

A meeting of the **OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING)** will be held in **CIVIC SUITE 0.1A, PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON, PE29 3TN** on **TUESDAY, 3 MARCH 2015** at **7:00 PM** and you are requested to attend for the transaction of the following business:-

**Contact
(01480)**

APOLOGIES

1. MINUTES (Pages 1 - 6)

To approve as a correct record the Minutes of the meeting of the Panel held on 3rd February 2015.

**A Roberts
388015**

2. MEMBERS' INTERESTS

To receive from Members declarations as to disclosable pecuniary and other interests in relation to any Agenda Item.

3. NOTICE OF KEY EXECUTIVE DECISIONS (Pages 7 - 10)

A copy of the current Notice of Key Executive Decisions, which was published on 11th February 2015, is attached. Members are invited to note the Plan and to comment as appropriate on any items contained therein.

**Democratic Services
388015**

4. MENTAL HEALTH UPDATE

Mr John Ellis (Commissioning and Contract Lead for Mental Health, Learning Disability and Substance Misuse, Cambridgeshire and Peterborough Clinical Commissioning Group), Dr Emma Tiffin (GP Clinical Lead for Mental Health, Cambridgeshire and Peterborough Clinical Commissioning Group) and Dr David Irwin (GP Mental Health Lead for the Huntingdonshire Local Commissioning Groups) will be in attendance to provide an update on mental health services.

**A Roberts
388015**

5. HINCHINGBROOKE HOSPITAL ACTION PLAN (Pages 11 - 20)

Hisham Abdel-Rahman, Chief Executive of Hinchingsbrooke Hospital, will present the Hospital's Action Plan.

**A Roberts
388015**

6. WORKPLAN STUDIES (Pages 21 - 22)

To consider the work programmes of the Economic and Environmental Well-Being Overview and Scrutiny Panels.

7. OVERVIEW AND SCRUTINY PROGRESS (Pages 23 - 28)

To consider a report on progress of the Panel's activities.

A Green

8. SCRUTINY

To scrutinise decisions taken since the last meeting as set out in the Decision Digest and to raise any other matters for scrutiny that sit within the remit of the Panel.

**Democratic Services
388015**

Dated this 3 day of March 2015



Head of Paid Service

Notes**1. Disclosable Pecuniary Interests**

- (1) *Members are required to declare any disclosable pecuniary interests and unless you have obtained dispensation, cannot discuss or vote on the matter at the meeting and must also leave the room whilst the matter is being debated or voted on.*
- (2) *A Member has a disclosable pecuniary interest if it -*
- (a) relates to you, or*
 - (b) is an interest of -*
 - (i) your spouse or civil partner; or*
 - (ii) a person with whom you are living as husband and wife; or*
 - (iii) a person with whom you are living as if you were civil partners*
- and you are aware that the other person has the interest.*
- (3) *Disclosable pecuniary interests includes -*
- (a) any employment or profession carried out for profit or gain;*
 - (b) any financial benefit received by the Member in respect of expenses incurred carrying out his or her duties as a Member (except from the Council);*
 - (c) any current contracts with the Council;*
 - (d) any beneficial interest in land/property within the Council's area;*
 - (e) any licence for a month or longer to occupy land in the Council's area;*
 - (f) any tenancy where the Council is landlord and the Member (or person in (2)(b) above) has a beneficial interest; or*
 - (g) a beneficial interest (above the specified level) in the shares of any body which has a place of business or land in the Council's area.*

Non-Statutory Disclosable Interests

- (4) *If a Member has a non-statutory disclosable interest then you are required to declare that interest, but may remain to discuss and vote providing you do not breach the overall Nolan principles.*
- (5) *A Member has a non-statutory disclosable interest where -*
- (a) a decision in relation to the business being considered might reasonably be regarded as affecting the well-being or financial standing of you or a member of your family or a person with whom you have a close association to a greater extent than it would affect the majority of the council tax payers, rate payers or inhabitants of the ward or electoral area for which you have been elected or otherwise of the authority's administrative area, or*

- (b) it relates to or is likely to affect a disclosable pecuniary interest, but in respect of a member of your family (other than specified in (2)(b) above) or a person with whom you have a close association, or
- (c) it relates to or is likely to affect any body –

- (i) exercising functions of a public nature; or
- (ii) directed to charitable purposes; or
- (iii) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union) of which you are a Member or in a position of control or management.

and that interest is not a disclosable pecuniary interest.

2. Filming, Photography and Recording at Council Meetings

The District Council supports the principles of openness and transparency in its decision making and permits filming, recording and the taking of photographs at its meetings that are open to the public. It also welcomes the use of social networking and micro-blogging websites (such as Twitter and Facebook) to communicate with people about what is happening at meetings. Arrangements for these activities should operate in accordance with guidelines agreed by the Council and available via the following link [filming, photography and recording at council meetings.pdf](#) or on request from the Democratic Services Team. The Council understands that some members of the public attending its meetings may not wish to be filmed. The Chairman of the meeting will facilitate this preference by ensuring that any such request not to be recorded is respected.

Please contact Democratic Services Team, Tel No. 01480 388008/e-mail Adam.Green@huntingdonshire.gov.uk if you have a general query on any Agenda Item, wish to tender your apologies for absence from the meeting, or would like information on any decision taken by the Committee/Panel.

Specific enquiries with regard to items on the Agenda should be directed towards the Contact Officer.

