



City of Westminster

Committee Agenda

Title: **Adults, Health & Public Protection Policy & Scrutiny Committee**

Meeting Date: **Monday 8th May, 2017**

Time: **7.00 pm**

Venue: **64 Victoria Street, London, SW1E 6QP**

Members: **Councillors:**

Jonathan Glanz (Chairman)
Barbara Arzymanow
Susie Burbridge
Patricia McAllister
Gotz Mohindra
Jan Prendergast
Glenys Roberts
Barrie Taylor

Members of the public are welcome to attend the meeting and listen to the discussion Part 1 of the Agenda

Admission to the public gallery is by ticket, issued from the ground floor reception at City Hall from 6.30pm. If you have a disability and require any special assistance please contact the Committee Officer (details listed below) in advance of the meeting.



An Induction loop operates to enhance sound for anyone wearing a hearing aid or using a transmitter. If you require any further information, please contact the Committee Officer, Andrew Palmer, Senior Committee & Governance Officer.

**Tel: 7641 2802; Email: apalmer@westminster.gov.uk
Corporate Website: www.westminster.gov.uk**

Note for Members: Members are reminded that Officer contacts are shown at the end of each report and Members are welcome to raise questions in advance of the meeting. With regard to item 2, guidance on declarations of interests is included in the Code of Governance; if Members and Officers have any particular questions they should contact the Head of Legal & Democratic Services in advance of the meeting please.

AGENDA

PART 1 (IN PUBLIC)

1. MEMBERSHIP

To note any changes to the membership.

2. DECLARATIONS OF INTEREST

To receive declarations by Members and Officers of the existence and nature of any personal or prejudicial interests in matters on this agenda, in addition to the standing declarations previously made.

3. MINUTES

To approve the minutes of the meeting held on 29 March 2017.

4. CABINET MEMBER UPDATES

To receive an update on current and forthcoming issues within the portfolios of the Cabinet Member for Public Protection & Licensing and Adult Social Services & Public Health. The briefings also include responses to any written questions raised by Members in advance of the Committee meeting.

REPORTS TO FOLLOW

5. STANDING UPDATES

1. To receive a verbal update on any significant activity by the Committee's Task Groups, since the last meeting.
2. Changes to arrangements for Shared Services.

(Pages 1 - 10)

(Pages 11 - 12)

6. ST. MARY'S HOSPITAL REDEVELOPMENT

To receive a verbal update on current proposals affecting St Mary's Hospital.

7. ANNUAL WORK PROGRAMME 2017/18

To consider the Committee's Work Programme for 2017-18, and to note progress in the Committee's Action Tracker.

8. ITEMS ISSUED FOR INFORMATION

To provide Committee Members with the opportunity to comment on items that may have been previously circulated for information.

9. ANY OTHER BUSINESS

To consider any other business which the Chairman considers urgent.

(Pages 13 - 28)

**Charlie Parker
Chief Executive
27 April 2017**

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CITY OF WESTMINSTER

MINUTES

Adults, Health & Public Protection Policy & Scrutiny Committee

MINUTES OF PROCEEDINGS

Minutes of a meeting of the **Adults, Health & Public Protection Policy & Scrutiny Committee** held on **Wednesday 29 March 2017**, Rooms 6 & 7, 17th Floor, City Hall, 64 Victoria Street, London SW1E 6QP

Members Present: Councillors Jonathan Glanz (Chairman), Barbara Arzymanow, Susie Burbridge, Patricia McAllister, Gotz Mohindra, Jan Prendergast and Barrie Taylor.

Also Present: Councillor Heather Acton.

1. MEMBERSHIP

1.1 Apologies were received from Councillor Glenys Roberts.

2. DECLARATIONS OF INTEREST

2.1 The Chairman sought any personal or prejudicial interests in respect of the items to be discussed from Members and officers, in addition to the standing declarations previously made.

2.2 Councillor Jan Prendergast declared a non-prejudicial interest in that she was an outpatient at St. Mary's Hospital, and a member of the Friends of St. Mary's Hospital.

3. MINUTES

3.1 **RESOLVED:** That the Minutes of the meeting held on 1 February 2017 be approved.

3.2 The Chairman reported that since the last meeting of the Committee, he had met with Tracey Batten (Chief Executive, Imperial Healthcare NHS Trust).

