that included the needs of Mr and Mrs C's son in his role as a carer. This resulted in a Direct Payment being provided to facilitate more personalised care for Mr and Mrs C by people who spoke their first language and had greater awareness and understanding of their culture and dietary requirements. This has enabled Mr and Mrs C to remain in their own home whilst reducing the pressure on Mr C junior, who continues to visit on a regular basis and take them out. He also has lasting power of attorney for finance and property and manages their financial affairs for them.

Mr C junior was also referred to Carers' Trust and support has been provided to the family via the Alzheimer's Society, i.e., one of the organisations within the Hillingdon Carers' Partnership.

Case Study D

Ms D is 12 and cares for her brother who has autism. She, her mother and siblings are victims of domestic violence, perpetrated by their father. The family initially presented with housing issues as the lease on their rental property was due for renewal and they did not have the finances to pay for a new deposit or additional rental charges. It was really important that the family stayed in the same property to avoid further upheaval and disruption and to maintain their security. The Carers' Trust's Family Support Officer advocated with the landlord on their behalf and was able to negotiate a lease renewal for the same price without a deposit being necessary.

Although no longer in the family home, the children's father had access to the family internet account and mum was unable to change the passwords or security settings. This made the

whole family feel extremely vulnerable and frightened as he was able to access their emails, see Ms D's school reports and obtain information about their whereabouts at other activities. As a result, the family were living in fear and were reluctant to leave the family home. Carers' Trust organised a grant to cover the cost of a broadband contract for a year with a new internet provider. The family were also supported by a social worker who completed a home visit and facilitated the mother accessing counselling through Hillingdon Women's Centre.

Mum was struggling with juggling commuting, working and childcare. Carers' Trust successfully supported mum to apply for DLA for her son, this then qualified her to apply for additional welfare entitlements which enabled her to take a career break. This meant that the children were able to spend more time with mum, had to spend less time in after school clubs and could start to have a more settled home routine.

In addition, Carers' Trust has supported mum to access counselling and attend training courses and have liaised with the children's school to ensure their needs are understood and they feel safe and secure in the school environment. The family are now more financially secure, they feel safer, and Ms D now feels confident enough to access extra-curricular activities and has begun to engage with our young carer clubs and activities.

Case Study E

Ms E is 23 and cares for both her parents who both have learning disabilities and mental health issues. Her father misuses substances and there is a history of domestic violence within the household. She has five siblings and is the main caregiver to her youngest brother who shares a room with her and is currently attending Primary School. Ms E has been registered with Carers' Trust service for 5 years and throughout that time the service has worked with the family to build trust, develop a positive relationship and encourage engagement with the service.

Ms E suffers with low confidence and self-esteem and is unable to live her life freely due to the caring needs of her parents and brother. This has caused her to not involve herself in day to day activities that other people of her age would expect to be doing, which has affected her development in terms of her confidence and self-esteem. Her social circle is under developed as well as her education and attainment. During a one to one session Ms E said that the following barriers stopping her from progressing: feeling anxious, feeling stressed, feeling low, fear of failure, lack of self-esteem, lack of goals, not feeling motivated, social relationships, negative emotions and lack of confidence.