Members of the public are welcome to attend this meeting as observers except during consideration of confidential or exempt items of business.

Agenda and enclosures can be viewed on the District Council's website – www.huntingdonshire.gov.uk (under Councils and Democracy).

If you would like a translation of Agenda/Minutes/Reports or would like a large text version or an audio version please contact the Elections & Democratic Services Manager and we will try to accommodate your needs.

Emergency Procedure

In the event of the fire alarm being sounded and on the instruction of the Meeting Administrator, all attendees are requested to vacate the building via the closest emergency exit.

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Agenda Item 1

HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) held in Civic Suite 0.1A, Pathfinder House, St Mary's Street, Huntingdon, PE29 3TN on Tuesday, 3 February 2015.

PRESENT: Councillor S J Criswell – Chairman.

Councillors R C Carter, I J Curtis, M Francis, R Fuller, Mrs P A Jordan, P Kadewere, Mrs R E Mathews and Mrs D C Reynolds.

APOLOGIES: Apologies for absence from the meeting were submitted on behalf of Councillors K M Baker, A J Hardy and S M Van De Kerkhove.

80. MINUTES

The minutes of the meeting of the Panel held on 3rd February 2015 were approved as a correct record and signed by the Chairman.

81. MEMBERS INTERESTS

No declarations of interests were received.

82. NOTICE OF KEY EXECUTIVE DECISIONS

The Panel received and noted the current Notice of Key Executive Decisions (a copy of which is appended in the Minute Book) which had been prepared by the Executive Leader for the period 1st February to 30th June 2015.

83. CAMBRIDGESHIRE AND PETERBOROUGH CLINICAL COMMISSIONING GROUP

(a) HOSPITAL ACCOUNTABILITY

The Chairman welcomed Mr R Murphy, Local Chief Officer (Huntingdonshire System), Mr I Weller, Older People Programme Lead and Ms S Shuttlewood, Acting Director of Performance and Delivery, Cambridgeshire and Peterborough Clinical Commissioning Group, who had been invited to the meeting to deliver a presentation to Members on hospital accountability.

The Panel was informed of the ways in which hospitals were held accountable for the services they provided. The general context was as follows:

- ◆ non-foundation trust hospitals were accountable to the Trust Development Authority;
- ◆ foundation trust hospitals were accountable to Monitor;
- ◆ the Clinical Commissioning Group (CCG) was accountable to NHS England, and

- ◆ the Care Quality Commission (CQC) was accountable to the Secretary of State for Health.

The Panel discussed in detail recent events at Hinchingbrooke Hospital and whether evidence of the problems identified during the recent inspection by the CQC should have been reported on earlier by the CCG. Members were informed that deterioration in some areas had been detected in spring/summer 2014. The CCG reported these trends upwards and to the CCG and it was these reports that partly prompted the CQC inspection. The Panel questioned whether the CCG should have made elected Members aware of their concerns but it was pointed out that the CQC had significantly more resources than the CCG and was able to undertake intensive and detailed inspections. The CCG accepted the CQC's findings but was surprised by the severity of them. The CCG had no evidence that contradicted the CQC's findings.

In considering the future of the Hospital, the Panel was advised that it was now in special measures. It had been advised what steps it needed to take to improve services and it had been allocated significant levels of extra resources and support from relevant organizations to do this. There was already evidence that improvements had been made and the CQC was due to carry out a re-inspection. The view was expressed that future growth in the local population was likely to mean that a hospital facility would continue to be provided on the Hinchingbrooke site. This area was currently the 11th most challenged health system in the Country.

Having been acquainted with the way the CCG paid Hinchingbrooke Hospital, the Chairman thanked Mr Murphy, Mr Weller and Ms Shuttlewood for attending the meeting.

(b) PERFORMANCE

The Panel received a report by the Clinical Commissioning Group (a copy of which is appended in the Minute Book) containing data on the Hospital's performance against indicators collated by the CCG. Members were provided with a detailed explanation of those areas where performance was below the target and what steps were being taken to improve in these areas.

84. CHILDREN AND YOUNG PEOPLE THEMATIC GROUP

Ms S Tabbitt, Huntingdonshire Head of Localities and Partnerships, Ms S Stent, Principal of Huntingdonshire Regional College, and Ms G Hanby, Area Partnerships Manager, introduced a report (a copy of which is appended in the Minute Book) containing an update on the work of the Children and Young People Group. Members were advised that the County Council was under a statutory obligation to ensure work took place but there were no detailed requirements in terms of creating structures. The Group reported to the Children's Trust, but the Trust currently was the subject of a review.

The Panel was informed that the Group did not have a budget and so operated through partnership working. Its approach was to undertake joint planning to add value to existing services and it endeavored to avoid duplication. The Group took a pragmatic approach to selecting projects for inclusion in its plan. Projects were largely focused on the County Council but other suggestions were welcomed. The Panel agreed to consider this request at the Scrutiny Away Day.

It was noted that the Group's priorities were:

- ◆ Promoting emotional wellbeing and supporting young people with emerging mental health problems;
- ◆ Reducing the impact of Child Poverty in Hunts;
- ◆ Increasing employability of young people and reducing the number of young people who were Not in Education, Employment or Training;
- ◆ Increasing Awareness of Child Sexual Exploitation, and
- ◆ Supporting New Communities.

The Panel discussed the Group's work on NEETs. Particular attention was paid to the way NEETs were identified. Members requested data on local trends in comparison with those at regional and national levels. It was agreed that this information would be forwarded to Members after the meeting.

