

Health Scrutiny Sub-Committee

Tuesday 24 February 2014

A meeting of the above Sub-Committee will be held at the Town Hall, Royal Leamington Spa on Tuesday 24 February 2014 at 4.00pm.

Membership:

Councillor Wreford-Bush (Chairman)	
Councillor Copping	Councillor Illingworth
Councillor Mrs Falp	Councillor Kinson OBE
Councillor Gill	Councillor Mrs Knight (Co-opted Member)

Emergency Procedure

At the commencement of the meeting, the emergency procedure for the Town Hall will be announced.

Agenda

1. Substitutes

To receive the name of any Councillor who is to act as a substitute, notice of which has been given to the Chief Executive, together with the name of the Councillor for whom they are acting.

2. Declarations of Interest

Members to declare the existence and nature of interests in items on the agenda in accordance with the adopted Code of Conduct.

Declarations should be entered on the form to be circulated with the attendance sheet and declared during this item. However, the existence and nature of any interest that subsequently becomes apparent during the course of the meeting must be disclosed immediately. If the interest is not registered, Members must notify the Monitoring Officer of the interest within 28 days.

Members are also reminded of the need to declare predetermination on any matter.

If Members are unsure about whether or not they have an interest, or about its nature, they are strongly advised to seek advice from officers prior to the meeting.

3. **Minutes**

To confirm the minutes of the meeting held on 15 December 2014.

(Item 3/Page 1)

4. **Future of Health Scrutiny at Warwick District Council**

To consider and make comment and /or changes to a report from the Health Scrutiny Sub-Committee that will be referred to the Overview & Scrutiny Committee on 10 March 2015 for approval.

(To follow)

5. **Work Programme**

To consider a report from Democratic Services.

(Item 5/Page 1)

- Warwick District Council Health Strategy Update.
- HIWEB Update.
- Update from the Health & Wellbeing Lead on the Employee Smoking Policy following submission to the Employment Committee on 27 January 2015.
- Update from Councillor Kinson on the Warwickshire County Council Adult Social Care & Health O & S Committee.
- Amendments or additions to the Work Programme.

Published on 16 February 2015

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Enquiries about specific reports: Please contact the officers named in the reports.

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Health Scrutiny Sub-Committee

Minutes of the meeting held on Tuesday 15 December 2014 at the Town Hall, Royal Leamington Spa at 4.00 pm.

Present: Councillor Wreford-Bush (Chairman); Councillors Mrs Falp, Gill, Illingworth, Kinson OBE, and Mrs Knight.

An apology for absence was received from Councillor Copping.

21. **Declarations of Interest**

There were no declarations of interest.

22. **Health Issues in Respect of the Local Plan**

The Planning Policy and Conservation Manager was asked to give Members of the Sub-Committee a short talk on what the Council had tried to do in respect of health and wellbeing within the Local Plan. It was hoped that the Local Plan would be submitted by late January/early February, although it was still at the stage where it was possible to make amendments.

Health and wellbeing was a thread that ran throughout the policy framework, together with the infrastructure delivery plan necessary to support health issues. Amongst health and wellbeing themes running through the Local Plan were:

- where new development was to take place, to limit the need for car use;
- healthy lifestyles;
- a quality environment;
- dealing with deprivation and encouraging regeneration;
- enjoyment of green space and open spaces;
- allocation of land for medical facilities and ensuring easy access;
- to encourage the development of sports facilities and protect ones already in existence;
- safe and convenient routes for walking and cycling;
- public meeting places;
- healthy and cohesive communities;
- the right mix of housing; and
- an aim to protect the natural resources, such as air quality and to reduce noise pollution, and where there was an impact, an aim to seek mitigation.

It was recognised that health impacts on the Local Plan were complex. It was also recognised that if the Council implemented a Supplementary Planning Document on Health Impacts for future developments, this would be heavily challenged by developers.

The Local Plan sought to address the health issues raised by Public Health such as:

- to prioritise active travel;
- to promote healthy housing, e.g. to reduce the impacts of noise;

Health Scrutiny Sub-Committee Minutes (Continued)

- to target child obesity, e.g. the control of hot food takeaways near schools.

In respect of infrastructure, the Local Plan addressed the siting and number of GP surgeries, transport and local hospitals. The area was well provided. Money had been set aside for investment in GP surgeries to support the growth figures in the Local Plan. A new ward block would be provided at Warwick Hospital as well as the expansion of services in Stratford upon Avon.

There was a concern that in respect of transport, people were too focused on the car and not enough on sustainable modes of transport. A study (Atkins) had provided evidence that it was possible to put more emphasis on sustainable transport modes. Transport corridors were being examined, together with an integrated approach to improve road junctions for all modes of transport.

It was noted that in order to apply pressure that would not be so easy to challenge in respect of Section 106 agreements with new development, the sooner the Local Plan was implemented the better. However, the Council could not expect these contributions to make the development unviable and where there was a shortfall, alternative sources of funding would have to be found.

Representatives present at the meeting from the South Warwickshire Clinical Commissioning Group Patient and Participation Group offered their Group's help, especially in agreeing a figure for S106 contributions from developers, as their Group often could provide more readily available data that was necessary when a S106 figure was requested.

The Chairman thanked the Planning Policy and Conservation Manager for the information he had provided and answering questions.

23. **The Work of the South Warwickshire Clinical Commissioning Patient & Participation Group**

Representatives from the South Warwickshire Clinical Commissioning Patient & Participation Group (3PG) gave the Sub-Committee a talk on the work handled by them. These representatives were:

- Mr C Quinney – Deputy Chairman of 3PG
- Mr J Davies – Member of 3PG's agenda setting group
- Mr B Franklin – Member of 3PG
- Mr A Matthews – Member of 3PG

3PG in broad terms was a two way conduit between the local Clinical Commissioning Group (CCG) and the patients of its member GP practices. Issues arising from the GP patient group meetings would be brought to 3PG for wider discussion, and, if appropriate, action by the CCG. The CCG in turn would inform 3PG on what it was doing or going to do, and 3PG would pass this information along to the patient groups.

The representatives from 3PG gave examples of work they had undertaken.

Health Scrutiny Sub-Committee Minutes (Continued)

Members of the Sub-Committee asked the Committee Services Officer to contact the local NHS England Area Team to get a copy of its strategy.