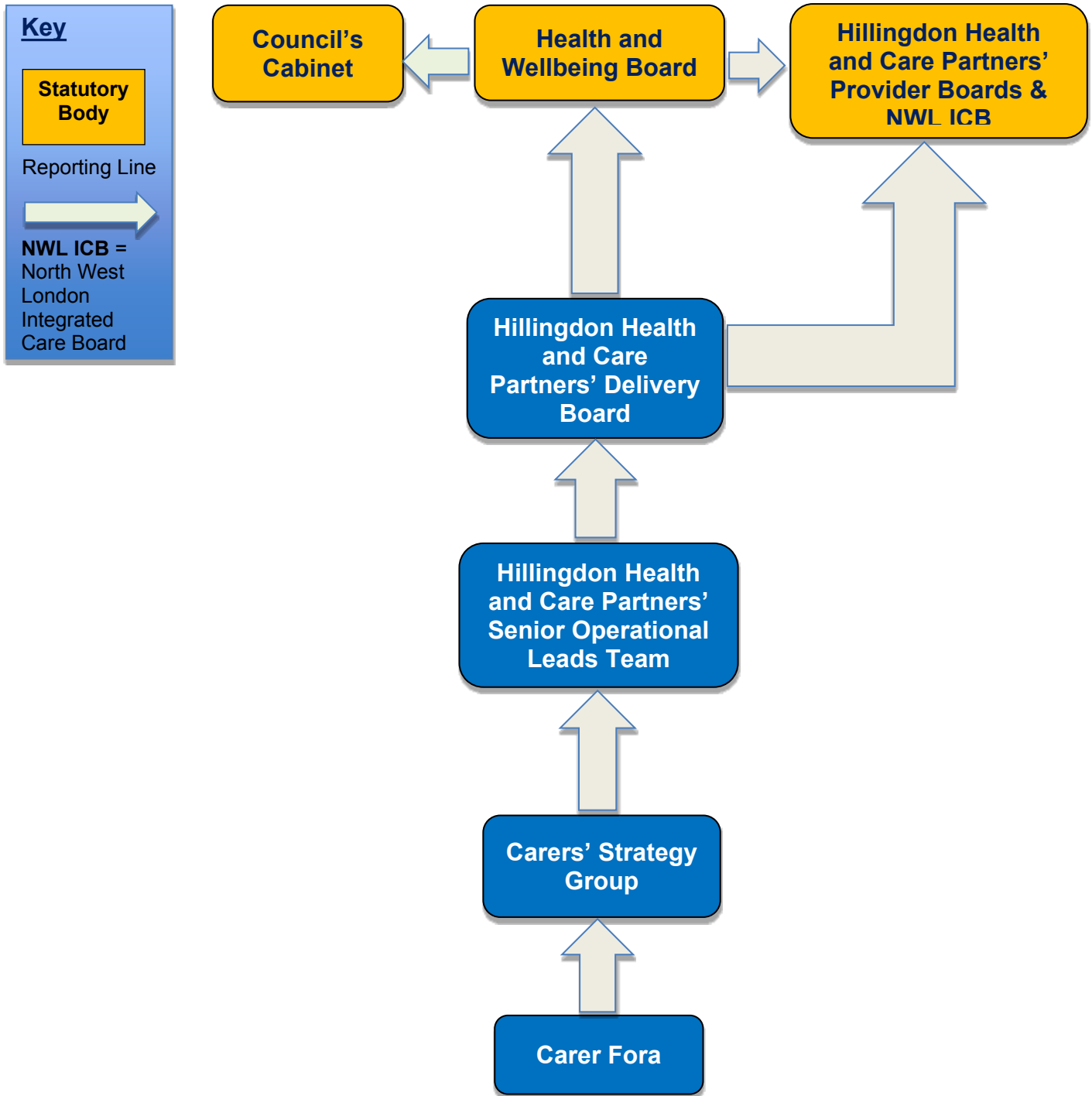
Ms E was invited to participate in the wellbeing workshops Carers' Trust ran with *Give Space* as it was felt the sessions could help her to address some of the issues that she had raised in her support plan. Although initially shy and nervous, Ms E blossomed throughout the programme and her confidence grew each week. She formed new friendships and learnt new skills and techniques to build resilience and gain confidence.

Following on from her success with the workshops, Ms E was supported to successfully apply for an apprenticeship role as a teaching assistant in a local SEN school. Ms E expressed anxieties around starting her new job, as she did not feel she had the clothing to fit in. Through the raising aspirations grant, we were able to access funds for clothing for the Teaching Assistant role and took her on a window shopping trip to discuss various outfits appropriate to the role. This made her feel more comfortable and boosted her self-esteem to enable her to feel confident in starting her new role. Carers' Trust liaised with the school to ensure Ms E was

supported and that they were aware of her caring role, and she was delighted when she was then offered a full time job on a term time basis at the end of her probationary period. Carers' Trust maintain regular contact with Ms E and her employer to ensure her health and wellbeing is closely monitored in terms of feeling stressed, anxious or having negative emotions at work or at home.

Ms E has achieved her action plan objectives which were to secure a job and become more confident. She continues in her permanent job and is doing really well, and this has also set a positive example to her younger siblings and broken the cycle of unemployment within the family unit. Although Ms E continues to have difficulties in balancing her career with her caring responsibilities, she is confident that with continued support she will be able to overcome any future challenges that may arise.