In response to a question by a Member, it was confirmed that the Group found its links with District Council representatives to be extremely valuable. Following further discussion, an undertaking was provided to submit further update reports to the Panel following Group meetings on a quarterly basis. The Panel would consider how it might have greater involvement in this area of work in the future.

The Panel noted that the Group made available small amounts of money to fund independent groups. Information on how to apply would be circulated to Members for distribution in their wards.

The Chairman thanked Ms Tabbitt, Ms Stent and Ms Hanby for their presentation.

85. HEALTH AND WELL-BEING THEMATIC GROUP

By means of a report by the Head of Leisure and Health (a copy of which is appended in the Minute Book) the Panel was informed of recent changes in the way the Health and Well-Being Thematic Group was organized and operated. The Head of Leisure and Health now was the Chairman of the Group. She had overseen a change to the Group's structure and to the way it worked. Analysis had been undertaken of the issues facing the District and priority areas had been identified, as follows:

- ◆ Excess Weight (including Obesity) – Children and Adults;
- ◆ Mental Health – Children and Adults, and
- ◆ Delivering Services for Older people to enable them to live independently, safely and well.

A Working Group had been established to progress this work. Like

the Children and Young People Group, the intention was to add value to existing services and to avoid duplication. Work was co-ordinated by the Head of Leisure and Health.

The Panel suggested that the Group should take care to ensure all local voluntary groups were factored into the services to be provided by the Uniting Care Partnership. Although the Chief Executive of the Hunts Forum of Voluntary Organizations was the Vice-Chairman of the Group, it was pointed out that not all voluntary organizations were affiliated to the Forum.

It was reported that the Council was reviewing all its involvement in Partnership working. Once this work was complete, a report would be submitted to the Panel.

86. REVIEW OF SAFER HOMES SCHEME FUNDING

Consideration was given to a report by the Housing Strategy Manager (a copy of which is appended in the Minute Book) containing analysis of options for the future of the Safer Homes Scheme. Members were informed that it was likely that the Safer Homes Scheme had an important role in reducing demand for Disabled Facilities Grants, which were significantly more costly and so could have a beneficial effect on the Council's overall budget position. Members questioned whether this effect might be extended by at least maintaining the current level of funding but it was accepted that there currently was no evidence to support this. The Panel, therefore, recommended the Cabinet to commission jointly with partners a new countywide service and to review the District Council's funding position during 2016/17 to consider whether to continue with the funding after the end of the contract. The District Council's investment in 2015/16 would be £25k and £10.4k from 2016/17 onwards. The timing of the review would give the Council the opportunity to collate the necessary evidence and to identify alternatives.

RESOLVED

that the Cabinet be recommended to approve Option 2 contained in the report now submitted.

87. PERFORMANCE MONITORING

By way of a report by the Policy and Performance Manager (a copy of which is appended in the Minute Book) the Panel was updated on progress achieved against key activities identified under the Working with Our Communities strategic theme in the Council's Corporate Plan over the period 1st October to 31st December 2014.

The Panel noted that the review of the Council's partnerships was likely to take longer than expected but Members did not otherwise identify any issues with performance that it considered needed to be brought to the attention of the Cabinet. They, however, reiterated the point that the allocation of indicators between the Panels needed to be reviewed to make them consistent with their remits. It was suggested that the Corporate Plan Working Group should be involved in this process.

The Panel's attention was drawn to the fact that recycling or composting rates had remained consistent despite a reduction in compostable waste being collected during winter months. Members agreed that this positive trend should be recognized.

88. CAMBRIDGESHIRE HEALTH COMMITTEE

The Panel received and noted the Cambridgeshire Health Committee Decision Statement for the meeting held on 11th December 2015 (a copy of which is appended in the Minute Book). It was agreed to invite the Uniting Care Partnership to the meeting in June to discuss its approach to the provision of older people's healthcare and adult community services in Huntingdonshire.

89. WORKPLAN STUDIES

The Panel received and noted a report (a copy of which is appended in the Minute Book) which contained details of studies being undertaken by the Overview and Scrutiny Panels for Economic Well-Being and Environmental Well-Being.

90. OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL BEING PANEL) - PROGRESS

With the aid of a report (a copy of which is appended in the Minute Book) the Panel reviewed the progress of its activities since the last meeting. The Chairman advised Members that the public would be invited to submit questions to be asked during the item at the next meeting on Hinchingsbrooke Hospital.

Following a suggestion by Chief Inspector Laura Hunt, Area Commander – Huntingdonshire, that closer working should take place between the Police and Councillors, it was agreed that the Chairman and Vice-Chairman should meet with Chief Inspector Hunt to look at ways this might be taken forward.

91. SCRUTINY

The 152nd edition of the Decision Digest was received and noted.

Chairman

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5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings
6. Information which reveals that the Authority proposes:-
 - (a) To give under any announcement a notice under or by virtue of which requirements are imposed on a person; or
 - (b) To make an Order or Direction under any enactment
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

Huntingdonshire District Council
 Pathfinder House
 St Mary's Street
 Huntingdon PE29 3TN.

Notes:- (i) Additions changes from the previous Forward Plan are annotated ***
 (ii) Part II confidential items which will be considered in private are annotated ## and shown in italic.