4. CABINET MEMBER UPDATES

4.1 Cabinet Member for Adult Social Services & Public Health

- 4.1.1 The Committee received a written update on key issues relating to Adult Social Care, Public Health, and the Westminster Health & Wellbeing Board.
- 4.1.2 Councillor Heather Acton attended the meeting as Cabinet Member, and expressed regret that that the London Borough of Hammersmith & Fulham would be withdrawing from Tri-borough working arrangements. The Cabinet Member emphasised that the City Council would work with partners to ensure that service users experienced no change in delivery, and that Westminster still had a strong bi-borough arrangement. Committee Members sought clarification of how the £43 million in savings from tri-borough working had been achieved, and what the costs would be moving forward. Members commented on the importance of maintaining the Community Independence Service as a bi-borough service; and highlighted the need to be kept updated on progress in the changes that would take place, and on the potential implications for the delivery of Adult Social Care in Westminster.
- 4.1.3 The Cabinet Member commented on the national policy framework and planning guidance for the 2017/18 Better Care Fund, and reported that correspondence had now been received from the Department of Communities & Local Government (DCLG) which set out the conditions of the additional funding that was to be used to help stabilise the market for social care.
- 4.1.4 Consultation with partners and service users on the proposed reconfiguration of Mental Health Day Services was ongoing, and the Cabinet Member confirmed that no discharges from current settings would be made until service users were happy with the alternatives that were being offered.
- 4.1.5 The Westminster Health & Wellbeing Board had met in closed session to discuss measures to improve partnership working, and an additional meeting had been scheduled for April to progress the work that had been done. Work on the Delivery Plan for the Westminster Health & Wellbeing Strategy published in December 2016 was ongoing, and the Cabinet Member confirmed that the implementation process would involve the voluntary sector, community organisations and CityWest Homes.
- 4.1.6 Other issues discussed by Committee Members included the advice offered by the City Council on mobility, and the Blue Badge scheme operated by Transport for London.

4.2 Cabinet Member for Public Protection & Licensing

- 4.2.1 The Committee received a written briefing on key issues within the Public Protection & Licensing portfolio, which included the Mayor of London's Police & Crime Plan; the night time economy and Licensing Charter; and the operation to tackle spice and associated anti-social behaviour.
- 4.2.2 The Committee discussed shisha smoking, and highlighted ongoing problems relating to shisha in Harrow Road. Several countries had banned the smoking of shisha in public, and shisha providers would need to comply with new tobacco regulations that would come into effect in May 2017. Members suggested that the City Council needed to be clear on its position on shisha smoking, which should be licensed, and also suggested that the dangers of shisha should be publicised in Westminster's schools. The Committee also discussed the findings and statistics of the World Health Organisation, and asked to receive details of Westminster's Shisha Strategy.
- 4.2.3 Following the last meeting, Westminster's response to the draft Police & Crime Plan for London 2017-2021 had been sent to the Mayor of London, and had included the Committee's opposition to the proposals for merging Borough Command Units (BCU's). Members asked to receive the findings of a pilot for the new BCU's that had taken place in Barking & Dagenham, and suggested that the Deputy Mayor of London could be invited to attend the Committee to discuss the proposed changes.
- 4.2.4 The Committee requested an update on the reconfiguration of CCTV in Westminster, and sought clarification on whether a report or update would be available following the 2017 Hackathon staged by the Imperial NHS Trust. Members also requested an update on Fixed Odds Betting Terminals; together with details of the powers available to address the rise in rough sleepers using tents, and whether they were in the control of the City Council, the Police, or Transport for London.

5. **STANDING UPDATES**

5.1 Air Quality Task Group

- 5.1.1 Muge Dindjer (Policy & Scrutiny Manager) provided an update on the work of the Air Quality Task Group which had met for the last time on 30 March, and outlined the draft recommendations within the report that related to health. The Task Group now fell within the remit of the Children, Environment & Leisure Policy & Scrutiny Committee, and the sets of recommendations for health, and seeking to deal with emissions from transport and buildings were to be considered for adoption on 15 May 2017, prior to publication. The Committee noted that 80% of the City breached EU air pollution limits at any one time.

- 5.1.2 The Greater London Authority (GLA) had suggested that Public Health England took the Mayor's air quality messages into schools, care homes and nursing homes; and the Task Group had highlighted the need to ensure that front line staff were trained to advise residents and vulnerable people on self-care when pollution was particularly bad. It was also suggested that the Westminster Health & Wellbeing Board could work more closely with stakeholders on issues relating to air quality.
- 5.1.3 Committee Members acknowledged the importance of preventative work in improving air quality, and highlighted the important role of schools in engaging with children and parents. The Cabinet Member for Adult Social Services & Public Health confirmed that all of Westminster's schools now had sustainable travel plans, and that Public Health was already working with schools on air quality. Members noted that safer routes to school had been established in Marylebone, and that new playgrounds were being sited away from areas of particularly poor air quality.
- 5.1.4 The Committee commented on the ability of Ward Members to have greater involvement in local measures to improve air quality, and highlighted the role of the planning process to avoid grouping high buildings which could concentrate pollution; and of the licensing service in seeking a commitment to use low emission taxis.

5.2 Health & Wellbeing Centres Task Group

- 5.2.1 Councillor Barrie Taylor updated the Committee on progress in the development of the Health & Wellbeing Centres Task Group. Members noted that preliminary informal discussions were taking place with the Mental Health Trust, Public Health and Westminster's Clinical Commissioning Groups; and that clarification would be sought of the contribution being made to health and wellbeing by Sport and Leisure. Councillor Taylor suggested that advice could also be sought from an all-party group on Art and Health, which had held a workshop at a Public Health conference he had recently attended. All Members of the Committee were encouraged to take part in the Task Group.
- 5.2.2 Councillor Heather Acton (Cabinet Member for Adult Social Services & Public Health) informed the Committee that the Health & Wellbeing Board had commissioned the Communications Department to work with Public Health and Adult Social Care, to provide a map of all existing hubs and community centres in Westminster as a blueprint for the City Council and its partners.
- 5.2.3 The Committee endorsed the proposed Terms of Reference for the Health & Wellbeing Centres Scrutiny Task Group.