Appendix 2 - Summary of Carers' Strategy Governance Arrangements



Appendix 3 - Carers Strategy Delivery Plan 2022/23

Key

CNWL: Central and North West London NHS Foundation Trust

CTH: Carers' Trust Hillingdon

THH: The Hillingdon Hospitals NHS Foundation Trust

Outcome: The physical and mental health and wellbeing of carers of all ages is supported.

	Activity	Lead Organisation
1.	Refresh the Joint Carers Strategy for Hillingdon.	LBH
2.	Refresh the Memorandum of Understanding on an integrated approach to identifying and assessing carer need in Hillingdon.	LBH
3.	Develop the range of bereavement cafés and post-bereavement support available to carers.	CTH
4.	Ensure that carers have access to the Recovery and Wellbeing College courses delivered by CNWL.	CNWL

Outcome: Carers are identified, recognised and able to make a positive contribution.

	Activity	Lead Organisation
5.	Re-establish carer leads in six additional GP practices.	CTH/The Confederation
6.	Subject to permission to share information, undertake comparison of carers on GP registers with those on carers' register developed by the Carer Support Service to identify gaps in support.	CTH/The Confederation
7.	Establish a baseline profile of carers currently supported, i.e., age, gender, ethnicity and location in the borough to map against the health and wellbeing needs of Hillingdon's population.	LBH/CTH

8.	Finalise the 'Are you a carer?' information leaflet.	LBH
9.	Establish auto-generated reporting of carers with multiple caring responsibilities.	LBH
10.	Review the role of the Carer Fora.	LBH/CTH
11.	The Triangle of Care continues to be established in Hillingdon mental health services.	CNWL
12.	Carers are a part of the involvement work in Hillingdon mental health services to support the transformation of services.	CNWL
13.	Ensure that the Cerner electronic patient record (EPR) system is developed so that asking if a patient has a carer or is a carer is a mandatory aspect of assessment and triggers appropriate care planning (if possible and where appropriate)	THH
14.	Establish mechanism to ensure that carers are involved in shared decision making, where appropriate, alongside patients.	THH
15.	Refresh the Hospital's visiting rules, carer passports and promote 'John's campaign' to ensure that carers are involved in care and are able to support patients during a stay.	THH

Outcome: Carers have a life alongside caring.

	Activity	Lead Organisation
16.	Explore re-launch of the guidance for employers of carers in employment.	LBH

Outcome: Carers have access to quality information and advice at any point in their caring journey and know where to find this.

	Activity	Lead Organisation
17.	Include information about support for carers on GP practice web pages.	CTH/The Confederation
18.	Ensure that the Patient Advisory and Liaison Service (PALS) has the necessary information and resources to signpost carers and patients with carers to access support.	THH
19.	Ensure that carers have access to information, advice and support about the hospital discharge process and what to expect after discharge.	THH

Outcome: Carers have the skills they need for safe caring.

	Activity	Lead Organisation
20.	Develop end of life training for carers.	CTH

Outcome: Young carers are supported from inappropriate caring and provided with the support they need to learn, develop and thrive and enjoy being a young person.

	Activity	Lead Organisation
21.	<p>To working alongside a group of schools to:</p> <ul style="list-style-type: none"> • Raise awareness and reissue newly designed Schools packs. • Encourage them to complete the national Young Carers in Schools award. • Develop their own young carer support provision. • Provide support sessions in school for the most disadvantaged YCs, usually those caring for a parent with mental ill health and/or substance misuse. • Recruit a pool of volunteer mentors to support them to catch up in maths and English. 	CTH

Appendix 4 – 2022-2026 Strategy Proposed Metrics

Outcome 1: The physical and mental health and wellbeing of carers of all ages is supported.

Carer quality of life metrics, i.e., % of adult carers to say:

- I'm able to spend my time as I want, doing things I value or enjoy.
- I have as much control over my daily life as I want.
- I look after myself.
- I have no worries about my personal safety.
- I have as much social contact as I want with the people I like.
- I feel I have encouragement and support.

Outcome 2: The financial impact of being a carer is minimised.

- Value of benefits/allowances secured for carers.

Outcome 3: Carers are identified, recognised and able to make a positive contribution.

- % of adult carer population on the Carer Register for Hillingdon.
- % adult carers receiving a carer's assessment.
- Number of identified carer champions in GP surgeries/PCNs
- Number of Carer Fora meetings taking place.

