

MEETING OF THE

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

ON

MONDAY 29 JULY 2013

AT

7PM

AGENDA

Civic Offices Shute End Wokingham Berkshire

Andy Couldrick Chief Executive The Health Overview and Scrutiny Committee aims to focus on:

- The promotion of public health and patient care
- The needs and interests of Wokingham Borough
- The performance of local NHS Trusts

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To: The Chairman and Members of the Health Overview and Scrutiny Committee

A Meeting of the **HEALTH OVERVIEW AND SCRUTINY COMMITTEE** will be held at the Civic Offices, Shute End, Wokingham on **Monday 29 July 2013** at **7pm**

Andy Couldrick Chief Executive 19 July 2013

Members:- Tim Holton (Chairman), Kate Haines (Vice Chairman), Andrew Bradley, Kay Gilder, Philip Houldsworth, Ken Miall, Sam Rahmouni, Nick Ray, David Sleight and Wayne Smith

Substitute Members: Lindsay Ferris, Ian Pittock, Malcolm Richards, Rachelle Shepherd-DuBey, Lesley Hayward

ITEM NO.	WARD	SUBJECT	PAGE NO.
1.00	None Specific	MINUTES To confirm the Minutes of the Meeting of the Committee held on 26 March 2013.	1-9
2.00	None Specific	APOLOGIES To receive any apologies for absence	
3.00		DECLARATIONS OF INTEREST To receive any declarations of interest	
4.00		PUBLIC QUESTION TIME To answer any public questions	
		The Council welcomes questions from members of the	

public about the work of this Committee

Subject to meeting certain timescales, questions can relate to general issues concerned with the work of the Committee or an item which is on the Agenda for this meeting. For full details of the procedure for submitting questions please contact Democratic Services on the numbers listed below or go to www.wokingham.gov.uk/publicquestions

Explanatory leaflets are also available in the Civic Offices and Libraries.

5.00		MEMBER QUESTION TIME To answer any member questions	
6.00	None Specific	UPDATE FROM HEALTH AND WELLBEING BOARD To receive an update on the work of the Health and Wellbeing Board.	- 15 mins
7.00	None Specific	NHS ENGLAND	To
		To receive an update on the role and responsibilities of NHS England and the way in which it commissions services for the Wokingham Borough.	follow 20 mins
8.00	None Specific	DISCHARGE OF PATIENTS FROM HOSPITAL AND ROYAL BERKSHIRE HOSPITAL TRANSPORT SERVICE To receive an update on issues relating to the discharging of patients from hospital and the Royal Berkshire Hospital transport service.	To follow 20 mins
9.00	None Specific	CARE QUALITY COMMISSION To receive an update in relation to the work of the Care Quality Commission within the Wokingham Borough.	10-20 20 mins
10.00	None Specific	HEALTHWATCH UPDATE To receive an update on the work of Healthwatch Wokingham Borough.	21-24 15 mins
11.00	None Specific	WOKINGHAM CLINICAL COMMISSIONING GROUP	25-31
		PERFORMANCE OUTCOMES REPORT JUNE 2013 To receive the Wokingham Clinical Commissioning Group Performance Outcomes Report June 2013.	15 mins
12.00	None Specific	UPDATE ON ADULT SOCIAL CARE TASK AND FINISH GROUP FINAL REPORT To receive an update on the Adult Social Care Task and Finish Group Final Report.	32-34 <i>5 mins</i>
13.00	None Specific	HEALTH CONSULTATIONS To consider the current "live" health consultations set	35-38 15 mins

out in the report.

14.00 None Specific WORK PROGRAMME 2013/14 39-53

To consider the Work Programme 2013/14 10 mins

15.00 ANY OTHER ITEMS WHICH THE CHAIRMAN

DECIDES ARE URGENT

A Supplementary Agenda will be issued by the Chief Executive if there are any other items to consider under

this heading

This is an agenda for a meeting of the Health Overview and Scrutiny Committee

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MINUTES OF A MEETING OF THE HEALTH OVERVIEW AND SCRUTINY COMMITTEE HELD ON TUESDAY 26 MARCH 2013 FROM 7PM TO 9.35PM