Additionally, Members requested that the use of S106 money for health issues be put on the Sub-Committee's work programme.

24. Minutes

The minutes of the meeting held on 10 November 2014 were taken as read and signed by the Chairman as a correct record.

25. Work Programme

The Committee considered a report from Democratic Services on the Sub-Committee's work programme.

Future of Health Scrutiny at Warwick District Council

At the November meeting of the Health Scrutiny Sub-Committee, it had been resolved to seek approval from Overview & Scrutiny Committee to postpone the report on the future of health scrutiny until after the new Council had formed. The Chairman had duly raised this at Overview and Scrutiny Committee on 2 December and the Sub-Committee's recommendation had been rejected. It was, therefore, decided that the report would still be delivered to Overview & Scrutiny in March 2015. Furthermore, in discussing the matter at Overview & Scrutiny, it became clear that the direction from the parent committee was very much in favour of a full committee approach for health scrutiny as the way forward.

In light of the above, the Committee Services Officer spelt out the options in respect of a full committee approach for health scrutiny and sought guidance from Members of the Sub-Committee on the preferred way forward.

The Head of Health & Community Protection advised Members that the formation of a full Scrutiny Committee could not be supported by the Corporate & Committee Services, without additional resources. If the meeting was required in the same night as Finance & Audit Scrutiny Committee and Overview & Scrutiny Committee, then the resource implications were greater.

Members stated that the preferred approach would be for a Health Scrutiny Committee to handle pre-scrutiny of Executive reports and scrutiny of strategic issues. Scrutiny of Executive reports the night before Executive met would remain the province of Overview & Scrutiny and Finance & Audit Scrutiny Committees.

Employee Smoking Policy Review

The Sub-Committee considered a draft report from the Health & Wellbeing Lead that once it had gone through the full approval process, would be presented to the Employment Committee at its next meeting for approval and implementation. The draft report updated the Council's Smokefree Policy to take into account the use of e-cigarettes or nicotine containing products. The Health & Wellbeing Lead had asked the Sub-Committee to

Health Scrutiny Sub-Committee Minutes (Continued)

pre-scrutinise his report to open the debate when there was still time to revise the policy before the final report to the Employment Committee was published.

The Chairman informed Members that he had been asked to participate on a discussion on this issue on Radio Coventry & Warwickshire.

Sub-Committee Members advised the Health & Wellbeing Lead to clarify in more detail that a "voke" device was not an e-cigarette and therefore the report should show that where a voke had been medically prescribed, its use was permitted. The end of paragraph 6.1 in the draft policy needed clarification.

(Councillor Mrs Falp left the meeting at the end of discussion on the Employee Smoking Policy Review.)

Warwick District Council Health Strategy Update

The Health and Wellbeing Lead informed the Members that since the last meeting, he had attended meetings to or for the purposes of:

- monitor the progress of "Healthy Warwick" grant project at Garden Organic;
- advance the Warwickshire Smokefree Alliance;
- plan for this year's No Smoking Day;
- plan the "affordable warmth" strategy;
- discuss with Human Resources the Health & Wellbeing Action Plan for 2015. He would submit a report to Employment Committee and the Health Scrutiny Sub-Committee;
- progress County "Food for Health" at Ryton Organic;
- Dementia Friendly WDC with DF Warwickshire who were seeking to include us in their strategy;
- Public Health/Regulatory Services Joint Seminar;
- Induction of a cohort of new staff and the importance of Health and Wellbeing;
- Tutor group for UK Public Health Registration; and
- Emergency planning exercise.

The Health & Wellbeing Lead was asked to bring to Health Scrutiny Sub-Committee a report/action plan on the possibility of running a "Walking Scheme" within the District as per the details Councillor Mrs Knight sent to him of a scheme in Reading, and to liaise with the walking experts at Coventry and Warwick Sports.

The Health & Wellbeing Lead also informed the Sub-Committee that he was working with Warwick Hospital on funding in respect of the "measured mile".

Warwick District Health Improvement & Wellbeing Partnership (HIWEB) Update

The Health & Wellbeing Lead informed Members that key players within HIWEB had attended a meeting and had agreed a form of words for the Terms of Reference to go forward to involve the voluntary sector. Councillor Wreford-Bush would be included in the HIWEB mailing list.

Health Scrutiny Sub-Committee Minutes (Continued)

Update from Councillor Kinson on the Warwickshire County Council Adult Social Care & Health O & S Committee

Councillor Kinson gave the Sub-Committee and update on matters that had been discussed at the Warwickshire County Council Adult Social Care & Health O & S Committee since his last update. These included:


- obesity for all ages;
- Healthy eating for children and schools;
- Sexual abuse
- Care and nursing homes (13 homes were being examined in Warwickshire); and
- "111" service

Following consideration of the Work Programme, it was

Resolved that:

- (1) the report be noted;
- (2) the use of S106/Community Infrastructure Levy (CIL) money for health issues be added to the work programme; and
- (3) a report/action plan on the possibility of running a "Walking Scheme" within the District as per the details Councillor Mrs Knight sent to the Health & Wellbeing Lead of a scheme in Reading, and to liaise with the walking experts at Coventry and Warwick Sports be added to the work programme.

(The meeting finished at 6.15 pm)

 Health Scrutiny Sub-Committee – 24 February 2015		Agenda Item No. 4
Title	The way forward for scrutinising Health Issues at Warwick DC – Recommendations from the Health Scrutiny Sub-Committee	
For further information about this report please contact	Lesley Dury – Committee Services Officer	
Wards of the District directly affected	All	
Is the report private and confidential and not for publication by virtue of a paragraph of schedule 12A of the Local Government Act 1972, following the Local Government (Access to Information) (Variation) Order 2006?	No	
Date and meeting when issue was last considered and relevant minute number	15 December 2014	
Background Papers	O & S Minutes 15 April 2014 & Health Scrutiny Sub-Committee Minutes 15 December 2014	

Contrary to the policy framework:	No
Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference number)	No
Equality Impact Assessment Undertaken	No
This report makes recommendations on the process for the Council to scrutinise health issues, and does not discuss the actual health issues which would require such an assessment.	