Outcome 4: Carers have a life alongside caring.

- Number of adult carers in receipt of short break opportunities.
- Number of short break opportunities available.

Outcome 5: Carers have access to quality information and advice at any point in their caring journey and know where to find this.

- % of carers as a proportion of population of carers in Hillingdon accessing information and advice services.
- % of carers responding positively to the question: Have you found it easy or difficult to find information and advice about support, services or benefits?
- % of carers who have used information and advice services saying that they found it useful.

Outcome 6: Carers have the skills they need for safe caring.

- Number, range and utilisation of training opportunities for young and adult carers.

Outcome 7: Young carers are supported from inappropriate caring and provided with the support they need to learn, develop and thrive and enjoy being a young person.

- % of young carer population on Carer Register for Hillingdon.

- Number of young carers in receipt of short break opportunities.
- Number of short break opportunities available.

CABINET FORWARD PLAN

Committee name	Health and Social Care Select Committee
Officer reporting	Nikki O'Halloran, Democratic Services
Papers with report	Appendix A – Latest Forward Plan
Ward	As shown on the Forward Plan

HEADLINES

To monitor the Cabinet's latest Forward Plan which sets out key decisions and other decisions to be taken by the Cabinet collectively and Cabinet Members individually over the coming year. The report sets out the actions available to the Committee.

RECOMMENDATION

That the Health and Social Care Select Committee notes the Cabinet Forward Plan.

SUPPORTING INFORMATION

The Cabinet Forward Plan is published monthly, usually around the first or second week of each month. It is a rolling document giving the required public notice of future key decisions to be taken. Should a later edition of the Forward Plan be published after this agenda has been circulated, Democratic Services will update the Committee on any new items or changes at the meeting.

As part of its Terms of Reference, each Select Committee should consider the Forward Plan and, if it deems necessary, comment as appropriate to the decision-maker on the items listed which relate to services within its remit. For reference, the Forward Plan helpfully details which Select Committee's remit covers the relevant future decision item listed.

The Select Committee's monitoring role of the Forward Plan can be undertaken in a variety of ways, including both pre-decision and post-decision scrutiny of the items listed. The provision of advance information on future items listed (potentially also draft reports) to the Committee in advance will often depend upon a variety of factors including timing or feasibility, and ultimately any such request would rest with the relevant Cabinet Member to decide. However, the 2019 Protocol on Overview & Scrutiny and Cabinet Relations (part of the Hillingdon Constitution) does provide guidance to Cabinet Members to:

- Actively support the provision of relevant Council information and other requests from the Committee as part of their work programme; and
- Where feasible, provide opportunities for committees to provide their input on forthcoming executive reports as set out in the Forward Plan to enable wider pre-decision scrutiny (in addition to those statutorily required to come before committees, *i.e. policy framework documents – see paragraph below*).

As mentioned above, there is both a constitutional and statutory requirement for Select Committees to provide comments on the Cabinet's draft budget and policy framework proposals after publication. These are automatically scheduled in advance to multi-year work programmes.

Therefore, in general, the Committee may consider the following actions on specific items listed on the Forward Plan:

	Committee action	When	How
1	To provide specific comments to be included in a future Cabinet or Cabinet Member report on matters within its remit.	<p>As part of its pre-decision scrutiny role, this would be where the Committee wishes to provide its influence and views on a particular matter within the formal report to the Cabinet or Cabinet Member before the decision is made.</p> <p>This would usually be where the Committee has previously considered a draft report or the topic in detail, or where it considers it has sufficient information already to provide relevant comments to the decision-maker.</p>	<p>These would go within the standard section in every Cabinet or Cabinet Member report called "Select Committee comments".</p> <p>The Cabinet or Cabinet Member would then consider these as part of any decision they make.</p>
2	To request further information on future reports listed under its remit.	<p>As part of its pre-decision scrutiny role, this would be where the Committee wishes to discover more about a matter within its remit that is listed on the Forward Plan.</p> <p>Whilst such advance information can be requested from officers, the Committee should note that information may or may not be available in advance due to various factors, including timescales or the status of the drafting of the report itself and the formulation of final recommendation(s). Ultimately, the provision of any information in advance would be a matter for the Cabinet Member to decide.</p>	<p>This would be considered at a subsequent Select Committee meeting. Alternatively, information could be circulated outside the meeting if reporting timescales require this.</p> <p>Upon the provision of any information, the Select Committee may then decide to provide specific comments (as per 1 above).</p>
3	To request the Cabinet Member considers providing a draft of the report, if feasible, for the Select Committee to consider prior to it being considered formally for decision.	<p>As part of its pre-decision scrutiny role, this would be where the Committee wishes to provide an early steer or help shape a future report to Cabinet, e.g., on a policy matter.</p> <p>Whilst not the default position, Select Committees do occasionally receive draft versions of Cabinet reports prior to their formal consideration. The provision of such draft reports in advance may depend upon different factors, e.g., the timings required for that decision. Ultimately any request to see a draft report early would need the approval of the relevant Cabinet Member.</p>	<p>Democratic Services would contact the relevant Cabinet Member and Officer upon any such request.</p> <p>If agreed, the draft report would be considered at a subsequent Select Committee meeting to provide views and feedback to officers before they finalise it for the Cabinet or Cabinet Member. An opportunity to provide specific comments (as per 1 above) is also possible.</p>
4	To identify a forthcoming report that may merit a post-decision review at a later Select Committee meeting	<p>As part of its post-decision scrutiny and broader reviewing role, this would be where the Select Committee may wish to monitor the implementation of a certain Cabinet or Cabinet Member decision listed/taken at a later stage, i.e., to review its effectiveness after a period of 6 months.</p> <p>The Committee should note that this is different to the use of the post-decision scrutiny 'call-in' power which seeks to ask the Cabinet or Cabinet Member to formally re-consider a decision up to 5 working days after the decision notice has been issued. This is undertaken via the new Scrutiny Call-in App members of the relevant Select Committee.</p>	<p>The Committee would add the matter to its multi-year work programme after a suitable time has elapsed upon the decision expected to be made by the Cabinet or Cabinet Member.</p> <p>Relevant service areas may be best to advise on the most appropriate time to review the matter once the decision is made.</p>

BACKGROUND PAPERS

- [Protocol on Overview & Scrutiny and Cabinet relations adopted by Council 12 September 2019](#)
- [Scrutiny Call-in App](#)

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Upcoming Decisions Further details

Ref

Ward(s)

Final decision by Full Council	Cabinet Member(s) Responsible	Relevant Select Committee	Directorate / Lead Officer	Consultation related to the decision	NEW ITEM	Public or Private (with reason)
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SI = Standard Item each month Council Directorates: AS = Adult Services & Health P = Place CS = Central Services R = Resources CY = Children & Young People ES = Education & SEND

Cabinet meeting - Thursday 7 July 2022 (report deadline 20 June)

053a	Council Strategy 2022-2026 - POLICY FRAMEWORK	Cabinet will consider a draft of a new Council Strategy. It will set out the Council's proposed vision, direction and the overarching policies as a framework to deliver excellent services to residents in the Borough and monitor their performance and delivery. As a policy framework document, it will be subject to consultation, consideration by the Council's select committees and ultimately final adoption by the full Council.	All	Proposed Full Council adoption - 17 November 2022	All Cabinet Members	All Select Committees	CS - Dan Kennedy / Naveed Mohammed	Consultation and select committees	NEW ITEM	Public
SI	Carers Strategy Update	Cabinet will receive a progress report on the Carers Strategy and Delivery Plan.	All		Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS - Sandra Taylor			Public
018	Older People's Plan update	Cabinet will receive its yearly progress update on the Older People's Plan and the work by the Council and partners to support older residents and their quality of life.	All		Cllr Ian Edwards - Leader of the Council / Cllr Jane Palmer - Health & Social Care	Health & Social Care	CS - Kevin Byrne	Older People, Leader's Initiative		Public
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	All	CS - Democratic Services	TBC		Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		TBC	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - July 2022

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All		CS - Democratic Services	Various		Public
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NO CABINET IN AUGUST 2022

SI	Interim or urgent executive decision-making by the Leader of the Council	As there is no Cabinet meeting in August, the Leader of the Council may take interim or urgent key decisions, and if so required, on behalf of the full Cabinet. These will be reported to Cabinet at a later date for ratification and public record.	Various		Cllr Ian Edwards - Leader of the Council	TBC	CS - Democratic Services	Various		Public / Private - TBD
SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public