Present: Tim Holton (Chairman), UllaKarin Clark (Vice Chairman), Andrew Bradley, Kay Gilder, Kate Haines, Philip Houldsworth, Sam Rahmouni, Nick Ray and Malcolm Richards

Also present

James Burgess Senior Manager Commissioning (Items 71-77)

Christine Holland LINk Steering Group (Items 71-80)

Karen Jackson Head of Adult Social Care Statutory Services (Items 71-77)

Tony Lloyd LINk Steering Group (Items 71-80)

Madeleine Shopland Principal Democratic Services Officer

Nicola Strudley Help and Care (Items 71-80)

Mike Wooldridge Development and Improvement Team Manager (Items 71-78)

PART I

71. MINUTES

The Minutes of the meeting of the Committee held on 22 January 2013 were confirmed as a correct record subject to the following amendments and were signed by the Chairman.

- Minute 64 Maintaining and Improving Quality during Transition Berkshire PCT Cluster Quality Handover Document Version 3 January 2013. Include 'Members noted that not all the MP's for Berkshire had been listed in the document and asked that they be included'
- Minute 65. Public Health Transition Progress Report 'In reason to read 'In response'

Kate Haines asked that an update be sought regarding whether disabled parking near the Pre Operation Assessment building at the Royal Berkshire Hospital would be improved as there were currently only 5 disabled parking bays in the vicinity.

72. APOLOGIES

Apologies for absence were submitted from Councillors David Sleight (substituted by Malcolm Richards) and Wayne Smith and David Cahill, Locality Director Wokingham, Berkshire Healthcare Foundation Trust.

73. DECLARATIONS OF INTEREST

Andrew Bradley declared a personal interest in item 77 Lord Harris Court update as he was a Mason.

-- Philip Houldsworth declared a personal interest in item 77 Lord, Harris Court update as he was a Mason.

Sam Rahmouni declared a personal interest in item 77 Lord Harris Court update as he was a Mason.

74. PUBLIC QUESTION TIME

There were no public questions

75. MEMBER QUESTION TIME

There were no Member questions

76. HEALTHWATCH

Nicola Strudley, Help and Care provided a presentation on the new Healthwatch Wokingham Borough.

During the discussion of this item the following points were made:

- From 1 April 2013 Healthwatch would be the new consumer champion for health and social care. It would exist in two distinct forms – local Healthwatch, at local level, and Healthwatch England, at national level.
- Healthwatch would enable the public to share their concerns and views about the local local health and social care services. It would also give evidence-based feedback to service commissioners and providers to help influence and challenge. Information regarding local services and how they could be accessed would be provided or signposted to. Local Healthwatch could alert Healthwatch England about concerns it might have regarding services and refer issues to the relevant Overview and Scrutiny Committees.
- Healthwatch Wokingham Borough would have a seat on the Council's Health and Wellbeing Board.
- Nicola Strudley informed Members how Healthwatch would be different to the LINks.
 For example the local Healthwatch would be a corporate body with a Board of
 Company Directors and would be supported by Healthwatch England. Healthwatch
 England had been formed in October 2012 to help Healthwatch develop at a local
 level.
- Local people had been consulted about what they wanted the local Healthwatch to be like. People had indicated that they wanted Healthwatch Wokingham Borough to be credible, independent, well-known, evidence based, inclusive and representative, to make use of existing networks, accessible, transparent and to offer professional and accountable leadership.
- Help and Care and Wokingham Citizen Advice Bureau (CAB) had won the contract to set up a new legal entity that would become Healthwatch Wokingham Borough.
- Healthwatch Wokingham Borough would have two Executive Directors and three Non-Executive Directors. The Executive Directors were Nick Campbell-White and Nigel Appleton. An independent appointment panel would appoint the Non-Executive Directors in the very near future.
- Help and Care and the Citizens Advice Bureau would work together to ensure that an integrated service was provided.
- Members were informed that Service Level Agreements would be put in place. Help and Care would provide the patient public involvement service whilst the Citizens Advice Bureau would provide a walk-in service, signposting and advice and face-toface information. The CAB had six outreach points within the Borough in addition to an office within Wokingham Town Centre. Money would also be assigned to other Service Level Agreements.
- A bespoke customer relation management database was being developed.
- Kate Haines asked how local people would be made aware of Healthwatch Wokingham Borough. Nicola Strudley commented that there were lessons to be learnt from the LINk, which had been a hard concept to explain to people. The fact that the Citizens Advice Bureau was so well know was an asset. Healthwatch Wokingham Borough had a Communication Strategy which Nicola agreed to circulate. Banners and stickers would be put up in all the Citizen Advice Bureau points so as to increase Healthwatch Wokingham Borough's visibility.