5.3 Healthwatch Westminster

- 5.3.1 Helen Mann (Healthwatch Programme Manager) updated the Committee on Westminster Healthwatch activity between January and March 2017, and provided details of the 2016-18 Work Plan priorities which sought economies of scale through tri-borough working.
- 5.3.2 An ongoing survey of residents in Westminster had shown a lack of awareness and engagement in the Sustainability & Transformation Plan, and in response Healthwatch were pressing for the changes to health and wellbeing to be more explicit for service users. Other ongoing areas of work included Homecare; signposting for information and services; and working with commissioners in the reconfiguration of Mental Health Day Services.
- 5.3.3 The Committee commented on the work of the Healthwatch dignity champions, who were volunteers that sought to improve people's experiences of health and social care, and noted that they would be speaking informally to patients in urgent care services in St. Mary's Hospital.

6. **ST MARY'S HOSPITAL URGENT CARE CENTRE**

- 6.1 In response to a request from the Committee, Professor Tim Orchard (Divisional Director of Medicine & Integrated Care, Imperial NHS Trust) and Claire Braithwaite (Divisional Director of Operations, Imperial NHS Trust) presented a joint report with the Central London Clinical Commissioning Group on the delivery and performance of the Urgent Care Centre (UCC) at St Mary's Hospital. Committee Members also heard from Jules Martin (Managing Director, NHS Central London CCG). Data provided in the report included A&E monthly performance from April 2016 to February 2017; complaints and patient feedback; and the number of patients attending A&E that had required input from mental health services. The Committee was informed that Central London CCG's responsibility for the operation of the UCC at St. Mary's had been assumed by Vocare Ltd in April 2016, and that a new service model had been put into place which had led to difficulties in managing waiting times, particularly overnight.
- 6.2 The Emergency Department at St. Mary's was under considerable pressure with Type 1 attendances having increased by over 9%, and although designed to see 80,000 people per year, over the past 12 months the Hospital had seen 111,000 attendances. While the physical constraints at St. Mary's remained a considerable challenge, the medical quality of the care remained high. A £3.2m refurbishment of the Emergency Department would soon be completed, and would enable the patient flow to become more logical and efficient, and supported by early triage

- 6.3 Although national urgent care standards required that 95% of all patients presenting for urgent care were assessed within 20 minutes of arrival, from April to November 2016 only 43% of patients been assessed within that time. The Committee noted that the increase in Emergency Department attendances had led to most hospitals in London falling short of the 95% target. Although some improvement had been seen in late 2016 and early 2017, it had not been sufficient to meet the contract standards, and in January 2017 the CCG had developed an improvement plan with Vocare.
- 6.4 A number of schemes were being implemented in addition to the refurbishment, which included the opening of a Surgical Assessment Unit to reduce delays; the continued expansion of the Emergency Ambulatory Care Centres; streaming and avoiding unnecessary hospital admissions; and improving ward and discharge processes. Since the plan had been implemented, performance had risen to 96% of patients being seen within 20 minutes of arrival. Imperial had also developed an on-going and extensive programme to improve the urgent and emergency care pathway with the aim of reducing waits, improve patient flow, and manage increased demand.
- 6.5 The Committee sought clarification of comparative performance in patients being seen within the 4 hour target between St. Mary's and other hospitals, and noted that the number of breaches through inappropriate attendances at St. Mary's was low, due to general practice at the front door steering people to primary care when appropriate. Members also commented on the implementation of the improvement plan, and on the effect of other influences on performance such as winter sickness, staff retention, and unexpected major incidents. Professor Orchard confirmed that staffing levels did not have a particular impact on breaches at St. Mary's, which had started its own programme for training Extended Nursing Practitioners and had improved recruitment and retention.
- 6.6 Committee Members discussed the discharge of patients from St. Mary's and the benefits of a cross-service assessment of their needs. Professor Orchard acknowledged that the only way to improve the situation was for all of the people involved to actively work together, and for one person to make an effective assessment of the patient's health needs. Problems in down-stream beds could also cause delays in discharge, and robust systems had been put in place to deal with what was an ongoing issue.
- 6.7 Professor Orchard expressed concern over an ongoing increase in Mental Health cases being brought into Emergency Services over the past 18 months. Although a recent change to the law had led to medical centres being considered places of safety, busy service and medical wards were not a good environment for people experiencing a mental health crisis. Professor Orchard recognised that although St. Mary's had employed registered mental health nurses, who could provide support, and had access to psychiatric services provided by the CCG, services

needed to be further improved. St Mary's also continued to have difficulty in finding placements for patients with mental health issues.

