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INTEGRATED CARE AND WELLBEING SCRUTINY PANEL

Day: Thursday

Date: 12 March 2020

Time: 6.00 pm

Place: Tameside One

Item No.	AGENDA	Page No
1.	APOLOGIES FOR ABSENCE	
2.	MINUTES	1 - 4
	To approve as a correct record, the Minutes of the proceedings of the Integrated Care and Wellbeing Scrutiny Panel held on 9 January 2020.	
3.	LIVING WELL AT HOME	5 - 14
	The Panel to meet Councillor Eleanor Wills, Executive Member (Health, Social Care and Population Health); and Stephanie Butterworth, Director of Adult Services, to receive a progress update on the work to transform the commissioning and delivery of care services as part of the Living Well at Home programme.	
4.	CORPORATE PLAN SCORECARD	15-16
	The Panel to receive a quarterly update on the Corporate Plan Performance Scorecard.	
5	SCRITING ACTIVITY 2040/20	17 10

5. SCRUTINY ACTIVITY 2019/20

17-18

The Chair to present a summary of all Scrutiny activity undertaken during the 2019/20 municipal year.

6. GREATER MANCHESTER SCRUTINY

The Chair to discuss priorities and recent activity of the Greater Manchester Combined Authority Scrutiny Committees.

7. CHAIR'S UPDATE

The Chair to provide a verbal update on recent activity and future priorities for the Panel.

8. DATE OF NEXT MEETING

To note that this is the last meeting of the Panel for the 2019/20 municipal year.

From: Democratic Services Unit – any further information may be obtained from the reporting officer or from Paul Radcliffe, Policy and Strategy Lead, to whom any apologies for absence should be notified.

Item	AGENDA	Page
No.		No

9. URGENT ITEMS

To consider any additional items the Chair is of the opinion shall be dealt with as a matter of urgency.

From: Democratic Services Unit – any further information may be obtained from the reporting officer or from Paul Radcliffe, Policy and Strategy Lead, to whom any apologies for absence

should be notified.

Integrated Care and Wellbeing Scrutiny Panel 9 January 2020

Commenced: 6.00pm

Terminated: 7.40pm

Present: Councillors T Smith (Chair), S Homer (Deputy Chair), Affleck, Alam, Jackson, Martin,

Mills, Owen, Patrick, Welsh, Wild.

Apologies for absence: Councillors Boyle, Cooper, Drennan, Gosling.

32. MINUTES

The minutes of the meeting of the Integrated Care and Wellbeing Scrutiny Panel held on 7 November 2019 were approved as a correct record.

33. RESPONSE TO OMBUDSMAN FOCUS REPORT

The Panel welcomed Councillor Leanne Feeley, Executive Member for Lifelong Learning; and Tim Bowman, Assistant Director of Education, to provide a service response to a Local Government and Social Care Ombudsman (LGSCO) focus report published in October 2019. The report titled, *Not going to plan? – Education Health Care Plans two years* on, is intended to place more of a spotlight on problems experienced with the SEND system.

It was reported that legislative reforms introduced in September 2014 and a refreshed SEND Code of Practice have created additional implementation and resource challenges for local authorities. A new inspection framework was also introduced in May 2016, with all local areas to be inspected over a five year period.

From a review of complaints, the Ombudsman has identified five serious problems:

- Severe delays
- Poor planning and anticipation of needs
- Poor communication and preparation for meetings
- Inadequate partnership working
- Lack of oversight from senior managers

The Panel received a service response to shared learning points detailed within the Ombudsman report, with a self-evaluation and appraisal of current strengths and improvement areas. A separate response was reviewed against case studies and key questions for Scrutiny. Strengths were highlighted for joint working arrangements at an operational level and proactive work undertaken within early years. Challenges have been identified through performance outcomes and the implementation of SEND reforms. Most notably:

- Compliance with statutory timescales for completion of education, health and care plans
- Consistency in the identification of needs

Cllr Feeley reported that Tameside is experiencing significant pressures on its High Needs budget, with a significant overspend projected for 2019/20. The authority faces a range of challenges based on the rise in general activity and requests for assessment. In 2016 a total of 139 requests were made, compared with 481 in 2019. The total number of plans maintained has increased from 700 to 1500 over the same period. Such demand pressures have impacted on capacity and the ability to meet statutory timescales for assessments, with around 43% completed within 20 weeks.