Subject/Matter for Decision	Decision/ recommendation to be made by	Date decision to be taken	Documents Available	How relevant Officer can be contacted	Reasons for the report to be considered in private.	Relevant Executive Councillor	Relevant Overview & Scrutiny Panel
Pathfinder House - Third Floor Lettings***##	Cabinet	19 Mar 2015		Bill Tilah, Estates, Tel No 01480 387086 or email Bill.Tilah@huntingdonshire.gov.uk	This item is confidential by virtue of paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972.	J A Gray	Economic Well-Being
Software Contract for Housing Needs Services - Re-tender***	Cabinet	19 Mar 2015		Jon Collen, Housing Needs and Resources Manager Tel No. 01480 388220 or email Jon.Collen@huntingdonshire.gov.uk		B S Chapman	Social Well-Being
ECML Crossing Closures	Cabinet	19 Mar 2015		Stuart Bell, Transportation Team Leader Tel No 01480 388387or email Stuart.Bell@huntingdonshire.gov.uk		D B Dew	Environmental Well-Being

Subject/Matter for Decision	Decision/ recommendation to be made by	Date decision to be taken	Documents Available	How relevant Officer can be contacted	Reasons for the report to be considered in private	Relevant Executive Councillor	Relevant Overview & Scrutiny Panel
Estate Strategy##	Cabinet	23 Apr 2015		Colin Luscombe, Estates Strategic Assessment Tel No 01480 387086 or email Colin.Luscombe@huntingdonshire.gov.uk		J A Gray	Economic Well-Being
Huntingdonshire Design Guide Supplementary Planning Document	Cabinet	23 Apr 2015	Draft Supplementary Planning Document	Paul Bland, Planning Service Manager (Policy) Tel No. 01480 388430 or email Paul.Bland@huntingdonshire.gov.uk		D B Dew	Environmental Well-Being
A14 Joint Local Impact Report, Statement of Common Ground and Environmental Impact Assessment matters	Cabinet	18 Jun 2015	Environmental Impact Assessment	Paul Bland, Planning Service Manager (Policy) Tel No 01480 388430 or email Paul.Bland@huntingdonshire.gov.uk		D B Dew	Environmental Well-Being
Huntingdonshire Infrastructure Business Plan	Cabinet	18 Jun 2015	Draft Infrastructure Plan	Paul Bland, Planning Service Manager (Policy) Tel No. 01480 388430 or email Paul.Bland@huntingdonshire.gov.uk		D B Dew	Environmental Well-Being
Local Plan to 2036 - Proposed Submission	Cabinet	18 Jun 2015	Submission - Draft Local Plan	Paul Bland, Planning Service Manager (Policy) Tel No. 01480 388430 or email Paul.Bland@huntingdonshire.gov.uk		D B Dew	Environmental Well-Being

Subject/Matter for Decision	Decision/ recommendation to be made by	Date decision to be taken	Documents Available	How relevant Officer can be contacted	Reasons for the report to be considered in private	Relevant Executive Councillor	Relevant Overview & Scrutiny Panel
Home Improvement Agency - Annual Report***	Cabinet	16 Jul 2015		Trish Reed, Housing Strategy Manager Tel No. 01480 388203 or email Trish.Reed@huntingdonshire.gov.uk		D B Dew	Social Well-Being
CPE - Civil Parking Enforcements	Cabinet			Eric Kendall, Head of Operations Tel No. 01480 388635 or email Eric.Kendal@huntingdonshire.gov.uk		R B Howe	Environmental Well-Being

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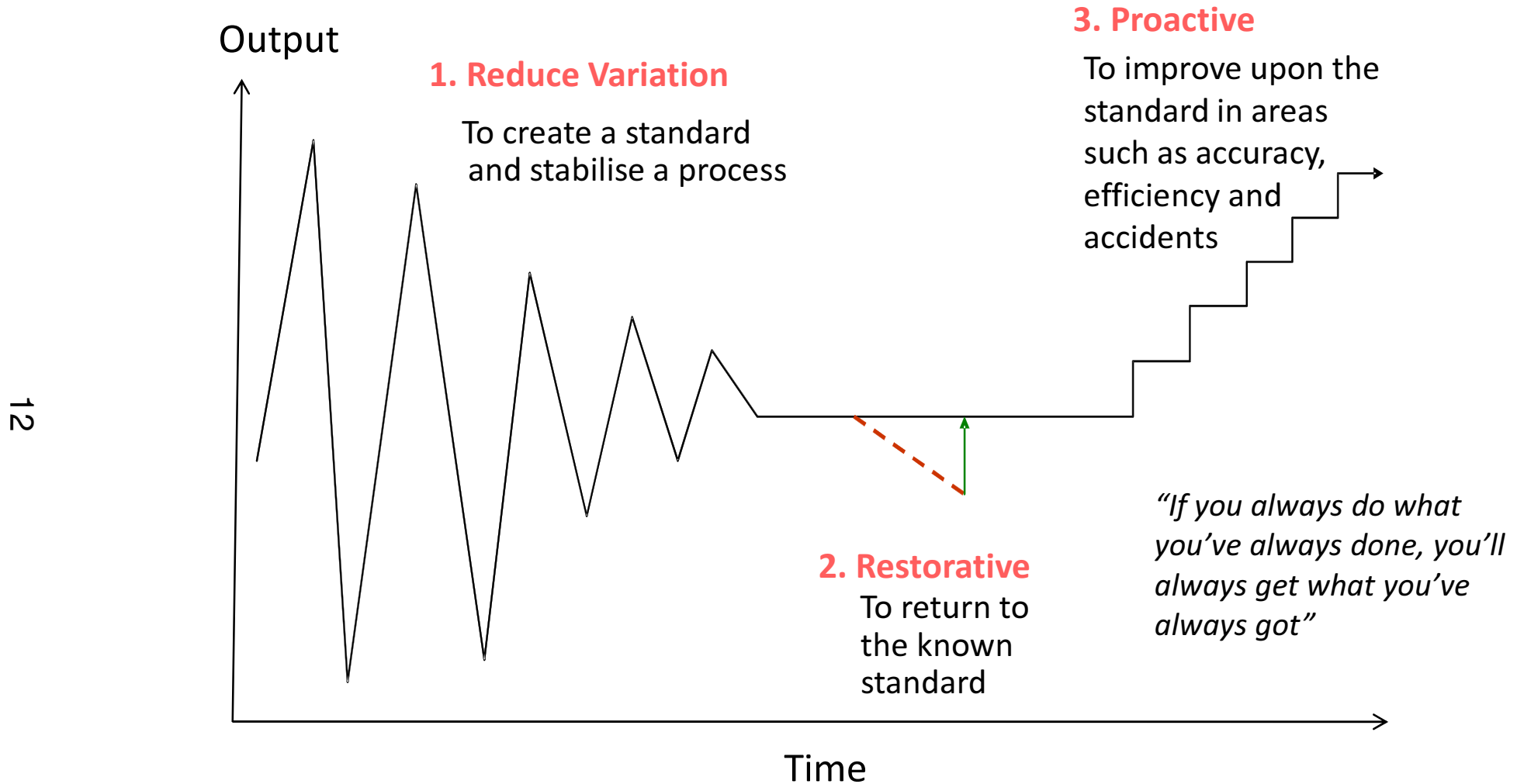
CQC Presentation