- 6.8 A substantial rise in the number of older patients had attended the hospital during the winter, which was increasing annually. Professor Orchard agreed that the providers of acute primary, community and secondary care needed to work together more closely to address issues arising from the ageing population. A more preventative strategy also needed to be adopted, that would help people receive care in their own homes and reduce the need for expensive hospital beds.
- 6.9 The Committee acknowledged the improvements to urgent care services and waiting times that were being made, and commended St. Mary's Hospital for providing a good service during the on-going reconfiguration.

7. END OF LIFE CARE

7.1 Colin Brodie (Senior Engagement & Corporate Affairs Manager), Jules Martin (Managing Director, NHS Central London CCG) and Chris Neill (Interim Assistant Managing Director, NHS Central London CCG) presented a report which summarised the work and findings of the Joint Strategic Needs Assessment (JSNA) on End of Life Care. The Committee also received the report of the London Assembly Health Committee on End of Life Care in London.

7.2 The JSNA represented a summary and pulling together of work, which had taken into account available data, including current policy and strategy, and included five recommendations for key partners:

- To maximise choice, comfort and control through high quality effective care planning and co-ordination;
- To promote end of life care as 'everybody's business' and develop communities which could help support people;
- To identify clear strategic leadership for end of life care across both social care, health and the independent sector;
- To establish a coordinated education and training program for practitioners, the person dying, carers and for family/friends (if they wish); and
- That everyone should have easy access to evidence and information.

The JSNA also summarised the local direction of travel for End of Life Care in Westminster, and continuing progress made against the recommendations since publication. Although good palliative care services were available in the UK, an increasing number of reports were highlighting the same issues and themes as were identified in the JSNA. Members noted that the data given in the JSNA was now over a year old, and that more recent information was available online.

- 7.3 The Committee acknowledged that people were living longer, and that the end of life following illness could not always be accurately projected. Colin Brodie reported that care was seeking to focus more on the last phase of life rather than the final few weeks, with people who were able to return home being supported with care planning by multi-disciplinary teams. Colin Brodie also highlighted the need for a change in culture regarding attitudes towards death and dying, which would assist in appropriate care being obtained for people who were approaching the end of life. Committee Members commented on the value of the Patient Contract for supporting care, when people who were nearing the end of life were discharged from hospital.
- 7.4 Other issues discussed included the benefits of consultations with GP's and care professionals through telemedicine; the introduction of a more innovative social finance model in care homes; and the availability of assistance in meeting the cost of funeral arrangements.
- 7.5 The Committee endorsed the JSNA report and recommendations, which had receive initial approval by the Westminster Health & Wellbeing Board.

8. COMMITTEE WORK PROGRAMME AND ACTION TRACKER

- 8.1 Muge Dindjer (Policy & Scrutiny Manager) presented the Committee's Work Programme for the remainder of the current municipal year, together with the Committee's Action Tracker.
- 8.2 The Committee discussed Agenda items for future meetings, and asked to receive regular updates on the forthcoming changes to Tri-borough working. Members also agreed that consideration should be given to including a review of Westminster's Shisha Strategy, together with further discussion on the London Policing Plan and proposals for Borough Command Units. Other issues for consideration included rough sleeping; serious youth violence; and anti-social behaviour and the evening and night-time economy.
- 8.3 It was also agreed that the Committee would receive a presentation on the reconfiguration of primary care services from the Central London CCG at the next scheduled meeting on 8 May, or at a separate Special Meeting.

9 ITEMS ISSUED FOR INFORMATION

- 9.1 The Committee noted that a briefing note which provided an update on Tackling Childhood Obesity had been circulated for information separately from the printed Agenda.

10 ANY OTHER BUSINESS

10.1 No further business was reported.

The Meeting ended at 9.12pm.

CHAIRMAN:_____

DATE:_____

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Adults, Health & Public Protection Policy & Scrutiny Committee

Date: 8 May 2017

Classification: General Release

Title: **Briefing Note on Changes to Arrangements for Shared Services**

Report of: Chief Executive

Cabinet Member Portfolio Leader of the City Council

Wards Involved: All

Report Author and Contact Details: Siobhan Coldwell, Chief of Staff
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scoldwell@westminster.gov.uk

1. Committee Members will be aware that Westminster City Council (WCC) and the Royal Borough of Kensington & Chelsea (RBKC) have informed the London Borough of Hammersmith & Fulham (LBHF) of their intention to terminate the shared services arrangements currently in place and it its WCC and RBKC's intention to establish bi-borough arrangements. According to the s113 agreement, the exit process must be complete within 12 months, so effectively by the end of this financial year. If it is possible to move more quickly than this, we will, so that staff can be provided with certainty about the future.
2. Although in the early stages, a number of steps have already been taken:
 - Governance/programme arrangements have been established at Member and officer level to progress the termination of the current arrangement and the transition to new arrangement. Joint programme governance is also being established with RBKC. It is our intention to work collaborative where possible with LBHF to ensure that service delivery is minimised as much as possible.
 - Work is underway to understand the distribution of staff across the three boroughs to understand where the risk is.