Cabinet meeting - Thursday 1 September 2022 (report deadline 12 August 2022)

048	London Community Equipment Consortium's contract award	The London Community Equipment Consortium, which Hillingdon is a member of, intends to award a contract following a competitive tender process. Cabinet approval is sought. Community Equipment involves a wide range of activities such as the storage, supply, distribution, repair, collection, recycling, maintenance and refurbishment of a range of community equipment.	N/A		Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS - Sandra Taylor / Gary Collier		NEW ITEM	Private (3)
008	Award of multiple providers admitted to a new Framework for the provision of Home Care and Outreach Services	Cabinet will consider contract awards for multiple providers admitted to a new Framework for the provision of Home Care and Outreach Services for Adults, Children and Young People. A competitive tender process will admit suitable providers for the opportunity of packages of care awarded in Hillingdon via e-brokerage. This activity is for provision of services where the care is not provided by the lead providers.	N/A		Cllr Jane Palmer - Health & Social Care / Cllr Susan O'Brien - Children, Families & Education	Health & Social Care	AS / R - Darren Thorpe / Sally Offin			Private (3)
025	2022/23 Better Care Fund Section 75 Agreement	A report to Cabinet regarding the agreement under section 75 of the National Health Service Act, 2006, that will give legal effect to the 2020/21 Better Care Fund plan, including financial arrangements.	All		Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS - Sandra Taylor / Gary Collier			Public
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI CS	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - September 2022

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet meeting - Thursday 13 October 2022 (report deadline 26 September)

053b	Council Strategy 2022-2026 - POLICY FRAMEWORK	Following consultation, Cabinet will consider recommending to the full Council a new Council Strategy. It will set out the Council's proposed vision, direction and the overarching policies as a framework to deliver excellent services to residents in the Borough and monitor their performance and delivery.	All	Proposed Full Council adoption - 17 November 2022	All Cabinet Members	All Select Committees	CS - Dan Kennedy / Naveed Mohammed	Statutory consultation and select committees	NEW ITEM	Public
29	The Annual Report Of Adult and Child Safeguarding Arrangements	This report provides the Cabinet with a summary of the activity undertaken by the Safeguarding Children Partnership Board and the Safeguarding Adults Board to address the identified local priorities. The Cabinet will consider this report and approve the activity and the local priorities for the two boards.	All		Cllr Susan O'Brien - Children, Families & Education / Cllr Jane Palmer - Health & Social Care	Health & Social Care / Children, Families & Education	CY / AS - Alex Coman / Sandra Taylor	Select Committees		Public
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - October 2022

SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet meeting - Thursday 10 November 2022 (report deadline 24 October)

030	Approval to establish a new Dynamic Purchasing System (DPS) for Transportation Services for Social Care and Children	Subject to the short term extension of existing transport contracts by Cabinet in March 2022, this report will seek Cabinet approval to establish a new Dynamic Purchasing System for Transportation Services for Adults, Children, Looked After Children and Young People with Special Educational Needs and Adult Social Care Clients to the London Borough of Hillingdon. This framework will allow for suitable providers to take part in mini-competitions to enable the Council to award services to transport providers and seek value for money.	All		Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS / R - Darren Thorpe / Sally Offin			Private (3)
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - November 2022

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet meeting - Thursday 15 December 2022 (report deadline 28 November)

040a	The Council's Budget - Medium Term Financial Forecast 2023/24 - 2027/28 (BUDGET FRAMEWORK)	This report will set out the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2023/24 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration.	All	Proposed Full Council adoption - 23 February 2023	Cllr Ian Edwards - Leader of the Council / Cllr Martin Goddard - Finance	All	R - Andy Evans	Public consultation through the Select Committee process and statutory consultation with businesses & ratepayers		Public
041	Social Care Catering Services	Following Cabinet's decision on 17 February 2022 to extend the current contract, following a review and procurement exercise, Cabinet will consider new contractual arrangements for Social Care Catering Services in Extra Care, Children's Residential settings and Early Years Centres.	N/A		Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS / R - Claire Fry / Sally Offin / Darren Thorpe			Private (3)
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public
Cabinet Member Decisions expected - December 2022										
SI Page 70	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public

Cabinet meeting - Thursday 5 January 2023 (report deadline 12 December)