- Members asked how Healthwatch Wokingham Borough would measure local people's awareness of it and if there was a deadline in place for raising awareness of the organisation. They were informed that a 'soft launch' would take place over a 6 week period after 1 April 2013. Healthwatch Wokingham Borough would attend local events such as a Clinical Commissioning Group event and provider forums, to provide presentations to raise awareness. Members asked for an update at the beginning of the new year on how successful raising awareness of Healthwatch Wokingham Borough had been.
- In response to a Member question as to how Healthwatch Wokingham Borough would reach hard to reach groups, Nicola Strudley stated that it would employ a full time officer, a large part of whose role would be outreach and engagement with the community and project support.
- With regards to Service Legal Agreements, the Committee noted that 'small sums of money' would be used to empower and facilitate community engagement. Members questioned what was meant by 'small sums of money.' Nicola Strudley commented that pieces of work were often at capped at around £500.
- Kay Gilder asked how Healthwatch Wokingham Borough would involve the local community. Nicola Strudley stated that it would make itself available to all groups of people. It would have a website, a textline, phone number, Facebook page and a Twitter account.
- UllaKarin Clark enquired why Healthwatch Wokingham Borough had not advertised earlier for Non-Executive Directors and was informed that there had been time constraints as a result of when the contract was awarded to the organisation. The Non-Executive Directors were likely to begin work within several weeks of appointment whilst Healthwatch Champions and Volunteers were likely to be recruited in May or June. A number of existing CAB volunteers would receive training on Healthwatch from April.
- Malcolm Richards commented that Healthwatch Wokingham Borough would have a
 wide ranging role and asked how information would be provided. It was noted that
 there would be protocols and procedures surrounding the way in which information
 was imparted. All local providers would have a profile on the NHS Choices website.
 Healthwatch Wokingham Borough would be able to comment on these profiles and
 upload reports. It would also work with the Wokingham Information Network and
 Patient Opinion.
- Healthwatch Wokingham Borough would have the power to enter and review services.
 It would endeavour to work with providers and to ensure that they were on board with the process.
- Members were assured that the Healthwatch Wokingham Borough telephone number would be a local rate number so that customers would not be hit with unexpected phone charges.
- A representative from Healthwatch Wokingham Borough would attend future Health Overview and Scrutiny Committee meetings to provide updates on its activities.

RESOLVED That the presentation on Healthwatch be noted.

77. LORD HARRIS COURT UPDATE

Karen Jackson and James Burgess provided a verbal update on Lord Harris Court in Sindlesham.

During the discussion of this item the following points were made:

• Following an inspection the Care Quality Commission (CQC) had issued a formal warning to the Royal Masonic Benevolent Institution that it must make urgent

- improvements at the Lord Harris nursing home in Sindlesham. The Council had complained to the CQC as the press release had been issued prior to the Council being able to provide support to those families affected.
- James Burgess commented that a CQC inspection in March 2012 had identified a number of issues which had not been followed up by the time of a follow up inspection in December 2012.
- Members were informed of the Council's Care Governance processes. The Council
 oversaw all registered care providers within the Borough.
- The Council was working with Lord Harris Court to make improvements. An action plan was in place and officers had gone into the home. A pharmacy inspection had also occurred.
- The Council was not placing in the home at present and had asked it not to take further residents whilst improvements were being made.
- The CQC inspection had identified staff training as an issue. The Committee were informed of the Skills for Care which could be accessed. Further pharmacy service training was being offered.
- Members were assured that residents were not at risk. The Council tried not to move older, vulnerable people if possible as this could be stressful and distressing. They would do so if the situation became intolerable. However, Karen Jackson stressed that this was not the case.
- Senior management within the home had been very supportive and cooperative.
- Tim Holton asked what processes were in place to ensure there were no further issues. Karen Jackson indicated that there was the Care Governance process and a focused review process in place.
- The Committee were informed that many of those living in care homes within the Borough were self-funded and not placed by the Council. It was therefore difficult to fully monitor who was moving in and out. If a resident was placed by the Council a rigorous process was followed and an inspection carried out.
- In response to a Member question relating to staff training at Lord Harris Court, Karen Jackson stated that the CQC process had not been vigorously followed. Inductions had not been sufficiently robust and medication and dignity in care training had required improvement. However, work was in progress to make improvements in these areas. The Council had now commissioned an officer to work with all care homes in the Borough. It was vital that good quality support was provided to the Borough's most vulnerable residents.
- Nick Ray questioned whether the Council's monitoring role needed to be tightened up. Karen Jackson commented that the Council made use of a Providers Forum to help build relations between the Council and the providers.
- Christine Holland stated that those with learning disabilities could be placed in care
 homes outside the area. James Burgess notified the Committee that the Council was
 working with the Clinical Commissioning Group (CCG) and a care home project had
 been identified as a priority. It would be a joint project involving various areas
 including the Council, the CCG, social workers and district and community nurses.