- RBKC and WCC have started the appointment process for the bi-borough Executive Director of Adult Social Care, the advert went to press last week.
- Work is underway to understand the financial and contractual consequences of unpicking the current arrangements so that plans can be put in place to minimise the impact. A particular focus is the Adult Social Care Transformation programme and any impact it may have.
- Sue Redmond (Interim Executive Director of Adult Social Care) is working with colleagues to propose new structures which will be shared with the Committee in due course.

If you have any queries about this report please contact the report author,
Siobhan Coldwell, Chief of Staff, on Ext. 6596, or by email at
scoldwell@westminster.gov.uk



Adults, Health & Public Protection Policy & Scrutiny Committee

Date:	8 May 2017
Classification:	General Release
Title:	Annual Work Programme 2017/18
Report of:	Director of Policy, Partnerships & Communications
Cabinet Member Portfolio	Cabinet Member for Adult Social Services & Public Health Cabinet Member for Public Protection & Licensing Chairman of the Adults, Health & Public Protection Policy & Scrutiny Committee
Wards Involved:	All
Policy Context:	Building Homes and Celebrating Neighbourhoods
Report Author and Contact Details:	Muge Dindjer x2636 <u>mdindjer@westminster.gov.uk</u>

1. Executive Summary

- 1.1 This report presents a draft list of items that the Committee may wish to include in the Work Programme for 2017/18. It also provides an update on the Action Tracker.

2. Key Matters for the Committee's Consideration

- 2.1 The Committee is asked to:
- Review the draft list of suggested items in Appendix 1
 - Use the suggested prioritisation criteria to discuss and agree a Work Programme for 2017/2018
 - Note the Action Tracker at Appendix 2

3. Background

3.1 Scope and remit of the Committee:

Under Section 21 of the Local Government Act 2000 local authorities are required to appoint at least one Committee to provide overview and scrutiny. In Westminster there are four Committees which are termed Policy and Scrutiny Committees, recognising their contribution to pro-active policy and strategy development as well as reviews of existing services and policies. Scrutiny acts as a 'critical friend' to Council departments and Cabinet Members.

3.2 The Adults, Health & Public Protection Committee is Westminster's 'statutory health scrutiny committee' and looks at the work of the Clinical Commissioning Groups (CCGs) and National Health Service (NHS) provider trusts (such as Imperial (St Mary's Hospital), Chelsea & Westminster Hospital, Central London Community Healthcare and our local Mental Health Trust (CNWL). The Committee acts as a 'critical friend' by suggesting ways that health related services might be improved but also has a formal power to refer any variation in health services to the Secretary of State.

3.3 The Adults, Health & Public Protection Committee also acts as Westminster's Crime and Disorder Committee as defined in the Crime and Disorder (Overview and Scrutiny) Regulations 2009 and carries out the scrutiny of decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions – such as the Safer Westminster Partnership and any decisions or strategies taken.

3.4 The Committee scrutinises the portfolio of the Cabinet Member for Adult Social Services & Public Health which covers the following areas:

Adult Social Services; Carers; Relations with NHS & Clinical Commissioning Groups; Mental Health; Adult Disabilities; Public Health; Chairman of the Health & Well-Being Board; Asylum Seekers; Drug & Alcohol Services; Sexual Health.

3.5 The Committee also scrutinises the portfolio of the Cabinet Member for Public Protection & Licensing which covers the following areas:

Area Working; Neighbourhoods & City Inspectors; Community Protection including Domestic Violence; Safer Westminster Partnership; Crime Board; Relations with the Police; Rough Sleeping; Licensing Policy & Enforcement; Trading Standards; Pest/Noise Control Services; Residential & Environmental Health; Emergency Planning; Fire & Relations with the London Fire & Emergency Planning Authority (LFEPA); Street Trading.

N.B. Hubs and Specialist Housing for the Elderly moved to Housing, Finance & Corporate Services P&S. Membership of the Health & Wellbeing Centres Task Group will therefore also be open to Members of the Housing Committee.

4. Developing the Work Programme

- 4.1 The process for developing the Work Programme starts in February/March time. In considering a Work Programme for this Committee the following sources have been reviewed, at high level, in order to give the Committee the wider context they need to help determine the best possible use of the Committee’s time.
 - City for All
 - The Departmental Business Plans & feedback priorities from their management team
 - KPI performance
 - City Survey feedback
 - Discussion with Cabinet Members
 - Complaints Analysis
 - National and regional policy developments
 - Clinical Commissioning Group suggestions.
- 4.2 The rationale for the review of these documents is that Scrutiny should focus what is important to the City, on how it can support success towards our existing commitments and also to focus opportunities for improvement where services are not meeting stated objectives or performance indicators.
- 4.3 The Scrutiny Committee has the option to establish Task Groups and Single Member enquiries where the subject merits a more in depth study entailing the need for research and detailed examination. This Committee currently has a Single Member Study focussing on the CIS and has agreed to establish its next task Group on Health & Wellbeing Centres starting in June 2017.
- 4.4 From these sources a long list of potential items has been developed (Appendix 1 option 2) and an attempt has been made at fitting some of these for the Committee’s consideration. Committee will however need to decide its own priorities.
- 4.5 There is a soft cap of two items per meeting in order to allow the Committee to give appropriate consideration to the items on the agenda. For those issues where the Committee would like to do a more in-depth review, Tasks Groups or Single Member Studies can be established.
- 4.6 Given the number of items on the long-list is greater than the time available for the Committee to consider them, the following criteria is suggested to assist the Committee with prioritising items for the Work Plan.