Officer/Councillor Approval		
Officer Approval	Date	Name
Chief Executive/Deputy Chief Executive		See Draft Report at Appendix 1
Head of Service		See Draft Report at Appendix 1
CMT		
Section 151 Officer		See Draft Report at Appendix 1
Monitoring Officer		See Draft Report at Appendix 1
Finance		See Draft Report at Appendix 1
Portfolio Holder(s)		See Draft Report at Appendix 1
Consultation & Community Engagement		
The Democratic Services Manager has been consulted over staffing implications.		
Final Decision?		No
Suggested next steps (if not final decision please set out below)		
The report go to O & S 10 March, and if approved by O & S, to Full Council for decision.		

1. **Summary**

- 1.1 In April 2014, Overview and Scrutiny Committee set the Health Scrutiny Sub-Committee a task to recommend the way forward for health scrutiny at the District Council. This report was to be delivered to O & S by March 2015.
- 1.2 The report (appendix 1) giving the Health Scrutiny Sub-Committee's recommendations is attached and Health Scrutiny Sub-Committee members are asked to review this draft report and report any comments or amendments they may have directly to the report authors at the next Sub-Committee's meeting on 24 February.
- 1.3 Once all changes to the report have been agreed, the report will be sent to the Overview & Scrutiny Committee for its approval on 10 March 2015. Once any changes that the O & S Committee has made to the report have been incorporated, the report will be submitted to Full Council for final approval and decision.

2. **Recommendation**

- 2.1 That the Health Scrutiny Sub-Committee agree any changes to the report (appendix 1).
- 2.2 That the report (appendix 1), then be sent to Overview & Scrutiny Committee 10 March 2015 for approval.

3. **Reasons for the Recommendation**

- 3.1 In April 2014, the Overview & Scrutiny Committee delegated a task to the Health Scrutiny Sub-Committee to recommend the way forward for Health Scrutiny at the Council. This recommendation was to be delivered to O & S at its March 2015 meeting.

4. **Policy Framework**


- 4.1 **Policy Framework** – The report does not impact on the Policy Framework.
- 4.2 **Fit for the Future** – See the report attached at Appendix 1.
- 4.3 **Impact Assessments** – There are no policy changes in respect of Equalities.

- 5. **Budgetary Framework** - See the report attached at Appendix 1.

- 6. **Risks** - See the report attached at Appendix 1.

- 7. **Alternative Option(s) considered** - See the report attached at Appendix 1.

- 8. **Background** - See the report attached at Appendix 1.

 Overview & Scrutiny Committee – 10 March 2015		Agenda Item No.
Title	The way forward for scrutinising Health Issues at Warwick DC – Recommendations from the Health Scrutiny Sub-Committee	
For further information about this report please contact	Councillor Wreford-Bush, Chairman of the Health Scrutiny Sub-Committee, Richard Hall, Lead Officer and Lesley Dury, Committee Services Officer	
Wards of the District directly affected	All	
Is the report private and confidential and not for publication by virtue of a paragraph of schedule 12A of the Local Government Act 1972, following the Local Government (Access to Information) (Variation) Order 2006?	No	
Date and meeting when issue was last considered and relevant minute number	15 April 2014	
Background Papers	O & S Minutes 15 April 2014	

Contrary to the policy framework:	No
Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference number)	No
Equality Impact Assessment Undertaken	No
This report makes recommendations on the process for the Council to scrutinise health issues, and does not discuss the actual health issues which would require such an assessment.	

Officer/Councillor Approval		
Officer Approval	Date	Name
Chief Executive/Deputy Chief Executive	To be sent to CE once all changes from sub-committee included	Chris Elliott
Head of Service	Initial Draft checked 13/3	Richard Hall
CMT		
Section 151 Officer	Initial Draft emailed to MS 16/2	Mike Snow
Monitoring Officer	To be sent to AJ once all changes from sub-committee included	Andy Jones

Appendix 1

Finance	Initial Draft emailed to JC 16/2	Jenny Clayton
Portfolio Holder(s)	Initial Draft emailed to Councillor Coker 11/2	Councillor Coker

DRAFT

Consultation & Community Engagement	
The Democratic Services Manager has been consulted over staffing implications.	
Final Decision?	No
Suggested next steps (if not final decision please set out below)	
If the recommendation is accepted, then final decision to form a new committee would need to be agreed by Full Council. In the event that O & S agree option 7.1 of the alternative options specified, then a follow-on report would be required to specify staffing resource and budget implications.	

1. **Summary**

- 1.1 In April 2014, the Overview & Scrutiny Committee set up a Health Scrutiny Sub-Committee to oversee scrutiny of Health Issues affecting Warwick District Council and to provide a report to Overview and Scrutiny in March 2015 on the way forward for Health Scrutiny.
- 1.2 This report presents the recommendations from the Health Scrutiny Sub-Committee which requires approval from the Overview & Scrutiny Committee before the recommendation can go forward to Full Council for decision.

2. **Recommendation**

- 2.1 That the Overview and Scrutiny Committee recommend to Full Council that:
 - (a) a committee be formed to handle pre-scrutiny of selected Executive reports, where health and wellbeing is an issue, and will select these from the Forward Plan, before they reach final stage. All members of the Council will also be able to suggest reports that require pre-scrutiny of health and wellbeing issues. The Committee will also deal with scrutinising strategic health issues.
 - (b) this committee be named the Health Scrutiny Committee;
 - (c) this committee should consist of at least 11 members¹ and also substitute members;
 - (d) the membership of the committee should be politically proportionate;
 - (e) scrutiny of final reports for Executive will remain the responsibility of the two existing Scrutiny committees;
 - (f) the Health Scrutiny Committee will be resourced from existing staff resources from within Committee Services and Health & Community Protection;
 - (g) that the terms of reference for the committee be framed by the Council's Health and Wellbeing Strategy, viz
 - i. promoting Health & Wellbeing in its community.
 - ii. promoting Health & Wellbeing in its workforce.
 - iii. As a scrutiny body for the local activities and performance of NHS bodies located within the District of Warwick and in other areas of Warwickshire, in liaison with and the County Adult Health & Social Care Overview and Scrutiny Committee.
 - (h) that in order to assist the committee in its scrutiny arrangements, the powers will include the capability of inviting individuals and organisations to present evidence on particular health issues. Every meeting agenda will make provision for the involvement of the Voluntary Sector, and of Public Health Warwickshire, representatives of which will be called upon to attend and to speak.
 - (i) Report authors would be required to take on-board any pre-scrutiny comments/recommendations in respect of their reports or give good reason why this is impractical.
 - (j) the committee will run along the same procedure lines as the existing two Scrutiny committees where their functions coincide.