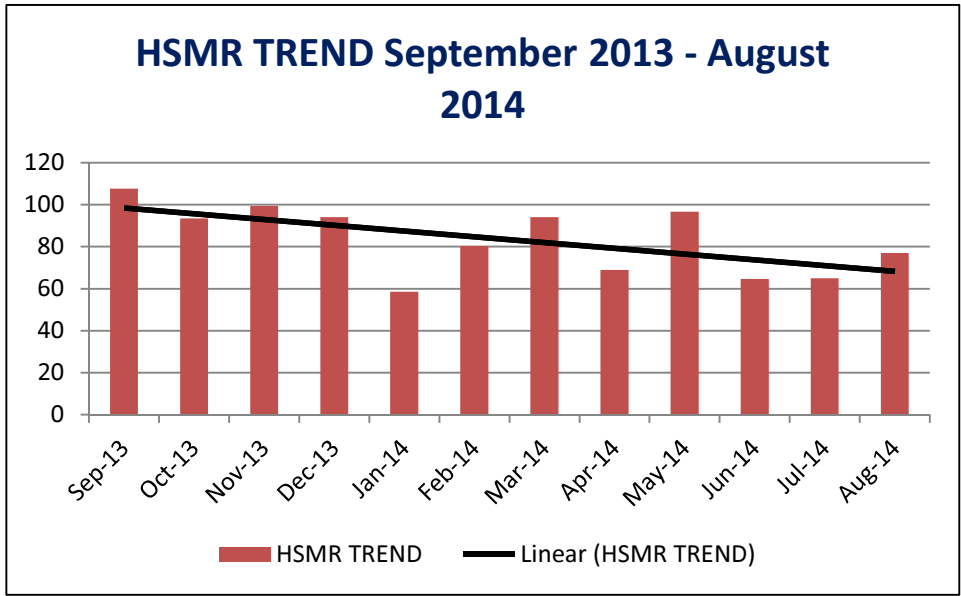
Huntingdonshire District Council Overview and Scrutiny Panel (Social Well-Being)

3 March 2015



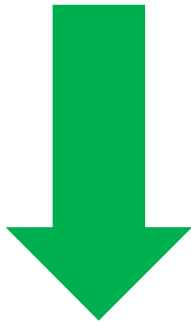
Realistic view of an improvement journey...





CQC Intelligent monitoring report

MONTH	HHCT RISK SCORE
Dec-14	7/186
Jul-14	3/186
Mar-14	3/182



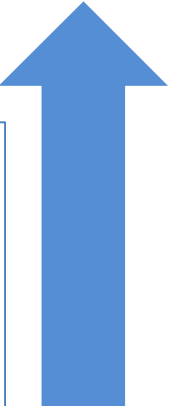
HSMR TREND
 Down from 107.69 (Sept 13) at its highest point to 76.95 (Aug 14)
 Full Period 83.01



94.4% achievement of 4-hour waiting time target April 14 – Oct 14

Incident reporting to NRLS
 99.5% in **NO/LOW HARM OR NEAR MISS** categories
 ZERO "Never Events"
 Low level SIs

ZERO hospital-acquired MRSA infections



Patient experience
Friends and Family Oct 2014:
 >96% of 1964 recommend HHCT

A&E Patient Survey 2014
 9/10 for respect and dignity

National Cancer Survey 2014
 94% rated CARE 'EXCELLENT' OR 'VERY GOOD'