The Panel heard that local challenges reflect those identified by the Ombudsman at a national level. There is a need for significant and swift improvement in a number of areas and a strategic SEND review has been carried out. Implementation of the review will increase specialist capacity and establish more inclusive provision. Improved action will be taken to address compliance, effective auditing, pathways and delays.

Initial actions identified in the plan will start to be implemented from September 2020. These are:

- Developing more provision in the borough to avoid costs associated with out of borough placements
- Neighbourhood working to improve SEND support
- A full review of top up funding

The Chair thanked Cllr Feeley and Mr Bowman for the appraisal and the response provided to a number of questions raised by the Ombudsman. The Panel will continue to seek assurances on shared learning, with outcomes from this review to be reported at the joint meeting of Executive Cabinet and Overview Panel on 12 February 2020.

Resolved: That Councillor Feeley and Mr Bowman be thanked for attending the meeting.

34. RECRUITMENT AND RETENTION OF FOSTER CARERS

The Chair presented a report of the working group tasked to review the Recruitment and Retention of Foster Carers. Members have met with the Fostering Service and attended a foster carer support group meeting, with findings and recommendations to be shared with the Deputy Executive Leader (Children and Families) and the Director of Children's Services.

Resolved: The report was approved and signed off by the Panel.

35. GREATER MANCHESTER SCRUTINY

The Chair is a member of the Greater Manchester Corporate Issues & Reform Overview and Scrutiny Committee. The Deputy Chair is a member of the Greater Manchester Economy, Business Growth & Skills Overview and Scrutiny Committee. The most recent meetings were held in November 2019, with the following topics discussed:

- School Readiness
- Waste budget and levy
- Digital Strategy
- GM Brexit preparations

The Chair reaffirmed that the Scrutiny Update emails will continue to include a link to all public papers for the Greater Manchester Combined Authority Scrutiny Committees.

36. CHAIR'S UPDATE

The Chair advised members that an Executive Response meeting with Councillor Bill Fairfoull, Deputy Executive Leader (Children and Families), will take place on 20 January 2020. This concludes activity to review the Recruitment and Retention of Foster Carers. The final report and Executive Response will be presented at the joint meeting of Executive Cabinet and Overview Panel on 12 February 2020.

The next meeting of the Children's Working Group will take place on 16 January 2020 to continue the review of Children's Mental Health and Wellbeing Services.

Resolved: Details and outcomes from working group meetings to be routinely reported to the Scrutiny Panel.

37. DATE OF NEXT MEETING

To note that the next meeting of the Integrated Care and Wellbeing Scrutiny Panel will take place on Thursday 12 March 2020.

38. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

CHAIR



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Integrated Care and Wellbeing Scrutiny Panel
12 March 2020



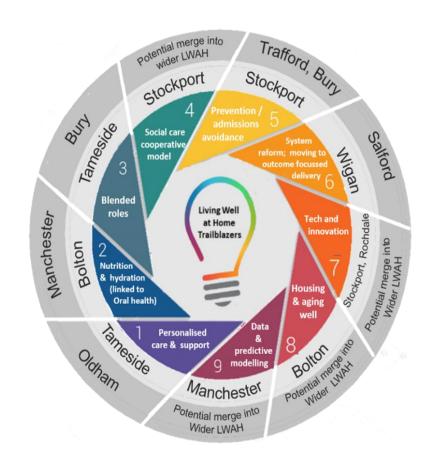


Better care for older people and better jobs for care staff - messages from a trailblazer blending health and care worker roles in the community

- The Greater Manchester Adult Social Care Transformation Programme has recently reconfirmed its priorities - one of which is Living Well at Home - with associated work programmes underpinned by cross cutting initiatives such as workforce
- The Adult Social Care Transformation

 Programme aims to encourage 'bottom-up'

 development and spread of innovative ways of working through rapid testing and roll-out by those that deliver services locally
- A series of small projects were implemented across Greater Manchester, with multiple 'trailblazer' teams engaged simultaneously. Combined, these individual projects provide an opportunity to re-cast the operating model







This trailblazer aimed to explore how we might work in a more integrated way across health and social care at a neighbourhood level. This was informed by feedback that:

- People often reported a disjointed experience with different services delivering ¬separate components of care in isolation
- ♣ A lack of coproduction and person-centred conversation with only limited community connecting
- A focus on task and time rather than a strengths-based approach to care and support
- Providers experiencing on-going problems recruiting and retaining staff
- Communication between health and care professionals was often poor