Public Interest:	The concerns of local people should influence the issues chosen for scrutiny (City for All Annual Resident Survey)
Ability to change:	Priority should be given to issues that the committee can realistically influence.
Performance:	Priority should be given to the areas in which the Council or other agencies are not performing well. (Consideration of KPI’s and other performance data)

Extent:	Priority should be given to issues that are relevant to all or large parts of the City
Replication:	Work programmes should take account of what else is happening in the areas being considered to avoid duplication or wasted effort.

4.7 In addition to the criteria above the committee may also wish to consider the following questions when assessing the overall work programme:

- Is the Work Programme balanced? Is the planned work evenly spread over the municipal year and are the topics balanced in terms of the scope of the Committee's remit?
- Is the Work Programme too onerous? It is important to hold some capacity in reserve for any urgent issues that might arise.

5. 2017/2018 Meeting Dates

5.1 The Committee will meet 5 times this year on the following dates:

19th June 2017
20th September 2017
22nd November 2017
31st January 2018
9th April 2018

If you have any queries about this Report or wish to inspect any of the Background Papers please contact Muge Dindjer x2636

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APPENDICES:

Appendix 1- Annual Work Programme

Appendix 2 - Action Tracker

Appendix 1- Option1



Adults, Health & Public Protection Committee

ROUND ONE (19 JUNE 2017)

Theme Public Protection		
Agenda Item	Reasons & objective for item	Represented by:
Review of Licensing Policy		Chris Wroe
Policing Plan Implementation including BCU?		Borough Commander Sara Sutton

ROUND TWO (20 SEPTEMBER 2017)

Theme Adults Social Care & Health		
Agenda Item	Reasons & objective for item	Represented by:
Draft Primary Care Strategy?	For committee to be consulted prior to adoption	CCG's
STP Delivery and the continuing integration of Health and Social care	Baseline report and identification of member concerns	ASC and CCG's HWB Board

ROUND THREE (22 NOVEMBER 2017)

Theme Public Protection		
Agenda Item	Reasons & objective for item	Represented by:
How can Business support best practice in public safety?	To identify how business does/could support the Police to help reduce crime.	Amy Lame-night czar and BIDS?
Safer Westminster Plan	To understand and be consulted on the content of the plan	Chair of Safer Westminster Partnership

ROUND FOUR (31 JANUARY 2018)

Theme ASC and Health		
Agenda Item	Reasons & objective for item	Represented by:
Public Health- a focus on prevention and prioritisation	For the Committee to assess how successful the prevention agenda has been to date and to understand and comment on the prioritisation framework for public health.	DR Mike Robinson Sue Redmond-Interim Tri-borough Director ASC.

CCG Community Services programme- a focus on changes to patient pathways	Committee to be consulted on the current programme and planned changes-focus on patient impact.	CCG's
Report Back from HWB Centre task Group	To receive report back from the committees task group and consider recommendations in the context of the corporate work on the hubs	Councillor B Taylor

ROUND FIVE (9 APRIL 2018)		
Focus on Public protection		
Agenda Item	Reasons & objective for item	Represented by:
WCC Shisha Strategy - this could be a briefing?	To receive an update on implementation a year after launch of strategy.	Rebecca Fuhr
Examining the links between substance abuse, mental health and the criminal justice system?	The criminalisation of health problems and the impact on services	Westminster magistrates

Appendix 1-Option2						
Draft Adults, Health and Public Protection Policy and Scrutiny Committee 2017/18						
<i>Item</i>	Scope of Item	Cabinet Member Portfolio	Rationale for consideration	Type	Witness	Timeframe
<i>ASC and Health</i>						
STP Delivery and continued integration of health and Social care	To review the draft delivery plan for the HWB Strategy.	Heather Acton	Pro-active policy development & risk in business plan. Suggested priority from ASC DMT.	Pre decision-informing the final delivery plan and plans for integration. Also monitor results with Healthwatch	Healthwatch?	Sept 2017?
Care Act Responsibilities	Review % of clients and carers getting an assessment	Heather Acton	<ul style="list-style-type: none"> Risk Business Plan 	Review		TBC
Public health	A focus on prevention and public health prioritisation framework.	Heather Acton	<ul style="list-style-type: none"> Risk Business Plan ASC priority 	Pre decision and review	Best practice from elsewhere and Service user experience	Jan 2018?
ASC market fragility and NHS procurement/commissioning.	Committee to understand & comment on the state of ASC market in WCC& how effective are NHS at Commissioning services.	Heather Acton	<ul style="list-style-type: none"> Business Plan 	Information and review of interventions to support the market & examination of commissioning within the NHS	Best Practice from elsewhere	TBC
Customer Journey/Transformation	To receive an update on the customer journey work	Heather Acton	<ul style="list-style-type: none"> Business Plan 	Information Contribution to thinking on Transformation	User voice	TBC
Remaining Transformation projects <ul style="list-style-type: none"> One Front Door 	These items can be taken individually	Heather Acton	<ul style="list-style-type: none"> Pre decisions-scrutiny can help with the design to ensure 			TBC