On target to reduce Hospital acquired Pressure Ulcers by 50% by April 2015

Hinchingbrooke Hospital: Ratings Grid

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	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & emergency services	Inadequate	Inspected but not rated ¹	Requires improvement	Requires improvement	Inadequate	Inadequate
Medical care	Inadequate	Inadequate	Inadequate	Requires improvement	Inadequate	Inadequate
Surgery	Requires improvement	Requires improvement	Inadequate	Good	Requires improvement	Requires improvement
Critical care	Good	Good	Good	Good	Good	Good
Maternity & gynaecology	Good	Good	Good	Good	Good	Good
End of life care	Requires improvement	Requires improvement	Good	Good	Good	Requires improvement
Outpatients & diagnostic imaging	Good	Inspected but not rated ¹	Good	Good	Good	Good
Overall	Inadequate	Requires improvement	Inadequate	Requires improvement	Inadequate	Inadequate

CQC REPORT

Areas of Concern

A&E, Medicine, Surgery, End of Life

Good Practice

- Meeting RTT targets
- Evidence of good Multi Disciplinary Working
- A&E generally meeting 4 Hour Target
- Positive action in reduction of falls with harm
- Appropriate escalation of the deteriorating patient
- Low readmission rates
- Low incidents of pressure sores
- Good use of 5 steps to safer surgery checklist
- Access to specialist nurse advise
- Introduction of 999 Club in A&E

Recommendations

- Paediatric Staffing not in line with national guidance
- Medication not securely stored in some areas
- Some issues with dignity and respect and awareness of delirium, mental capacity and deprivation of liberty
- Poor practice around pressure areas and cannula care and inconsistencies around infection control practices.
- Poor response at times to call bells particularly at night
- Care records not always reflection of patient needs

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Hinchingbrooke Health Care 

NHS Trust

CQC REPORT

Positive Feedback

Outpatients, Critical Care and Maternity

Good Practice

- Patients treated with compassion, dignity and respect in Outpatients,
- relatives and patients in Critical Care felt that their individual needs were being met
- Maternity had committed staff that ensured a quality service.
- All areas had competent staff available who implemented and used national guidance
- Outpatient and Maternity showed evidence of learning from incidents
- Critical Care had a good use of audits and complaints to improve care

Recommendations

- Outpatients and Maternity had minor issues with medicines storage
- Some Outpatient Clinics could have been more child friendly
- The environment in Critical Care could lead to poorer patient experience
- Critical Care had at times, Capacity Issues at times which sometimes led to the ability to discharge in a timely manner



Quality Improvement Plan

The CQC Inspection originally identified:

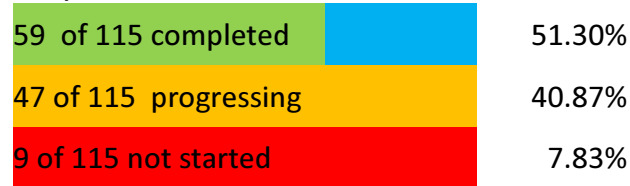
- 7 Compliance Actions
- 21 Must Dos
- 12 Should Dos

Progress against seven compliance actions

17

27-Feb-15

Compliance and Must do Actions



Should do Actions



Forecasts - 6 Months
(up to end of July)

Compliance and Must do Actions

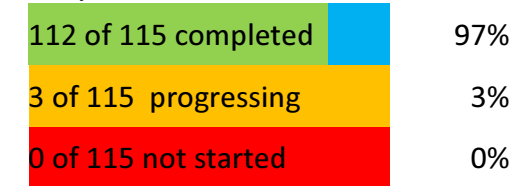


Should do Actions



Forecasts - 9 Months
(up to end of October)

Compliance and Must do Actions



Should do Actions



Making Recovery Sustainable

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Fit for purpose nursing workforce
Maintaining agreed standards of care
Engaging patients at all levels