- Aims:
 - Further facilitate a more person centred approach
 - Joined-up support and improved continuity of care fewer knocks on the door
 - Address issues around recruitment and retention of staff in homecare
 - Improve job satisfaction and the image of homecare role
 - Improve career progression
 - Better integrate neighbourhood services
 - Free up district nurse capacity
- Piloted in West neighbourhood over spring/summer 2019





- What we decided to do:
- Find a way for homecare staff and district nurses to work more closely together
- Focus on low level health tasks that district nurses do but which you don't need
 to be a district nurse to do tasks that individuals and family members are
 routinely shown how to do
- Set up a pilot in our West neighbourhood focussing on pressure area care/basic wound care/body map and skin observations
- Two zoned homecare providers and the district nurse service





- Approach of pilot
- Improved integration between providers and district nurses better communication and contact through named team members/named nurses, shared contact details and provider attendance at weekly safety huddles
- Development of a joint care plan the 'care bundle' and competency document suite of care planning documentation for use by LWAH providers and district nurses including competency sign-off
- **Frained and competent homecare workers** homecare workers receive refresher awareness training re pressure area care and care bundle paperwork
- 40 High intensity users (HIU) of pressure area care support identified named team members are
 trained in the delivery of low level/low risk healthcare tasks appropriate to only that individual's care
 needs, have access to district nurse support, appropriate clinical governance, joint assessments and
 competency sign off
- Co-location and attendance at MDT meetings where possible providers spending more time in neighbourhood office and attending team huddles/team meetings





- Impact of pilot
- All 12 staff surveyed report that the new way of working has made a positive difference to the care they have been able to provide
- 92% of that staff group surveyed reported that the new way of working has made a positive difference to their job satisfaction

"Things have really changed since the project began for myself and my clients as now we have the knowledge of what to look for and how to deal with it. Myself and my colleague have managed to keep all pressure areas under control without the need for a dressing or contacting the district nurses. We have a weekly meeting with district nurse at the client's homes in which we share any concerns we may have had within that week, district nurses also do their weekly pressure checks"



Niamh at Comfortcall





- User care is now more joined up with joint team meetings, joint care planning and a nominated single point of contact
- Reduced risk associated with poor communication across organisational boundaries (e.g. escalation of physical or mental health and care issues that isn't noticed or communicated)
- Improved communication between providers and district nurses means less need for users to repeat conversations or to negotiate with multiple organisations/individual and more continuity of care
- Reduction in users waiting for interventions (e.g. being bed bound awaiting a district nurse to change a wound dressing).







- Based on the 40 people requiring a high level of pressure area care support (HIU's), it is estimated that over a full year this would result in 205 fewer district nurse visits, a 21.4% reduction. 51 hours of "patient facing" time (15 minute slots) can therefore be repurposed to meet demand
- If the approach was rolled out completely across West neighbourhood to the Tremaining HIU's, 957 fewer district nurse visits would be required. This would free up 239 district nursing hours to complete more complex nursing tasks





Reduction in District
Nurse visits for
identified High
Intensity Users





- What next?
- Roll out across West permanently and the three other neighbourhoods
- Insulin (via dial-up pen) being piloted in South
- All six providers ready to go with the full range of tasks identified
- © Other tasks for the future:
 - → Tracheostomy care
 - Gastrostomy care
 - Blood glucose monitoring
 - Bladder washouts
 - Nutritional assessments
 - Eye drops, non-post op
 - Catheter care/hydration/UTI management and prevention