¹ This may be subject to change after the elections in May 2015.

Appendix 1

- (k) the Head of Service for Health & Community Protection will encourage officers to take their ideas to the Committee at an early stage through encouragement at senior management meetings.
- (l) meetings for the new committee be set in the Council's calendar every other month, with the option to call additional meetings if required for urgent business.

3. **Reasons for the Recommendation**

- 3.1 The changes to the health service introduced by the Health and Social Care Act 2012 meant that local authorities had an increased role in delivering health & wellbeing. In liaison with the County Council, through a nationally funded pilot scheme, the benefit of having a District based health scrutiny arrangement was established.

The pilot coincided with strategic changes within this council to align its services to meet the new public health arrangements at county level. The new Health Scrutiny arrangement was therefore seen as key to ensuring that the council delivers against its own strategic aims within the Sustainable Community Strategy and also meets the requirements of the county Health & Wellbeing Board strategy.

- 3.2 The recommendation that the committee handle pre-scrutiny work has been made so that there is limited overlap in responsibility with the other two existing Scrutiny Committees, who often do not get sufficient time to handle pre-scrutiny work in sufficient depth.
- 3.3 It is intended that the existing two Scrutiny committees continue to function as they always have and that the Health Scrutiny Committee concentrate on pre-scrutiny of reports concerning Health & Wellbeing issues and strategic health issues only. This means that the Health Scrutiny Committee does not have to meet on the same day or shortly after the agenda is published for meetings of the Executive. The impact of this split is that the committee can be staffed from existing staffing resources within Committee Services and Health & Community Protection, as has been the case with the Health Scrutiny Sub-Committee. Experience from running the Health Scrutiny Sub-Committee would indicate that meetings are not required each month, but obviously the option to call additional meetings remains in place should business needs require this.
- 3.4 The Health Scrutiny Committee will consider health and wellbeing issues only and as such would require the same powers to ask certain individuals and organisations to address them. Equally, since one of the aims of the committee will be to improve health and wellbeing in the District, the committee must be able to hear evidence from the Voluntary Sector and other public health bodies.
- 3.5 In pre-scrutinising reports, the committee must be assured that its comments are acted upon by report authors, or good reason given why this is impractical. This will ensure that the other two Scrutiny Committees do not have to repeat the process when they examine final reports.

4. **Policy Framework**

- 4.1 **Policy Framework** – The report does not impact on the Policy Framework.

4.2 **Fit for the Future**

Health scrutiny will ensure that in every decision the Council takes and within all the services it operates, health is a key consideration which can only bring benefit to the residents of the District and the Council's staff. Fit for the Future focusses on "Service, People and Money" and health is fundamental to all of these.

One of the Council's Sustainable Community Strategy's five main themes is 'to enable and encourage the people of Warwick District to have an equal access to a healthy life and sense of wellbeing, ensuring that our actions are aligned with the Warwickshire Health & Wellbeing Board's Strategy'. The creation of a Health Scrutiny sub-committee will enable this aim and the priorities and actions arising out of it, to be monitored.

4.3 **Impact Assessments** – There are no policy changes in respect of Equalities.

5. **Budgetary Framework**

5.1 The formation of a new committee would mean that an additional Special Responsibility Allowance of £2,511 per year would be payable to the Chairman. At present, there is no budgetary provision for this within the Council's budget. Therefore, the Council, if it approved an additional committee, would need to make budgetary provision for this.

5.2 If the recommendation is rejected and the Overview and Scrutiny Committee decided to recommend Alternative Option 7.1, then a further report would be required before any recommendation could be made to Full Council as this would involve additional staffing resource and therefore have budgetary implications.

6. **Risks**

6.1 The main risk associated with health scrutiny is that if the Council does not handle it effectively, it will get left behind by the other organisations involved in the process and it will not ensure that its residents and staff benefit from the process. Ensuring that health is put near or at the top of any decision the Council makes will help to save money in the long run as the public will have more access to the services on hand and will help to ensure councillors and officers will know where to point people who require help on a health issue.

7. **Alternative Option(s) considered**

7.1 A Health Scrutiny Committee that operates in parallel with the other two Scrutiny Committees.

The committee would operate in the same way as the other two sitting scrutiny committees and would be required to meet prior to a meeting of the Executive. This presents practical issues within Committee Services to provide support as currently Committee Services has insufficient staff to guarantee staffing of these meetings. Additionally, report authors would possibly be required to attend three scrutiny committees which would either all be on the same evening, or in close time proximity to each other.

Appendix 1

It is recognised that this option would require additional budget to cover staffing resources and there could be problems at the Town Hall with providing suitable rooms and equipment for three major committees on the same evening.

The current arrangement whereby the existing scrutiny committees scrutinise Executive reports on the evening before the Executive meets works well and it would seem perverse to complicate this arrangement by adding another meeting to the same evening for scrutiny. Additionally, it would require precision discipline to ensure that there was no duplication of discussions between the three scrutiny committees.

7.2 Health Scrutiny to form part of the Overview and Scrutiny Work Plan

Some councillors have a very specific interest in health issues but not necessarily in scrutiny in general which they would be required to undertake if health scrutiny became part of the work of Overview and Scrutiny Committee.

It was also felt that simply making health part of the Overview and Scrutiny Work Plan would not give health sufficient standing and it might get small consideration at meetings where there was a very full agenda.

7.3 Health Scrutiny to continue to be dealt with by a sub-committee

The sub-committee approach has positive benefits insofar as its membership can be small or large and experience of the current sub-committee is that it is a far more flexible vehicle than the full committee approach. However, the overriding disadvantages of the sub-committee approach are that:

- (a) Voting members must be members of the parent committee, namely Overview and Scrutiny. This excludes other councillors who may have a particular interest in health. Indeed when the sub-committee was formed, this proved to be the case with two councillors who had already shown that they had a considerable interest in health issues; namely Councillors Mrs Knight and Weber.
- (b) A sub-committee can never be as influential as a committee given its ranking in the Council's hierarchy.
- (c) Sub-Committee members are sometimes forced to consider health issues twice – once at the sub-committee meeting and then at the parent committee meeting when a recommendation has to be referred to this parent committee.