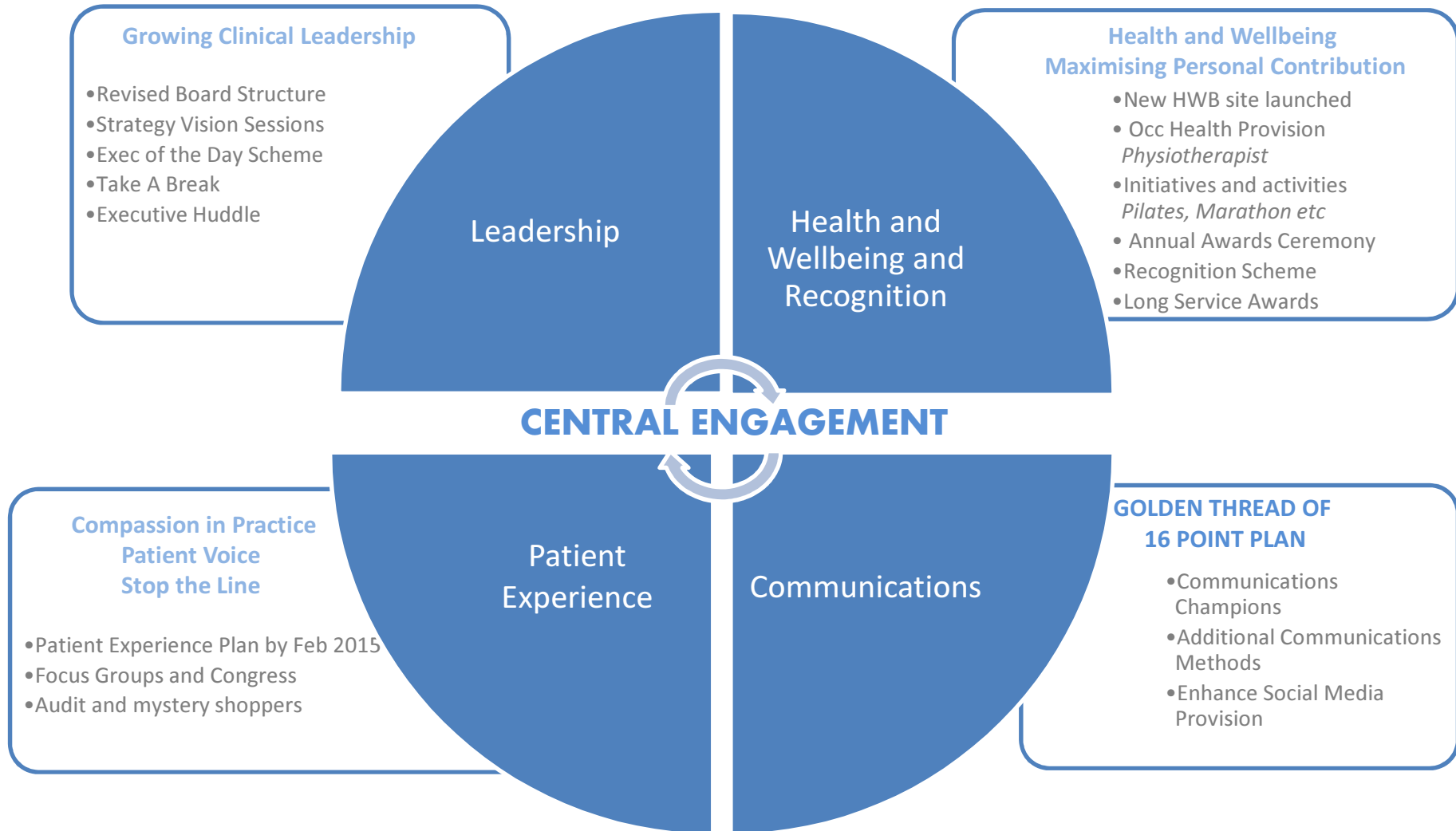
Embedding the engagement strategy
Hinchingbrooke employment brand
Ward to Board career and personal development

Changing clinical practice
Adhering to best practice
Creating middle management capability

Robust:
Business Plan
Contract negotiation and management
Cost reduction process



ENGAGEMENT



We continue to Strive to become a Top 10 District General Hospital



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Hinchingbrooke Health Care



NHS Trust

CURRENT ACTIVITIES

STUDY	OBJECTIVES	PANEL	STATUS
Flood Prevention within the District	To investigate flood prevention arrangements in the District and the impact of flooding on associated local policy developments.	Environmental Well-Being	Representatives from the Environment Agency delivered a presentation on flood risk management within Huntingdonshire. A scoping report was considered by the Panel in April 2014 and a Working Group was appointed. The Chief Executive and Clerk to the Middle Level Commissioners delivered a presentation to the Panel's June 2014 meeting to outline their role with flood alleviation in the District. Meeting of the Working Group will be arranged shortly to consider the draft Cambridgeshire Flooding and Water SPD .
Waste Collection Policies	To assist the Head of Operations and Executive Member for Operations & Environment with reviewing waste collection policies in relation to the collection points for wheeled bins/sacks and remote properties (farms and lodges).	Environmental Well-Being	First meeting of Working Group held on 24 th June 2014. Further meeting to be arranged to consider the outcome of the survey work being undertaken by the Operations Division on affected properties and various other matters.
Litter Policies and Practices (to include graffiti removal)	To consider and make recommendations on future litter and graffiti service scope and standards and on public appetite for changes.	Environmental Well-Being	Scoping report received. Working Group appointed.
Project Management	To be agreed in December.	Economic-Well Being	Following the Panel's discussion on the Project Closure reports for the Huntingdon Multi-Storey Car Park and One Leisure, St Ives, the Panel has agreed to establish a Select Committee in February 2015 to give further consideration to the issues emerging from the report, to seek assurances that improvements had been made to Council processes moving forward and to test the robustness of the Council's approach. Representatives from the Social and Environmental Well-Being Panels have also been appointed. The Terms of Reference for this Committee were

			<p>considered at the Panel's December meeting. The Select Committee met in advance of their January meeting to discuss the scope of the Select Committee.</p> <p>Select Committee held on 17th February 2015.</p>
Facing the Future	Ongoing monitoring role of financial implications of Facing the Future for the Medium Term Financial Strategy.	Economic Well-Being	The Panel has received two updates on progress with the delivery of the Facing the Future programme. Financial information will be presented to Members in February / March 2015.