Data as	ata as at 29 November 2019										
The	me	Priority	Outcome	Metric	Previous Position	Current Position	National Average	Progress	Target 2020	Target 2025	Target 2030
			Reduce rate of smoking at time of delivery	% Smoking at time of delivery	14.60%	14.00%	10.60%	1	11.40%	10.50%	All expectant mothers to be supported to be smoke free at the time of delivery
		art on	Reduce number of children born with low birth weight	Low weight births as a % of all full term live births	3.16%	3.29%	2.82%	↔	2.78%	2%	All mothers and babies are supported to achieve a healthy start in life
		st St Wats	Improve school readiness	% achieving a 'good' level of development	65.7%	66.90%	71.80%	↑	68.90%	75%	All children start school ready to learn
		Very Best Start Debbie Watson	Children attending 'good' and 'outstanding' early years settings	% 3 & 4 YO's at 'good' or 'outstanding' EY settings	95%	91%	91%	\	96%	98%	All children to attend good or outstanding early years settings
		Ver	Take up nursery at 2 Years	% 2 YO's in funded early education	85%	77%	68%	1	87.70%	95%	All eligible 2 year olds benefit from funded early years education
			Childhood Obesity	% of children in year 6 who are overweight or obese	34.6%	36.5%	34%	↑	35.50%	34%	All children to be a healthy weight at the end of Year 6
			Promote good parent infant mental health	% of new mums that receive a health visit within 14 days of the birth	92%	90.2%	N/A	1	95%	97%	All new mums receiving good quality postnatal care
			Reading / Writing / Maths at Key Stage 2	% students achieving KS2 expected standard	64%	63%	65%	\	65.40%	70%	All children to be provided with the
			Key Stage 4 attainment	Average attainment 8 score	43.9	44	44.5	↔	45.7	50	opportunity to achieve their full
			Troy stage i attainment	% achieving Grade 4 or above in English & Maths GCSEs	62.1%	62.9%	59.5%	1	64.20%	70%	educational potential
		& Hope man	Young people going into higher education	% KS4 going into/remaining in further education	83%	84%	86%	1	84%	90%	All young people going into/remaining in further education after KS4
		ıs & l	Children attending 'good' and 'outstanding' schools	% Primary schools 'good' & 'outstanding'	89.30%	89.50%	87.60%	↔	92.50%	95%	All children attending a good or outstanding primary school
		ratio		% Secondary schools 'good' & 'outstanding'	73.30%	73.30%	76.20%	↔	75.58%	80%	All children attending a good or outstanding secondary school
cock		Aspirations Tim Bow	Number of 16-19 year olds in employment or education	% 16 & 17 YO's in education or training	92.43%	93.14%	92.52%	↑	93.50%	95%	All 16 & 17 year olds in education or training
Welt 1 Rish Big Hancock	ן ן		Proportion of children with good reading skills	% KS2 achieving expected reading standard	73%	71%	73%	1	75%	80%	All children to be provided with the opportunity to achieve their full educational potential
S S S S S S S S S S S S S S S S S S S			Promote a whole system approach and Improving wellbeing and resilience	Mean worthwhile ratings (adults 16 and over)	7.86	7.97	7.89	↑	7.91	8.5	All residents 16+ feel that the things they do in life are worthwhile
\$ 15 E		rks	Early Help Intervention	CAFs currently open	662	686	N/A	N/A	To be de	eveloped	All vulnerable families receive the help they need
		Netwo	Reduce the number of first time entrants into Youth Justice	First Time Entrants into Youth Justice aged 10-17	227.3	306.9	238.5	1	243.3	212.9	No young people entering the youth justice system
Starting		Supportive Morris	Increased levels of fostering and adoption	% LAC adopted in year	22%	12%	13%	1	13%	18.60%	All looked after children provided with the opportunity to be adopted, where its of benefit to the young person, within the year
		જ ≿	Improve the quality of social care practice	CS Audits Rated 'Good' & 'Outstanding'	46%	32%	N/A	1	25%	50%	All Children Social Care audits rated good or outstanding
		Families Trac	Improve the placement stability for our looked after children	% of LAC with 3+ placements	7%	8%	10%	↑	5%	2.50%	All our looked after children are in safe and stable placements
	ient Fa	Resilient F	Reduce the impact of adverse childhood experiences	LAC rate per 10,000	141	142	64	↑	122	99.1	Children are supported to stay in the family environment where it is safe and possible to do so
erse				CSC Referrals related to domestic abuse	2757 (full year figure)	661	N/A	↑	2482	2000	No CSC referrals related to domestic abuse
Jayne Traverse			Increase median resident earnings	Median Annual Income	£24,289	£24,405	£29,869	↑	£26,819	£27,492	The median annual income to be in line with the England average
ne			Increase the working age population in employment	Percentage in Employment	73.80%	74.0%	75.6%	↔	75.40%	78%	All people who can work are in work
1		prise	Increase the number of people earning above the Living Wage	% earning below living wage foundation rates	25.70%	27%	22.9%	↑	24.40%	22.90%	All employees earning at least the Living Wage
conom	ams	& Enterprise d Berry	Increase number of enterprise / business start-ups	New enterprises (percentage of total businesses)	12.36%	12.48%	13.15%	↔	15.94%	18.97%	Tameside is recognised as a vibrant economy where entrepreneurs are supported to start new businesses