RESOLVED That the update on Lord Harris Court, Sindlesham be noted.

78. YOUR LOCAL ACCOUNT – ANNUAL REPORT FOR ADULT SOCIAL CARE 2011/12-2012/13

Mike Wooldridge presented 'Your Local Account – Annual Report for Adult Social Care 2011/12-2012/13' to the Committee.

During the discussion of this item the following points were made:

- Mike Wooldridge informed the Committee that the document represented a new approach to assessment in Adult Social Care. It was a self-assessment and reflected local priorities.
- Whilst not a statutory document only 4 councils nationally had not yet published such a
 document. The first edition had been signed off by the Shadow Health and Wellbeing
 Board. The Health and Wellbeing Board would monitor the actions on a quarterly
 basis.
- The Government had agreed that sign off arrangements should be agreed locally.
- Members were informed how the 'Your Local Account' document had been developed.
 Feedback was actively encouraged to help develop future editions. The first edition would cover 18 months.
- Consultation had taken place with existing resident and social care customer/carer groups during October and November 2012. This process had been supported by the LINk. The account had been written based on feedback received. For example respondents had indicated that they wanted to hear more about the new social care pathway and personal budgets. The document had been approved by an Editorial Board.
- The document was now published on the Council's website and hard copies had been sent to libraries, GP's surgeries and community centres and groups. It would also be publicised in the local media, including Borough News.
- The 2012/13 Local Account would be published in August/September 2013.
- Members thought that 'Your Local Account' was an excellent document but expressed concern at the fact that the document contained a couple of spelling mistakes and errors.
- The Committee were disappointed that they had not been consulted regarding the first 'Your Local Account' and requested that they be involved at the consultation stage for the next edition.
- Kate Haines asked why the data regarding the % of adults receiving Mental Health services in settled accommodation in year for the 2011/12 performance was still being verified. Karen Jackson explained that this data was not owned by the Council but recent changes would enable the Council to be able to receive this data much easier in the future.
- Kate Haines also asked why the target for % of adults receiving Mental Health services in employment in year was 10.8% when 10.8% had been achieved in 2011/12. Similarly she asked why the target for % of adults with Learning Disabilities in employment in year was not above the level that was achieved in 2011/12. Mike Wooldridge indicated these indicators were difficult to meet in the current climate and that the Council was comparing well across the region.
- Members questioned why the target for the average number of delayed transfers of care per week (people still in hospital who are ready to leave) was 5 delays or less for 2012/13 when there had only been 4 delays recorded for 2011/12. Karen Jackson commented that dependency levels in the hospitals were increasing. Again the Council compared well with other Berkshire authorities.
- The Committee questioned whether the increase in the number of Children under 18 recorded in the report was correct. Mike Wooldridge agreed to review this.

RESOLVED That:

1) 'Your Local Account – Annual Report for Adult Social Care 2011/12-2012/13' be noted;

2) the Health Overview and Scrutiny Committee requests that it is involved in the consultation process for the next edition of 'Your Local Account – Annual Report for Adult Social Care.'

79. BERKSHIRE NON – FINANCIAL PERFORMANCE INDICATORS REPORTS The Committee considered the Berkshire Non-Financial Performance Indicators Report.