<ul style="list-style-type: none"> Commissioned Care & Support services 			<ul style="list-style-type: none"> needs of service users catered for Helps to de risk transformation 			
NHS Estates planning	tbc	Rachael Robathan/Heather Acton	<ul style="list-style-type: none"> Discussion with CCG 	Pre decision		TBC
Noise and mental health		Heather Acton. Antonia Cox	<ul style="list-style-type: none"> Cabinet Member suggestion 			
Learning disability and mental health-transition from children's services to adults	To examine how the patient journey works from children's to adults services for adolescents	Health Acton/Richard Holloway	<ul style="list-style-type: none"> Cabinet member suggestion 			
Obesity	To try to identify impact on our long term spending	Heather Acton	<ul style="list-style-type: none"> Cabinet member suggestion 			
CCG Draft Primary Care Strategy	To seek the Committee's input	Heather Acton	<ul style="list-style-type: none"> CCG suggestion 	Pre decision		Sept 2017
CCG Community Services programme	To focus on areas where they are seeking to make changes to patient pathways	Heather Acton	<ul style="list-style-type: none"> CCG Suggestion 	Pre decision		January 2018
Plans and priorities for 2018/19 and 2019/20	The Committee to be able to scrutinise appropriate plans at the right time.	Heather Acton	<ul style="list-style-type: none"> CCG Suggestion 	Pre decision/information		At relevant point in NHS Business Planning cycle
The current and future effects of the Digital Economy on health	To examine the use of technology in caring and improving people's lives	Heather Acton	<ul style="list-style-type: none"> Chairman's suggestion 	Review and comment on local plans in the context of the national picture	NHS England Digital	tbc

DCLG Select Committee review into Adult Social Care sustainability if funding and quality reported in March 2017. Government has not yet responded http://www.parliament.uk/business/committees/committees-a-z/commons-select/communities-and-local-government-committee/news-parliament-2015/adult-social-care-launch-16-17/	Committee could consider a report of their findings and recommendations and invite our Director to comment on the local picture?	Heather Acton	<ul style="list-style-type: none"> Arose form Horizon scanning national policy picture 	Review local planning re a national issue.	?	tbc
Public Protection						
Review of Licensing Policy		Antonia Cox	<ul style="list-style-type: none"> Carry forward from previous work plan 	Pre decision	Residents fora	June 2017
<i>Policing Plan implementation</i>	To include risks to funding and reconfiguration of BCU' to tri borough	Antonia Cox	<ul style="list-style-type: none"> Risk of financial loss to the authority beyond 2017/18 	Understanding/supporting lobbying?	Invite Sophie Linden-Deputy Mayor for Policing Consider inviting politician from Assembly committee?	June 2017
<i>How can Business support best practice in public safety?</i>	To identify and discuss how business can/does support Police to help reduce crime. To include a focus on the evening & night time economy. To include ASB or have as a separate item?	Antonia Cox	To examine and promote best practice in order to maximise Police resources. Member request/discussion with cabinet member	Informing	Amy Lame-night czar BIDS?	November 2017

Serious youth violence - Jointly with the Children's Committee perhaps as a one off task group?	To understand current level youth violence, see evaluation of the IGU work and support lobby for future MOPAC funding	Antonia Cox/Richard Holloway	<ul style="list-style-type: none"> • Risk-financial 	Pre – decision/lobbying		TBC
Update on the rough sleeping strategy- to Housing Committee			<ul style="list-style-type: none"> • 			
Shisha Strategy- this could be a briefing note?	Review of delivery against performance one year on Perhaps looking at addictions along with smoking?	Councillor Acton/Antonia Cox	<ul style="list-style-type: none"> • Resident concern/member suggestion 	Monitoring/review		April 2018
WCC Response to the Police and Crime Act 2017	To understand the Act, WCC planned response and shape that response?	Antonia Cox	<ul style="list-style-type: none"> • Business Plan major project 	Pre decision Informing		TBC
A review of all budgets available for public protection.	Ctee to be informed of overall budget position internal and external and plans to manage services within reducing resources.	Antonia Cox	<ul style="list-style-type: none"> • Business Plan risk 	Informing Monitoring and review		TBC- early in year- June 2017
Safer Westminster Plan	To understand and be consulted on the content of the Plan	Antonia Cox	<ul style="list-style-type: none"> • Business Plan strategy identified for this year 	Pre decision	Chair of Safer Westminster Partnership and Police Commander	TBC/Nov. 2017?
Examination of the links between drug abuse and mental health and the criminal justice system	A review of the revolving door of substance misuse and criminalisation and the impact on offender	Antonia Cox and Heather Acton	<ul style="list-style-type: none"> • Chairman's suggestion 	Monitoring/review	Westminster Magistrates	April 2018

	management, council services, youth services etc.					
ASB and the Night time economy- NB this is potentially a joint item with the Business, Planning and Transport P & S who have requested an item on the night tube one year after operation.						September