ibrant E	an Saxon / Vibrant Economy	Skills David	Working age population with at least Level 3 skills	Percentage of population with at least level 3 skills	46.10%	47.5%	57.7%	1	50%	54.90%	Higher proportion of Tameside's population have Level 3 skills than the national average
an Saxon / Vi		Work	Increase the number of good quality apprenticeships delivered	Number of apprenticeships started	2050	1,560 (Aug - April 18/19) (111.3 per 10K)		↑	2100	2310	Apprenticeships are available to all that seek them
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Ce - Li		ent	Improve air quality	Nitrogen dioxide (ug/m^3)	34.3	32.90	28.0	\	30	28	Air quality to be good and at least be in line with the UK average
Great Place		Ē	Increase the number of net additional dwellings	Net Additional Dwellings per 10,000	21.6	28.69	43.1	↑		Т	oto to be a succed
		ع <u>ج</u> ز	Increase the number of affordable homes	New Affordable Homes per 10,000	3.55	4.71	10.3	↑		rarg	ets to be agreed
		and Environment a Varnam	Digital inclusion	Maximum Mean Download Speed	38.2	37.70	37.9	↔	37.4	41.5	All households to have access to high quality internet services
		Infrastructure an Emma V	Reduce tonnes of waste sent to landfill and increase the proportion recycled	Percentage of all waste recycled	52.80%	52.4%	43.2%	↔	55.02%	57.78%	All household waste recycled where possible
			Increase journeys by sustainable transport/no car	% population walking / cycling 3+ times a week	37.90%	40.5%	47.0%	↑	43.20%	47%	Tameside is a walking/cycling friendly borough
			Increase access to public transport	% of residents with Level 4 access to public transport network at peak times		82.7% (GM)	N/A		Targets to	be agreed	All residents with Level 4 access to public transport network at peak times
			Increase participation in cultural events	# cultural events (arts & engagement team)	329	398	N/A	1	418	468	500
		(A)	Increase participation in cultural events	# participants/spectators at above events	42,352	50,931	N/A	↑	53477	59727	65977
		unitie m	Reduce victims of domestic abuse	Rate of PPIs per 1000	33.8	33	N/A	1	31.8	25.1	Tameside has low rates of domestic abuse
		Communities a Varnam	Reduce the number of rough sleepers/homelessness	Street counts & estimates of rough sleepers	7	5 (0.53 per 10k HHolds)	4677 (2 per 10K Hholds)	\	5	2	Nobody sleeping rough on the streets of Tameside
	worth	Nurturing C Emma	Improve satisfaction with local community	Mean life satisfaction ratings	7.66	7.73	7.71	↑	8	8.5	Maintain mean life satisfaction at 8.5
	<u>8</u>	سَ جُ	Victims of crime/fear of crime	Crime rates per 1000	142.7	135.6	88.11	↓	128.8	96.6	Tameside is a low crime borough
	tte	Ž	Reduce levels of anti-social behaviour	ASB Crime rates per 1000	31.7	21.9	24.2	↓	20.8	15.6	Tameside is a low crime borough
	oh Butt		Increase access, choice, and control in emotional and mental self-care and wellbeing	IAPT Referrals	9156	9435	N/A	↑	9906.8	12383.4	Everyone has access to good quality mental health services
	Vell - Steph	Lives	Increase physical and mental healthy life expectancy	Healthy Life Expectancy at birth	Male - 57.6 years, Female - 58.1 years	Male - 58.1 years, Female - 57.6 years	Male - 61.2 years, Female - 62.3 years	↔	Male - 60 years, Female - 60.4 years	Male - 61.2 years, Female - 62.3 years	Healthy life expectancy to be in line with the England average
	Ageing Well	r Live	Improve the wellbeing of our population	Happiness ratings (average)	7.45	7.61	7.56	↑	7.48	7.52	Maintain mean happiness ratings above 8
	Ag	Healthier dson / Pat	Smoking prevalence	Prevalence of smoking, 18+. Survey Data	17.30%	16.80%	14.4%	↔	14.40%	11%	Tameside and Glossop are smoke free areas
Page		& Healt ardson	Increase levels of physical activity	% of population 'inactive' (<30m exercise a week)	31.40%	28.0%	25.1%	\	27.10%	25.20%	All residents are physical active where possible
		onger Rich	Good' and 'Outstanding' GPs practices	CQC Audit Results: % good or outstanding		97.50%	95.30%	↔	98%	100%	All GP practices to be rated good or outstanding by CQC
क		Lc Elaine	Reduce drug and alcohol related harm	Admission rate for alcohol related harm per 100k	2756	2741	2224	↔	2590	2250	Alcohol harm rates are low and support is available
		ш		Deaths from drug misuse per 100k	5.1	4.6	4.5	1	4.3	4	Drug misuse rates and low and support is available
		Dignity in ge ehead	Increase the number of people helped to live at home	Funded 65+ in residential/nursing homes per 100k	667.3	677.4	580	1	626.5	585.6	Only those in most in need access residential/nursing care at the right point for them
		& Dig⊦ ^ge itehea	Reduce hospital admissions due to falls	Emergency admissions for falls 65+ per 100k	2143	2126.5	2170	↔	2083.97	1875.57	Emergency falls in the 65+ age group are low
		Independence & Dig Older Age Sandra Whitehe	Increase levels of self-care / social prescribing	% service users who find it easy to find information	74.80%	70.20%	69.70%	\	76.7%	78.6%	Tameside and Glossop is a place where people are supported to self care
		depen		CQC Audit Results: % good or outstanding		76%	Awaiting Data		75%	80%	All residential/nursing settings are rated good or outstanding
				Number of people supported outside the social care system with prevention based services	7792	6740	N/A	1	7000	7500	All people are supported to remain in the community