8. **Background**

8.1 (See section 3.1)


The committee has a direct relationship with the County Adult Social Care and Health Overview and Scrutiny Committee (ASCHOSC) which provide scrutiny of health delivery at county level. There is representation of a WDC councillor on the ASCHOSC, who also attends the district committee. Work programmes are shared to ensure that there is no duplication of issues. The understanding is that either committee could refer matters to the other for scrutiny. For example a significant concern about Warwick Hospital might become known to our local councillors but it would be most appropriate for the county scrutiny

Appendix 1

committee to investigate this because the users and impact come from a much wider community than our own area.

There is no prescribed relationship with other organisations and bodies. However, effective communication, with Public Health Warwickshire; South Warwickshire Clinical Commissioning Group; Healthwatch; voluntary sector organisations and others, is considered essential in delivering good health and wellbeing within the district. Representatives of these bodies are invited to attend committee where appropriate and to refer matters of concern.

- 8.2 Back in April 2014, the Overview and Scrutiny Committee set up a sub-committee to handle health scrutiny issues. This was done on the proviso that this sub-committee would report back to Overview and Scrutiny in March 2015 with its recommendations for a permanent way forward for health scrutiny. At the time the Health Scrutiny Committee was established, concerns were raised by Members that in accordance with the way a sub-committee operates, it excluded any Member who did not sit on Overview and Scrutiny from being a voting member of the sub-committee. In particular, the Labour Group objected to this as two of its members had been part of the original working party and had particular interests in health issues. However, because these two councillors did not sit on Overview and Scrutiny, they could not have voting rights on the sub-committee. Councillor Mrs Knight opted to become a co-opted member of the Health Scrutiny Sub-Committee, but she is excluded from any voting. Councillor Weber's experience from sitting on the working party was lost.
- 8.3 The Sub-Committee, with its new membership, took a little while to find its rhythm because there is a considerable split in responsibility between the various bodies dealing with health and wellbeing, and it took time to understand where these responsibilities lay. The overall control of health and wellbeing in the county lies with the County Council, but then there are several bodies within the Health Service that each have different responsibilities.
- 8.4 It would be fair comment that the Health Scrutiny Sub-Committee members have only recently come to understand this Council's role in health and wellbeing and how this ties in with the other organisations. It was for this reason that back in December 2014, the sub-committee Chairman made a request to Overview and Scrutiny that its report on the way forward for health scrutiny at this Council be delayed for a further six months. The sub-committee members also felt that this would have the advantage of allowing the new Council members time before taking on health scrutiny responsibility. However, this request was turned down by Overview and Scrutiny and it was instructed that the report should be delivered as originally agreed in March 2015.

 Health Scrutiny Sub-Committee – 24 February 2015		Agenda Item No. 5
Title	Health Scrutiny Sub-Committee Work Programme	
For further information about this report please contact	Lesley Dury, Committee Services Officer, 01926 456114 or committee@warwickdc.gov.uk	
Service Area	Democratic Services	
Wards of the District directly affected	N/A	
Is the report private and confidential and not for publication by virtue of a paragraph of schedule 12A of the Local Government Act 1972, following the Local Government (Access to Information) (Variation) Order 2006	No	
Date and meeting when issue was last considered and relevant minute number	15 December 2014	
Background Papers		

Contrary to the policy framework:	No
Contrary to the budgetary framework:	No
Key Decision?	No
Included within the Forward Plan? (If yes include reference number)	No

Officer/Councillor Approval		
With regard to officer approval all reports <i>must</i> be approved by the report authors relevant director, Finance, Legal Services and the relevant Portfolio Holder(s).		
Officer Approval	Date	Name
Relevant Director		
Chief Executive		
CMT		
Section 151 Officer		
Legal		
Finance		
Portfolio Holders		
Consultation Undertaken		
n/a		
Final Decision?		Yes
Suggested next steps (if not final decision please set out below)		

1. **Summary**

- 1.1 This report informs the Sub-Committee of its work programme for 2015/2016, appendix 1.

2. **Recommendations**

- 2.1 The report be noted; and
- 2.2 Any amendments suggested at the meeting, be made accordingly.

3. **Reasons for the Recommendation**

- 3.1 The work programme needs to be updated at each meeting to reflect the work load of the Sub-Committee.

4. **Alternative Options considered**

- 4.1 None.

5. **Budgetary Framework**

- 5.1 All work for the Sub-Committee has to be carried out within existing resources.

6. **Policy Framework**

- 6.1 The work carried out by the Sub-Committee helps the Council to improve in line with its priority to manage services openly efficiently and effectively.

7. **Background**

- 7.1 At each meeting, the Sub-Committee will consider their work programme and make amendments where necessary.
- 7.2 Overview & Scrutiny Committee may request that the Sub-Committee undertakes areas of health Scrutiny.
- 7.3 Officers may present reports to the Sub-Committee to seek direction on their content.
- 7.4 Warwickshire County Council, as the lead authority for Health Scrutiny, can ask the District Council to undertake areas of health scrutiny.

Health Scrutiny Sub-Committee
Work Programme 2015-2016

24 February 2015

Title	Where did item originate from	Format	Lead Officer	Next report date if applicable	Completion date
Warwick District Council Health Strategy update		Verbal Report	Rob Chapleo	Each meeting until published	
Review of HIWEB / HIWEB update		Report	Richard Hall / Rob Chapleo	HIWEB update each meeting	
Update from Councillor Kinson on the Warwickshire County Council Adult Social Care & Health O & S Committee		Verbal Report	Councillor Kinson	Each meeting	
Update from the Health & Wellbeing Lead on the Employee Smoking Policy following submission to the Employment Committee on 27 January 2015	Pre-scrutinised by the Health Scrutiny Sub-Committee on 15 December 2014	Verbal Report	Rob Chapleo	None	Completed