During the discussion of this item the following points were made:

- Members were disappointed that the Diagnostics % waiting 6 weeks or more target was underperforming as was the target relating to Ambulance handover delays.
- The Committee questioned what performance indicator information they would receive in the future in light of the dissolution of the Primary Care Trust. Members agreed it was important that the Committee maintained a monitoring role.
- Several Members expressed surprise that for Quarter 4 to date 95.3% of patients spent 4 hours or less in Accident and Emergency (A&E). They questioned whether when patients were moved to the Clinical Decisions Unit (CDU) affected this figure. Christine Holland suggested that the Committee may wish to undertake a visit to the CDU. Kate Haines indicated that the Committee had in the past undertaken an arranged site visit in the past.
- It was noted that Berkshire West had achieved all overall Referral to Treatment (RTT) targets for admitted, non-admitted and incomplete pathways. The RTT breaches were at a speciality level and were for cardiology admitted, ophthalmology admitted, oral surgery admitted and neurology non-admitted.
- Malcolm Richards stated that the targets could be confusing and it was not always apparent whether they were positive or negative.
- Members noted that during Quarter 3 Berkshire West had 1967 cardiovascular health checks completed and that this was 783 checks below the target of 2750. A plan was in place to ensure the number of health checks delivered by Pharmacists would also be increasing during Quarter 4. Malcolm Richards asked what was being done to improve further on the target in Quarter 4. The report stated that Quarter 3 was historically a low activity quarter due to the lead up to Christmas and the festive period. Nick Ray asked whether the target reflected the seasonal trends and if not why not.
- Malcolm Richards asked which body set the targets.
- With regards to the target regarding the percentage of stroke patients spending 90%+ of their time in hospital on a stroke unit, UllaKarin Clark asked whether this target was affected by patients spending long periods of time in Wokingham Community Hospital.

RESOLVED That the Berkshire Non-Financial Performance Indicators Report be noted.

80. LINK UPDATE AND WEST BERKSHIRE LOCAL INVOLVEMENT NETWORK ROYAL BERKSHIRE HOSPITAL DIGNITY AND NUTRITION STUDY 2012

Christine Holland and Tony Lloyd provided Members with an update on the work of the Wokingham LlNk.

During the discussion of this item the following points were made:

- Tim Holton thanked Tony Lloyd and Christine Holland for their hard work over the years. Kay Gilder said a few words of thanks to Christine Holland.
- Christine Holland referred the Committee to the Wokingham LINk Annual Report 2012-2013. As a result of timing Members had received a draft copy of the report. The report had now been finalised and submitted to the Department of Health. No major changes had been made.

- Members were informed of the Wokingham LINk public meeting held in February which had gone very well. Ed Donald, Chief Executive of Royal Berkshire Hospital asked the Wokingham LINk, as a last action, to seek the views of local residents on matters which were done well at Royal Berkshire Hospital and those which were not. Christine Holland asked Members for their views. Members agreed that pharmacy supplies contributions to the discharge process still caused delays resulting in significant waits by patients. They also agreed that long waits could cause excessive parking costs for those waiting to collect a patient who was being discharged who then had to wait for pharmacy supplies. Kate Haines expressed concern that those with blue badges who parked at the hospital had to ask either security or reception to verify that they were a blue badge user in order to be let back through the car park barrier. This could be difficult and carers collecting the patient could be challenged if they did not have the patient with them at the time.
- The Committee noted the West Berkshire LINk and West Berkshire Neurological Alliance Joint Survey on Incontinence – Feb 2013 which had been previously circulated to Members. Tony Lloyd thanked the Committee for its response.
- Tony Lloyd provided a presentation on the West Berkshire Local Investment Network Royal Berkshire Hospital Dignity and Nutrition Study 2012.
- Members were informed that in 2011 the Care Quality Commission had undertaken a
 review into dignity and nutrition within 100 hospitals across the country. Royal
 Berkshire Hospital was not included in this. The West Berkshire Health Scrutiny Panel
 had asked the West Berkshire LINk to investigate dignity and nutrition in the Royal
 Berkshire Hospital. A poor response had been received to initial work.
- In May 2012 the LINk had produced a further survey which the hospital had agreed to distribute. 500 surveys had been distributed and 94 were returned which was disappointing. 25% of respondents were from Wokingham and 96% of respondents were over 65.
- Results showed that patients who had participated were broadly happy with nutrition and dignity in care within in the Hospital. Respondents had rated more highly, care standards during the week and during the day. Dignity, nutrition and hygiene had all scored highly.
- Patients had been asked whether they would recommend the hospital. 2% had answered 'Unlikely' and 4% had answered 'No'. Tony Lloyd commented that exceptions should be identified quicker.
- Members looked at the LINk's recommendations to the hospital and to the CCGs.
 Tony Lloyd stressed that hospital was doing a lot of good work and that it was
 important that good practice should be praised, celebrated and shared. Tony Lloyd
 suggested that the Committee may wish to ask the providers about their response to
 the review's recommendations.
- The Committee agreed that it was a very good report and thanked the LINk for looking into such an important issue.
- Members were informed that the recommendations coming out of the review of Neurological Conditions in Berkshire West had not yet been implemented.