^{*} Where available data will be provided at the Tameside & Glossop level for heath related indicators. All data is as at 29 November 2019.

Agenda Item 5

Scrutiny Activity 2019/20

The table below provides a summary of Scrutiny activity and oversight carried out during 2019/20. This includes updates to seek assurances on service provision and outcomes.

Scrutiny activity and oversight (June 2019 to February 2020)

		t (June 2019 to February 2020)						
Place and	I External Relations	Integrated Care and Wellbeing						
GM Clean Conversation	Air Proposals and Public	Quality of Care Homes						
Quality and since sector	andards in the private rented	 Children's Services Improvement Recruitment and Retention of Foster Carers 						
Peer Review	of Healthy Spaces	Peer Review of Domestic Abuse						
Highways and	Flood Prevention	Urgent Treatment Centre / Winter Preparedness						
Housing Strat		Living Well at Home						
LGSCO focus Housing Be	reports and shared learning enefit	LGSCO focus reports and shared learning SEND						
Corporate Pla	n / Performance Monitoring	Corporate Plan / Performance Monitoring						
·	Council update	Cooperative Council update						
Mid-year bud	jet update	Mid-year budget update						
		Children's Working Group Outcomes from activity and recommendations to the Executive on: Reading Attendance / Exclusions Children's mental health and wellbeing Children's Services — Sustainability Projects						

In-depth reviews

The following in-depth reviews have been carried out during 2019/20:

Place and External Relations Scrutiny Panel - a review was completed on Quality and Standards in the Private Rented Sector. Report and Executive Response presented at Overview Panel on 18 November 2019. Scrutiny will remain involved in consultation and developments to inform the local approach.

Integrated Care and Wellbeing Scrutiny Panel - a review was completed on the Recruitment and Retention of Foster Carers. Report and Executive Response presented at the joint meeting of Executive Cabinet and Overview Panel on 12 February 2020. Scrutiny to periodically review the impact of sustainability projects directly aimed to improve fostering placements and outcomes.

The Children's Working Group has remained in place as a fixed sub-group of the Integrated Care and Wellbeing Scrutiny Panel. The group includes co-opted members and has reviewed Children's Mental Health and Wellbeing; and Early Help projects within Children's Services.

Consultation and Engagement

Scrutiny will remain suitably informed of open consultations at a local, regional and national level. Past responses include:

- Over the Counter Medicines 14 September 2018
- Greater Manchester Clean Air Conversation 30 June 2019
- New Rent Standard 30 July 2019
- Domestic Abuse Services 2 August 2019
- VCSE in Greater Manchester 30 September 2019
- A New Deal for Renting 12 October 2019
- Greater Manchester Doing Buses Differently 8 January 2020

Regular Updates

All Scrutiny Panel members will continue to receive regular update emails that provide access to scrutiny resources and the opportunity for councillors to contribute and share any consultation and engagement material. The emails create a further opportunity to inform members how the work of Scrutiny is shared with the Executive and reported within the Council.