17 March 2015

Title	Where did item originate from	Format	Lead Officer	Next report date if applicable	Completion date
Warwick District Council Health Strategy update		Verbal Report	Rob Chapleo	Each meeting until published	
Review of HIWEB / HIWEB update		Report	Richard Hall / Rob Chapleo	HIWEB update each meeting	
Update from Councillor Kinson on the Warwickshire County Council Adult Social Care & Health O & S Committee		Verbal Report	Councillor Kinson	Each meeting	January
Update from the Chairman of Health Scrutiny Sub-Committee and the Head of Service, Health & Community Protection on the report submitted to O & S on 10 March re the future of Health Scrutiny at Warwick District Council	Report submitted by the Health Scrutiny Sub-Committee to O & S for approval at its 10 March 2015 meeting.	Verbal Report	Councillor Wreford-Bush / Richard Hall		

Future Meetings 2015

- Head of Housing & Property Services should give a report on the Housing Assessment Team, including Disabled Facilities Grants, in the New Year.
- A guest speaker should be invited to speak about the Care Quality Commission in the New Year.
- Air Quality in the District annual report – October 2015
- Half-yearly - update on any work being done to improve air quality – April 2015
- Report from the Housing Strategy and Development Officer (Ken Bruno) re standards this Council insists upon for its own housing stock in respect of health and wellbeing.
- Update from Councillor Mrs Knight on the SW Foundation Trust Quality Accounts T & F Group
- Use of S106/Community Infrastructure Levy (CIL) money for health issues (raised at meeting 15 December 2014)
- Report/action plan on the possibility of running a “Walking Scheme” within the District as per the details Councillor Mrs Knight sent to Rob Chapleo of a scheme in Reading, and to liaise with the walking experts at Coventry and Warwick Sports. (Raised 15 December 2014)

Warwickshire Child Poverty Strategy (2015-2018)

1st Draft

(February 2015)

This is the 1st draft of the Child Poverty Strategy. Consultees are invited to submit their comments to Bill Basra, Partnerships Delivery Manager via billbasra@warwickshire.gov.uk or 01926 412381 by 6th March 2015. After analysis of comments and subsequent revision a 2nd draft will be circulated in Mid March 2015.

FOREWORD

To be completed during preparation of 2nd draft. Overall ambition, themes and aspiration. To contain overview of poverty in Warwickshire (key stats) plus definitions of child poverty and the costs associated with Child Poverty.

CONTENTS

No.	Section	Page
1.	Introduction	4
2.	Vision, Approach, Priorities	5
3.	Priority 1: Jobs and Skills	8
4.	Priority 2: Early Intervention and Breaking the Cycle	10
5.	Priority 3: Financial Inclusion & Resilience	12
6.	Delivery, Review and Next Steps	14
7.	Further Information	15

1-Introduction

Nationally, The Child Poverty Act came into force in 2010 with the aim of eradicating Child Poverty by the end of 2020. In Summer 2014 the Government revised its approach to tackling Child Poverty over the next three years by seeking to focus on:

- Supporting Families into Work and increasing earnings
- Improving living standards
- Educational attainment

The underlying themes underpinning the Strategy are '**address poverty now and break the cycle of intergenerational poverty**'

Locally there is a requirement to have a multi agency child poverty strategy in place supported by a needs assessment. In Warwickshire a Strategy was adopted in 2011. This Revised Strategy seeks to build on developments since 2011 and refresh the approach in a manner that is:

- Aligned with current business objectives both internally within WCC and externally with key stakeholders and with major initiatives (such as the Priority Families Programme) where the links to poverty are obvious and there are resources that can be deployed.
- Underpinned by a Needs Assessment that is cognisant of the current climate and future trends.
- Focusses on a few key areas where a real difference can be made and value for money demonstrated.
- Genuine Multi Agency in its formulation, adoption and implementation.
- Measurable in terms of progress, impact and evaluation.

In refreshing the Strategy the time period of 2015-2018 has been chosen to overlap as far as possible with national direction (2014-2017) and local initiatives such as WCC One Organisational Plan (2014-2018), Health and Well-Being Strategy (2014-2018) and Priority Families Programme Phase 2 (2015-2018).

A Child Poverty Conference was held in September 2014 to establish the rationale, scope and parameters for the review. The remainder of this Strategy sets out how child poverty will be addressed in Warwickshire in relation to the following key priorities that were established at the Conference :

- Jobs and Skills
- Early Intervention and Breaking the Cycle of Poverty
- Financial Inclusion and Resilience

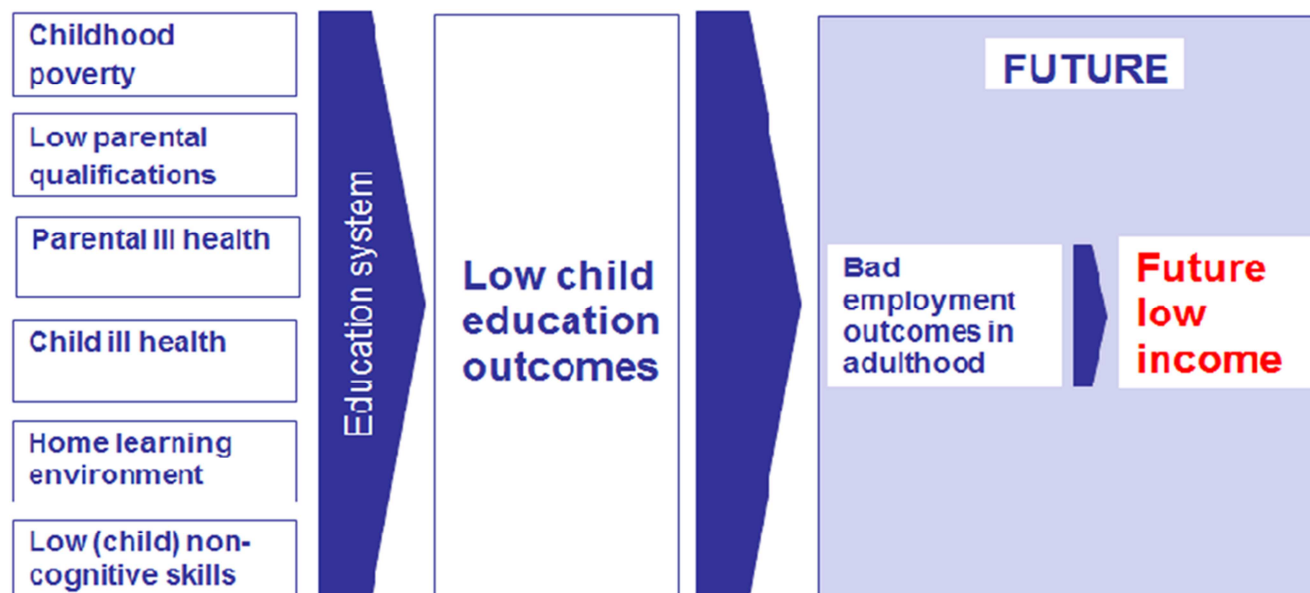
2-Vision, Approach and Priorities

Vision: To reduce and mitigate the effects of Child Poverty within Warwickshire by 2020 by addressing poverty now and breaking the cycle of poverty.