Panel Date	Decision	Action	Response	Date for Future Action
	<p><u>Hinchingbrooke Hospital</u></p> <p>(a) Management of the Hospital</p> <p>1/04/14 With effect from 1st February 2012, Circle took over the management of Hinchingbrooke Hospital and representatives of Circle and the Hospital have since attended the Panel's meeting on an annual basis to provide updates.</p> <p>4/11/14 Requested sight of the report of the September 2014 CQC inspection</p> <p>Requested plan to inform future health scrutiny.</p> <p>6/01/15 Scoping report on potential work on the health economy. Further reports requested:</p> <ul style="list-style-type: none"> • on the current state of Neighbourhood Planning within the Council and how it was likely to develop and how it might promote community resilience; • on community engagement, including examples of good practice; • on the impact of Welfare Reforms, including fuel poverty and how it was defined; • reviewing the Council's Equalities Impact Assessment arrangements, and • on the impact of growth on GP surgeries, school places and hospital capacity. 	<p>Link to report circulated directly to Members.</p>	<p>Hisham Abdel-Rahman, CEO, to report on Hinchingbrooke Hospital Action Plan. See item elsewhere on the Agenda.</p> <p>Ruth Rogers, Chair, to report on the work of Healthwatch Cambridgeshire.</p>	<p>3/03/15</p> <p>7/4/15</p>

Panel Date	Decision	Action	Response	Date for Future Action
<p>4/02/14</p> <p>3/2/15</p>	<p>(b) Financial and Operational Performance</p> <p>Presentation received from Mr R Murphy and Mr K Poyntz, representatives of Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) on the financial and operational performance of the Hospital. Agreed at the February 2014 meeting that some focus should be placed upon monitoring CCG's performance.</p> <p>Presentation received from Mr R Murphy, Mr K Poyntz and Ms S Shuttlewood on hospital accountability. Discussed recent CQC report on the Hospital and CCG monitoring.</p>	<p>Reports to be presented to the Panel every six months.</p>		
<p>4/12/12 & 4/03/14</p> <p>10/06/14</p> <p>4/11/14</p>	<p><u>Delivery of Advisory Services Within the District</u></p> <p>The Voluntary Sector Working Group comprises Councillors R C Carter, Mrs P A Jordan, P Kadewere and Mrs R E Mathews</p> <p>Annual performance report presented. Councillors also appointed to the Working Group.</p> <p>Councillor R C Carter to contact the Community Manager to begin discussions on funding arrangements for the final year of the Voluntary sector agreements.</p>			

Panel Date	Decision	Action	Response	Date for Future Action
<p>7/01/14</p> <p>10/06/14 & 8/07/14</p> <p>4/11/14</p>	<p><u>Redesign of Mental Health Services</u></p> <p>Representatives of Cambridgeshire and Peterborough Clinical Commissioning Group (C&P CCG) updated Panel on redesign of mental health services. Suggestion made to invite representatives of the service user group to a future meeting together with other relevant groups such as Hunts Mind.</p> <p>Representatives from the Mental Health Service User Network (SUN) and Mind in Cambridgeshire attended Panel's meeting. Delivered an insight into the impact of the redesign on mental health service users and on planned changes to the Personality Disorder Community Service/Complex Cases Service, including Lifeworks.</p> <p>Further update requested on Mental Health Services.</p>		<p>See item elsewhere on the Agenda.</p>	<p>3/03/15</p>
<p>4/06/13</p>	<p><u>Review of Elderly Patient Care at Hinchingsbrooke Hospital</u></p> <p>Working Group appointed comprising Councillors S J Criswell, Mrs P A Jordan, P Kadewere and Mrs R E Mathews to undertake a review of elderly patient care at Hinchingsbrooke Hospital. The study will be undertaken in conjunction with the Hospital.</p> <p>Oral report on recent Working Group meeting with the Hospital.</p>	<p>Meetings held on 18th July and 11th November 2013 and 24th February 2014.</p>		

Panel Date	Decision	Action	Response	Date for Future Action
<p>4/03/14</p> <p>4/11/14</p> <p>9/2/14</p>	<p><u>Affordable Housing</u></p> <p>Councillors R Fuller, P Kadewere and S M Van De Kerkhove appointed onto a Working Group to carry out the study, together with former Panel Member Councillor I C Curtis.</p> <p>Formal update reported to the Panel. Findings to date and study programme endorsed.</p> <p>Working Group meeting held to discuss Community Land Trusts and rural affordable housing development.</p>	<p>First meeting held on 22nd July 2014 to scope out the work.</p> <p>Second meeting held on 23rd September 2014 on the new Local Plan. Executive Councillor present.</p>	<p>Terms of Reference agreed and further actions identified.</p> <p>Terms for draft policies for the new Local Plan discussed and recommendations made.</p> <p>Next meeting to be held to review:</p> <ul style="list-style-type: none"> • Rural housing programme – past and future • Community Land Trust model • Ways to increase awareness / take up • Work of Foundation East 	
	<p><u>Huntingdonshire Strategic Partnership (HSP)</u></p> <p>Huntingdonshire Community Safety Partnership</p> <p>Annual review of the work of the Partnership.</p>		<p>The Panel considered the Annual report at the meeting on 7th October 2014.</p>	

Panel Date	Decision	Action	Response	Date for Future Action
3/02/15	<p>Children and Young People</p> <p>Details of the thematic group's priorities received together with details of its terms of reference, membership and current matters being discussed.</p> <p>Presentation received. Agreed to receive reports of meetings to monitor progress.</p>	<p>The Group meets four times per year in January, March, June and October.</p>	<p>Reports to be submitted to the ensuing Panel meeting.</p>	
3/02/15	<p>Health and Well-Being</p> <p>Background information received on the thematic group's outcomes, terms of reference, membership and Action Plan.</p>	<p>Invitation extended to the Chairman and Vice-Chair to attend a future meeting.</p>		

ACTION LOG

(Requests for information/other actions other than those covered within the Progress Report)

<u>Date of Request</u>	<u>Description</u>	<u>Response</u>
	<p>Chairman and Vice-Chairman met with Chief Inspector Hunt to discuss closer working between the Police and Councillors.</p>	

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