044	Occupational Therapy Services for Adults, Children and Young People for Social Care and for Major Adaptations	Subject to Cabinet's decision in March 2022 for a short term extension of the current contract, Cabinet will consider a new contract for the provision of Occupational Therapy Services for Adults, Children and Young People for Social Care and for Major Adaptations from a competitive tender process.	N/A		Cllr Susan O'Brien - Children, Families & Education / Cllr Jane Palmer - Health & Social Care	Health & Social Care	AS / FD - Darren Thorpe / Sally Offin			Private (3)
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - January 2023

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet meeting - Thursday 16 February 2023 (report deadline 30 January 2023)

040b	The Council's Budget - Medium Term Financial Forecast 2023/24 - 2027/28 (BUDGET FRAMEWORK)	Following consultation, this report will set out the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2023/24 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration.	All	Proposed Full Council adoption - 23 February 2023	Cllr Ian Edwards - Leader of the Council / Cllr Martin Goddard - Finance	All	R - Andy Evans	Public consultation through the Select Committee process and statutory consultation with businesses & ratepayers		Public
SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public
Cabinet Member Decisions expected - February 2023										
SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public

Cabinet meeting - Thursday 23 March 2023 (report deadline 6 March 2023)

SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - March 2023

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of non-key decisions each month on standard items - details of these are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet meeting - Thursday 20 April 2023 (report deadline 3 April 2023)

SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	Various		All	TBC	CS - Democratic Services	Various		Public
Cabinet Member Decisions expected - April 2023										
SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of decisions each month on standard items - details of these standard items are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public

Cabinet meeting - Thursday 4 May 2023 (report deadline 17 April)

SI	Public Preview of matters to be considered in private	A report to Cabinet to provide maximum transparency to residents on the private and confidential matters to be considered later in Part 2 of the Cabinet meeting and agenda.	TBC		All Cabinet Members	All	CS - Democratic Services			Public
SI	Reports from Select Committees	Reports, findings and recommendations for consideration by the Cabinet, when referred from the appropriate Committee.	All		All	TBC	CS - Democratic Services	TBC		Public

Cabinet Member Decisions expected - May 2023

SI	Standard Items taken each month by the Cabinet Member	Cabinet Members make a number of decisions each month on standard items - details of these standard items are listed at the end of the Forward Plan.	Various		All	TBC	CS - Democratic Services	Various		Public
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Cabinet Member Decisions: Standard Items (SI) that may be considered each month

SI	Urgent Cabinet-level decisions & interim decision-making (including emergency decisions)	The Leader of the Council has the necessary authority to make decisions that would otherwise be reserved to the Cabinet, in the absence of a Cabinet meeting or in urgent circumstances. Any such decisions will be published in the usual way and reported to a subsequent Cabinet meeting for ratification. The Leader may also take emergency decisions without notice, in particular in relation to the COVID-19 pandemic, which will be ratified at a later Cabinet meeting.	Various		Clr Ian Edwards - Leader of the Council	TBC	CS - Democratic Services	TBC		Public / Private
SI	Release of Capital Funds	The release of all capital monies requires formal Member approval, unless otherwise determined either by the Cabinet or the Leader. Batches of monthly reports (as well as occasional individual reports) to determine the release of capital for any schemes already agreed in the capital budget and previously approved by Cabinet or Cabinet Members	TBC		Clr Martin Goddard - Finance (in conjunction with relevant Cabinet Member)	All - TBC by decision made	various	Corporate Finance		Public but some Private (1,2,3)
SI	Petitions about matters under the control of the Cabinet	Cabinet Members will consider a number of petitions received by local residents and organisations and decide on future action. These will be arranged as Petition Hearings.	TBC		All	TBC	CS - Democratic Services			Public
SI	To approve compensation payments	To approve compensation payments in relation to any complaint to the Council in excess of £1000.	n/a		All	TBC	various			Private (1,2,3)
SI	Acceptance of Tenders	To accept quotations, tenders, contract extensions and contract variations valued between £50k and £500k in their Portfolio Area where funding is previously included in Council budgets.	n/a		Clr Ian Edwards - Leader of the Council OR Clr Martin Goddard - Finance / in conjunction with relevant Cabinet Member	TBC	various			Private (3)
SI	All Delegated Decisions by Cabinet to Cabinet Members, including tender and property decisions	Where previously delegated by Cabinet, to make any necessary decisions, accept tenders, bids and authorise property decisions / transactions in accordance with the Procurement and Contract Standing Orders.	TBC		All	TBC	various			Public / Private (1,2,3)
SI	External funding bids	To authorise the making of bids for external funding where there is no requirement for a financial commitment from the Council.	n/a		All	TBC	various			Public