In 'Addressing Poverty Now' we will seek to work in a multi agency manner on those issues that are of immediate concern to children, young people and families. Many of these issues have been themes of the Warwickshire Financial Inclusion Partnerships and local Borough/District Partnerships and have focussed on areas such as:

- a) Debt Advice-information to be inserted after 1st draft consultation
- b) Money Management-information to be inserted after 1st draft consultation
- c) Affordable Credit-information to be inserted after 1st draft consultation
- d) Affordable Warmth-information to be inserted after 1st draft consultation
- e) Food Poverty-information to be inserted after 1st draft consultation
- f) Welfare Reform-information to be inserted after 1st draft consultation

In terms of Early Intervention and Breaking the Cycle of Poverty we will focus on the areas of education and health.



This diagram shows risks not destiny - not all children with these risk factors will go on to fail at school and great education can raise outcomes for disadvantaged children.

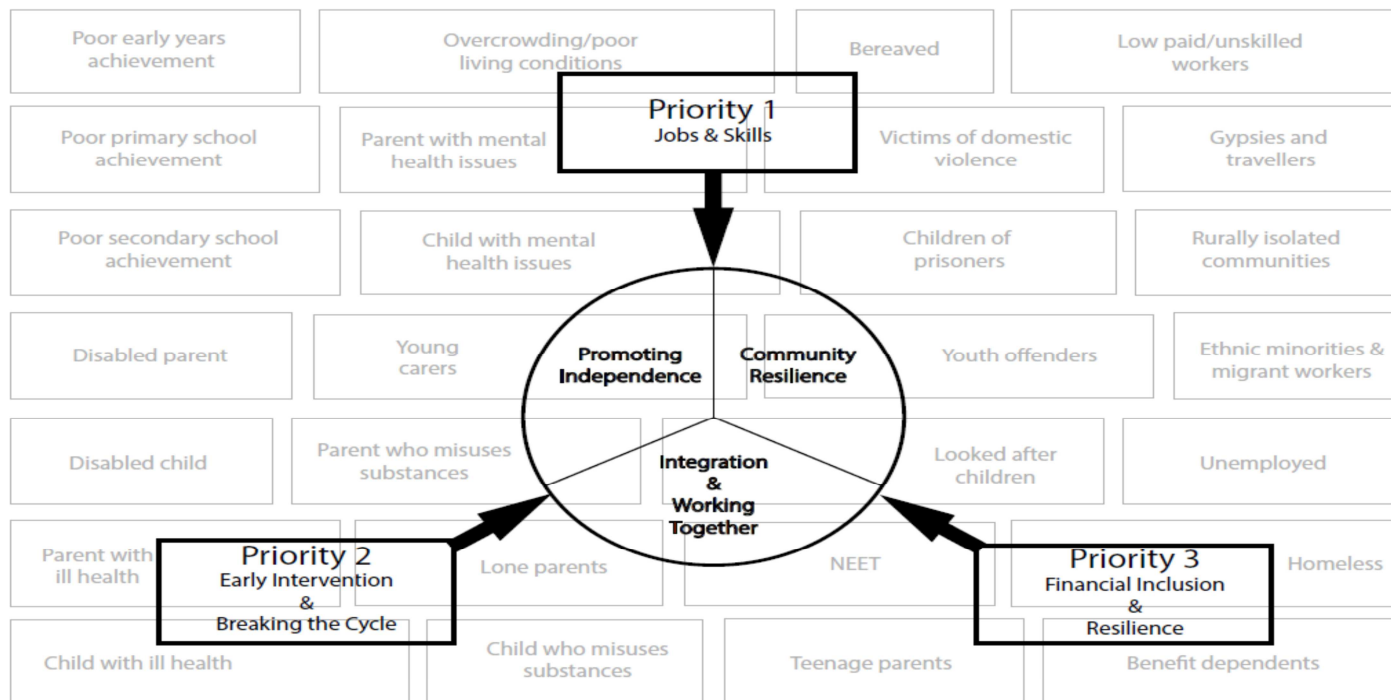
Approach:

In seeking to achieve our Vision and Priorities, we will have regard to the following agreed priorities of the Warwickshire Health and Well-Being Strategy:

- Promoting Independence
- Community Resilience
- Integration and Working Together

Warwickshire Approach to Child Poverty:

Vulnerable Groups at Risk of Child Poverty



3. Priority 1: Jobs and Skills

Where will Warwickshire be by 2020?

By 2020, Warwickshire will be a place where people who face the biggest barriers to employment will benefit from employment growth so that they can access jobs and have improved life chances for themselves, their family and wider community. A holistic package of measures will be available to target those areas and communities of interest where there is a 'no skills, low skills' culture and where entrenched and cyclical low aspiration is present.

Current Activities

INSERT HERE BULLET POINT LIST OF ACTIVITIES AND INITIATIVES LINKED TO OUTCOME ABOVE

What we will do (2015-2018)

- Targetted multi-agency interventions with agreed and identifiable geographic areas/communities of interest to ensure that they are either in employment or progressing towards employment
- Enhancing the IT, Numeracy and Literacy Skills amongst those geographic areas/communities of interest where such skills are currently low or non existent
- Ensure that commissioned Advice Services expand the current remit of financial inclusion to provide 'into employment' advice and guidance
- Empower Communities to establish the infrastructure for learning and employment support through targeted adult learning, jobs clubs and better matching between local demands and local needs.
- Commissioning and Evaluating the impact of commissioned services that seek to promote engagement and build aspiration within disadvantaged communities
- At a County level use the Skills for Employment Programme, work with key partnerships (CWLEP) and organisations such as the Chamber to promote the aspirations of the Strategy and identify what employer needs and demands to better ensure delivery. Working through HWBB to apply the learning from initiatives such as the Health at Work programme to reinforce the links between a healthy workforce and enhanced productivity

- At a local level consider a commitment amongst statutory providers to provide preferential consideration for vacancies from specific disadvantaged groups, geographic areas. Better co-ordination of inserting local employment conditions when granting planning permission.
- To work with our commissioned services and ensure that volunteering is viewed as a genuine pathway to skills and employment especially amongst disadvantaged groups.