Rationale

- Risk
- Poor performance
- Resident concern
- CfA/political priority
- Key project in business plan
- Member request
- Proactive policy development

Type

- Pre-decision (research, contract specification review, consultation response_
- Informing (for info only)
- Lobbying?
- Monitoring/Review



Agenda Item	1 st February 2017 Action	Status
Item 4 Cabinet Member Updates: Public Protection & Licensing	The City Council's response to the draft London Police & Crime Plan to be signed by the Cabinet Member and the Chairman of the Committee	Signed by the Leader, Cabinet Member and Chairman of the Committee and submitted on 1 st March. Circulated to Committee on 1 st March 2017.
Item 4 Cabinet Member Updates: Public Protection & Licensing	The Committee to be provided with statistical details of the regular street counts of rough sleepers in Westminster.	Completed and circulated to Committee on 15 th February 2017.
Item 4 Cabinet Member Updates: Public Protection	The Committee to be provided with a substantive update on the Westminster Rough Sleeping Strategy, prior to the re-commissioning of outreach services.	Completed and circulated to Committee on 15 th February 2017
Item 4 Cabinet Member Updates: Adult Social Services & Public Health	The draft Health and Wellbeing Strategy Implementation Plan to be referred to Committee for comment.	This is still in production and will be shared with committee once completed.
Item 5 Standing Updates: Air Quality Task Group	A Member of the Committee is sought as a deputy for Councillor Glanz.	The Task Group has now completed its work and the Chairman is attending the meeting of CEL Committee for final sign off.
Item 5 Standing Updates: Community Independence Task Group	A Member of the Task Group is sought to take forward the work begun by Cllr. Rowley	Councillor McAllister has taken on this work and has recently received the required paperwork form

		health/ASC colleagues
Item 6 MOPAC Funding & Proposals for Metropolitan Police Basic Command Unit Changes	That MOPAC provide Committee Members with copies of the draft Performance Framework and the London Formula	The draft Performance Framework was circulated to Committee on 15 th February. The London Formula has been requested but not provided.
1st February 2017		
Agenda Item	Action	Status
Item 4 Cabinet Member Updates: Public Protection & Licensing	The Committee to receive details of Westminster's Shisha Strategy.	Committee were sent a link to the strategy on 30.3.17
Item 4 Cabinet Member Updates: Public Protection & Licensing	The Committee to receive the findings of a pilot for the new Borough Command Units that had taken place in Barking & Dagenham.	Requested on 12.4.17. It is understood that no evaluation has taken place yet.
Item 4 Cabinet Member Updates: Public Protection & Licensing	Consideration to be given to inviting the Deputy Mayor of London to attend the Committee to discuss the proposed changes in the London Police & Crime Plan.	This is included as an option in the draft work programme.
Item 4 Cabinet Member Updates: Public Protection & Licensing	Updates were requested on: <ul style="list-style-type: none"> the reconfiguration of CCTV in Westminster whether a report or update would be available following the 2017 Hackathon staged by the Imperial NHS Trust Fixed Odds Betting Terminals The powers available to address the rise in rough sleepers using tents, and whether they were in the control of the City Council, the Police, or Transport for London. 	CCTV to be covered in the cabinet member update. Requested and awaiting response

<p>Item 5 Standing Updates: Health & Wellbeing Centres Task Group</p>	<p>Consideration to be given to the Task Group seeking advice from the all-party group on Art and Health, which had held a workshop at a Public Health conference recently attended by Cllr Taylor.</p>	<p>To be included once task Group commences work in June</p>
<p>Item 7 Committee Work Programme</p>	<p>The Committee requested regular updates on the forthcoming changes to Tri-borough working.</p>	<p>Requested</p>
<p>Item 7 Committee Work Programme</p>	<p>Consideration to be given to adding the following issues to the Work Programme:</p> <ul style="list-style-type: none"> • A review of Westminster's Shisha Strategy. • Further discussion on the London Policing Plan and proposals for Borough Command Units. • Rough sleeping. • Serious youth violence. • Anti-social behaviour and the evening and night-time economy. 	<p>All these items are on the draft work programme for committee to consider except the Rough Sleeping Strategy which is being considered by the Housing Committee</p>
<p>Item 7 Committee Work Programme</p>	<p>The Committee to receive a presentation on the reconfiguration of primary care services from the Central London CCG at the next scheduled meeting on 8 May, or at a separate Special Meeting.</p>	<p>Completed</p>

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