SI	Response to key consultations that may impact upon the Borough	A standard item to capture any emerging consultations from Government, the GLA or other public bodies and institutions that will impact upon the Borough. Where the deadline to respond cannot be met by the date of the Cabinet meeting, the Constitution allows the Cabinet Member to sign-off the response.	TBC		All	TBC	various			Public
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WORK PROGRAMME

Committee name	Health and Social Care Select Committee
Officer reporting	Nikki O'Halloran, Democratic Services
Papers with report	Appendix A – Work Programme
Ward	All

HEADLINES

To enable the Committee to note future meeting dates and to forward plan its work for the current municipal year.

RECOMMENDATIONS

That the Health and Social Care Select Committee considers the report and agrees any amendments.

SUPPORTING INFORMATION

The Committee's meetings will start at 6.30pm. The meeting dates for the 2022/2023 municipal year were agreed by Council on 24 February 2022 and are as follows:

Meetings	Room
Wednesday 22 June 2022, 6.30pm	CR5
Tuesday 19 July 2022, 6.30pm	CR5
Wednesday 14 September 2022, 6.30pm	CR5
Wednesday 12 October 2022, 6.30pm	CR5
Tuesday 22 November 2022, 6.30pm	CR5
Thursday 26 January 2023, 6.30pm	CR5
Tuesday 21 February 2023, 6.30pm	CR5
Tuesday 21 March 2023, 6.30pm	CR5
Wednesday 26 April 2023, 6.30pm	CR5

Implications on related Council policies

The role of the Select Committees is to make recommendations on service changes and improvements to the Cabinet, who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Select Committees directly engage residents in shaping policy and recommendations and the Committees seek to improve the way the Council provides services to residents.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

MULTI-YEAR WORK PROGRAMME 2022 - 2026

	2022/23						2023/24						
Health & Social Care Select Committee	June 22	July 19	August No meeting	September 14	October 12	November 22	December No meeting	January 26	February 21	March 21	April 26	May No meeting	June
Review A: TBC Topic selection / scoping stage Witness / evidence / consultation stage Findings, conclusions and recommendations Final review report agreement Target Cabinet reporting				Selection	Scoping Report			Witness Session	Witness Session	Witness Session	Findings		
											Final report		Cabinet
Regular service & performance monitoring Quarterly Performance Monitoring Annual SAB Report (Safeguarding Adults Board) Carers Strategy Update (prior to Cabinet) Complaints & Service Annual Report Mid-year budget / budget planning report (July) Cabinet's Budget Proposals For Next Financial Year (Jan) Cabinet Forward Plan Monthly Monitoring		X						X			X		
	X			X	X	X		X	X	X	X		
One-off monitoring or update reports Scrutiny Introduction (Democratic Services) Public Health Update Social Care Update Council Strategy 2022-2026 consultation	X												
		X											
Health External Scrutiny Police & Mental Health Attendance at A&E Phlebotomy Services Update Hillingdon Health & Care Partners (HHCP) CAMHS Update Virtual GP Consultations Update Mount Vernon Cancer Centre Review Update Health Updates Quality Accounts (outside of meetings)	X			X	X				X	X			
				X	X				X				
						X							
				X							X	X	X
Past review delivery Review of Children's Dental Services 2021/22 Making the Council more autism friendly 2020/21 GP Pressures Assisted Living Technologies Review 2021/22						X		X	X			X	
Internal use only Date deadline confirmed to report authors Report deadline Agenda published													
	13 Jun 14 Jun	8 Jul 11 Jul		5 Sep 6 Sep	3 Oct 4 Oct	11 Nov 14 Nov		16 Jan 17 Jan	10 Feb 13 Feb	10 Mar 13 Mar	17 Apr 18 Apr		

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Exempt information by virtue of paragraph(s) 3 of Part 1 of Schedule 12A
of the Local Government Act 1972 (as amended).

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