How will we measure progress and success?

- % of children in low income families (workless or where family is claiming Working Tax Credit and earns less than 60% of median average)
- Proportion of 16-18 who are NEET
- Proportion of Care Leavers who are NEET
- % of Adults with Disabilities who are in employment or progressing towards employment
- % of people who use the volunteer pathway as a means towards sustained employment
- % of workless and low income parents/carers attending economic well being sessions (group or 1:1) delivered or supported in Children Centres that have gone on to find employment during the following year or have moved above the low income threshold

4. Priority 2: Early Intervention and Breaking the Cycle

Where will Warwickshire be by 2020?

By 2020, Warwickshire will be a place where significant inroads have been made to tackle poverty that is both entrenched in areas and intergenerational amongst certain families and disadvantaged communities. A focus on young people and families will lead to a holistic approach that encompasses schools, health and children centres.

Current Activities

INSERT HERE BULLET POINT LIST OF ACTIVITIES AND INITIATIVES LINKED TO OUTCOME ABOVE

What we will do (2015-2018)

- Narrowing the gap in educational attainment between those who come from disadvantaged backgrounds and those who do not. Reducing educational absence.
- Focussing on those Priority Families who are workless, or at risk of financial exclusion and young people who are at risk of worklessness
- Working with Schools to improve the positive destination prospects of those children who have physical and non-physical disabilities
- Working with communities to identify the assets and gaps that exist in their community in terms of early intervention and support particularly for its more isolated and vulnerable groups and individuals
- Empower Communities to establish the infrastructure for the wider determinants of educational attainment, positive family experiences and health and well being through the co-design and production of localised services that meet the needs of the community and ensure sustained resilience.
- Ensuring the future commissioned services are co-designed by statutory partners and the community with a focus on early intervention, schools engagement, parental support and sustained resilience through building the volunteer base from within the community.
- At a County level work with key partners and partnerships to promote the aspirations of the Strategy and identify solutions that maximise the amount of resources (and specifically Pupil Premium) available to schools to tackle the attainment gap and also the wider determinants that affect educational attainment with a focus on early years, health and well being.

- At a local level work with relevant schools, health settings and children centres to ensure that financial well-being issues are identified and referred at the earliest opportunity.
- To work with our commissioned services to ensure that appropriate partnerships are designed and delivered in those education, health and children centre settings where it is needed the most..

How will we measure progress and success?

- Reduction in attainment gap
- Reduced unauthorised educational absence
- Increased Take up of Free School Meals
- No of 2-3 Years olds accessing Early Years Provision
- No of Priority Families 'turned around'
- Reduction in ESA Claimants
- % of children from target groups who are identified and eligible for 'free' nursery education, that are claiming their funding.

5. Priority 3: Financial Inclusion and Resilience

Where will Warwickshire be by 2020?

By 2020, Warwickshire will be a place where statutory organisations work collaboratively with each other and with the voluntary and community sector to ensure that families have access to the advice, information and services that they need to both resolve their immediate needs and to ensure greater financial independence and resilience in the future.

Current Activities

INSERT HERE BULLET POINT LIST OF ACTIVITIES AND INITIATIVES LINKED TO OUTCOME ABOVE

What we will do (2015-2018)

- Ensure that there is an effective Advice Services that incorporates effective Debt Management and Prevention services throughout the County in a manner that is accessible and universal.
- Targeted Income Maximisation initiatives that ensure that our most vulnerable and disadvantaged groups can access their full entitlements through welfare and benefits advice
- Expansion of Financial Capability & Budgeting Support both as a preventative measure and those emerging from crisis to ensure that they are better equipped for the future in terms avoiding a return to crisis and also enhancing employability and the transition to Universal Credit
- Support People who are homeless or at risk of becoming homeless through activities aimed at prevention, thereby helping to reduce the demand on housing
- Working with communities to identify the assets and gaps that exist in their community in terms of financial inclusion and resilience and support particularly for its more isolated and vulnerable groups and individuals
- Empower Communities to establish the infrastructure for addressing financial inclusion in a manner that deals with crisis, immediate needs and builds greater independence and resilience. Themes to include Affordable Credit, Financial Literacy, Digital Literacy.
- Ensuring that future commissioned services are co-designed by statutory partners, the voluntary and community sector and local communities where there is a rationale and need for a targeted and localised approach for service delivery.

- At a County level, statutory partners to work together to discuss the potential for joint commissioning approaches that maximise resources, target activity where it is needed most and is evaluated at regular intervals to assess impact and effectiveness. Strengthen links between top debtors, welfare reform and the maintenance and sustaining of tenancies in relation to 'at risk groups'. There is also a need to strengthen the links between health and well being and poverty.
- At a local level, work with frontline staff to raise awareness of financial inclusion issues to ensure that appropriate signposting and referrals are made. To encourage 'triage' models of delivery wherever people are accessing services as a result of crisis and to work across partnerships to identify such points and premises from where such services can be delivered.
- To work with our commissioned services to identify innovative models of service delivery through co-location, outreach and peripatetic modes of delivery.

How will we measure progress and success?

- £ Debt Addressed
- £ Income Maximisation
- Reduced Reliance on Food Banks and WLWS
- Increase in Affordable Credit options
- PF Measures

6. Delivering the Strategy

TO BE COMPLETED DURING 2ND DRAFT AND FOLLOWING OUTCOMES OF CONSULTATION ON 1ST DRAFT. 3 YEAR STRATEGY TO BE UNDERPINNED BY ANNUAL DELIVERY PLAN.

SECTION TO COVER

GOVERNANCE, PERFORMANCE MANAGEMENT, RESOURCES

DELIVERY PLANNING, REVIEW, EVALUATION AND COMMUNICATION

7. Further Information

References, links and glossary of terms

Contacts for further information