RESOLVED That

- 1) the LINk update be noted;
- 2) Tony Lloyd and Christine Holland be thanked for all their hard work over the years;

81. HEALTH OVERVIEW AND SCRUTINY COMMITTEE WORKING PARTY

The Committee considered a report regarding the Health Overview and Scrutiny Committee Working Party and the draft work programme for 2013/14.

During the discussion of this item the following points were made:

- A Health Overview and Scrutiny Committee Working Party had met on 13 February to discuss possible items for the HOSC's 2013/14 work programme. It had also looked at whether there were any further improvements that could be made to the Committee meeting process and what the Committee should be focusing on in light of the changes to the health structure brought about by the Health and Social Care Act 2012 such as the introduction of the Health and Wellbeing Board.
- It had been suggested that a workshop be held between the Committee, the Health and Wellbeing Board and Healthwatch to explore what each of their roles would be and how they would all work together.
- Kate Haines questioned whether the Committee should look at the computerised appointments system at Royal Berkshire Hospital earlier than September and commented that this was a real issue. The Committee agreed that it wished to establish a Task and Finish Group to look at this topic. Kate Haines, Malcolm Richards, Sam Rahmouni and Kay Gilder volunteered to be part of this Task and Finish Group. Tim Holton suggested that support could potentially be sought from Healthwatch.
- The Committee discussed better publicising meetings to improve public engagement and issuing press releases where appropriate. Consideration could be given to advertising the Committee meetings on the Council's Twitter feed.

RESOLVED That:

- 1) the report be noted;
- 2) the draft Health Overview and Scrutiny Committee Work Programme 2013/14 be agreed;
- 3) joint working with other local authorities be explored where appropriate;
- 4) press releases be issued where appropriate prior to Committee meetings to improve public engagement;
- 5) the continuation of the use of pre-meetings prior to Committee meetings be agreed.
- 6) a Task and Finish Group be established to look at the appointment system at the Royal Berkshire Hospital.

82. HEALTH CONSULTATIONS

Members considered a report on current 'live' consultations.

The Chairman commented that the current "live" consultations that were detailed in the briefing paper included in the Agenda could be commented on or responded to by individual members where appropriate.

RESOLVED That the Health Consultations report be noted.

83. UPDATE ON COURSES AND EVENTS

Members received an update on courses and events attended.

Philip Houldsworth updated the Committee on the March public Board meeting of the Wokingham CCG. Members expressed disappointment that the meeting had been held in the middle of the afternoon and felt that this reduced the number of people who were able to attend. The Committee agreed to write to the Wokingham CCG asking whether some of the public Board meetings could be held later in the afternoon or early evening to enable those who worked or had to collect children from school, to be able to attend.

UllaKarin Clark informed the committee of two workshops and a seminar that she had attended. She informed Members that the CCGs were required to have a constitution and pointed out what items were and were not mandatory for inclusion in these constitutions.

Members received an update on a seminar on Health and Wellbeing Boards, attended by the Principal Democratic Services Officer, the slides for which had previously been circulated to the Committee.

RESOLVED That:

- 1) the update on courses and events attended be noted;
- 2) the Committee writes to the Clinical Commissioning Group asking why the public Board meetings have been scheduled for mid-afternoons.

These are the Minutes of a meeting of the Health Overview and Scrutiny Committee

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