

# ADULT CARE AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Wednesday, 12 September 2018

Present:                      Councillor    J McManus (Chair)

   Councillors    M McLaughlin                      M Jordan  
                        B Berry                                      C Muspratt  
                        W Clements                              T Norbury  
                        G Ellis                                        L Rennie  
                        S Frost                                        I Williams  
                        P Gilchrist                                    J Walsh

## 11        **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Tony Cottier and Sharon Jones. Apologies for absence were also received from Karen Howell, Chief Executive Officer Wirral Community NHS Foundation Trust.

## 12        **MEMBER DECLARATIONS OF INTEREST**

Members were asked to consider whether they had any disclosable pecuniary interests and/or any other relevant interest in connection with any item(s) on this agenda and, if so, to declare them and state the nature of the interest.

Members were reminded that they should also declare whether they were subject to a party whip in connection with any item(s) to be considered and, if so, to declare it and state the nature of the whipping arrangement.

The following declarations were made in respect of business on the agenda generally:-

Councillor Phil Gilchrist	Personal interest by virtue of his role as a Governor appointed to the Cheshire and Wirral NHS Partnership Trust.
Councillor Moira McLaughlin	Personal interest by virtue of her daughter's employment within the NHS.
Councillor Christina Muspratt	Personal interest by virtue of her daughter's employment within the NHS.
Councillor Tony Norbury	Personal interest by virtue of his daughter's employment within Adult Social Services.
Councillor Joe Walsh	Personal interest by virtue of two relative's employment within the NHS.
Councillor Mary Jordan	Personal – by virtue of employment within the NHS; of being Secretary of Incubabies, a charity raising funds for the neonatal unit at Arrowe Park; and her son's employment within the NHS.

13 **MINUTES**

**Resolved – That the minutes of the meeting of the Adult Care and Health Overview and Scrutiny Committee held on 27 June 2018 be confirmed as a correct record.**

14 **ORDER OF BUSINESS**

The Chair proposed and it was agreed that the meeting's order of business be varied and that Agenda Item 7 'Wirral Community Trust – CQC Inspection' and Item 9 'Integrated Social Care Transfer – 12 Months on Staff Perspectives' be considered before Agenda Item 4 '2018/19 Quarter 1 Financial Monitoring Reporting' to enable attending NHS representatives to speak on the items prior to leaving the meeting to attend a pre-arranged commitment.

15 **WIRRAL COMMUNITY TRUST - CQC INSPECTION**

Val McGee, Director of Integration and Partnerships introduced a verbal update on the Wirral Community Trust CQC inspection report, on behalf of Karen Howell - Chief Executive Wirral Community NHS Foundation Trust.

The report informed that the CQC is the independent regulator of health and adult social care in England, which monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. Since its last inspection in September 2014, the inspection process had changed significantly and was now much more detailed. A new inspection framework was consulted upon and launched in 2017.

Following the inspection of core services and the well-led inspection in March 2018, the Trust had received an overall rating of Requires Improvement (RI). However, the report cited many areas of Outstanding and Good practice and most importantly areas rated as Good against the key questions of effective, caring and responsive.

The Chair opened questioning on the item highlighting that given the CQC report detailed 14 'must do actions' for the Trust, none were listed in the report as presented, and the lack of detail and ownership in the document was not of a standard that Members would expect given the importance of CQC inspections and the role of the Overview and Scrutiny Committee.

Another Member also expressed disappointment at what had been presented to Members, stating that it was unusual to have such a 'light' report, adding that it held no information as to what issues the CQC had identified, and no information regarding timescales or an action plan to address required improvements. The Member asked when the Overview and Scrutiny Committee might have sight of the CQC reports.

A Member suggested that it be useful for the CQC report and improvement plan to be directed to the Health and Care Performance Panel in order to track improvement.

A Member commented that he had seen the CQC report and was extremely concerned as to its content and apparent 'disconnects' relating to certain service areas. He added that Senior Managers had also expressed concerns, and staff communications were also 'raising alarm bells' for him.

Other members of the Overview and Scrutiny Committee expressed their concerns as to why the full report and improvement plan had not been presented for review. Members supported the view that the full CQC inspection report be presented to the Health and Care Performance Panel for further review.

Val McGee, Director of Integration and Partnerships, who presented the report on behalf of Karen Howell - Chief Executive Wirral Community NHS Foundation Trust agreed, adding that the overall rating of Requires Improvement (RI) did not truly reflect the work of staff who had been instrumental in some of the positive themes identified in the CQC report.

#### **Resolved – That**

**(1) the briefing note be received; and**

**(2) a copy of the CQC inspection report and the Wirral Community Trust NHS Foundation Trust's Action Plan be provided to the Health and Care Performance Panel for review.**

#### **16 INTEGRATED SOCIAL CARE TRANSFER - 12 MONTHS ON STAFF PERSPECTIVES (VERBAL UPDATE)**

Further to Minute 5 (27 June 2018) Val McGee, Director of Integration and Partnerships Wirral Community NHS Trust and Dan Hinchell, local Unison representative provided a verbal update to the Overview and Scrutiny Committee on the perspectives of staff and Trade Unions following the integration of health and social care in the past year.

Mr Hinchell informed the Adult Health and Care Overview and Scrutiny Committee that he had been in e-mail correspondence with all staff affected by the transfer. He further informed that a number of key themes arising from the integration had been identified as a result. These included:

- Problems arising from staff now working together in key areas under two different sets of policies and procedures and two different terms and conditions (T&C). He added that this was still under review and staff would be working to NHS T&Cs once ratified.
- An ongoing bug-bear regarding the staff transfer related to the 4 days enforced unpaid leave forming part of Council Staff's existing contracts.

- Pay Dates – NHS and Council Staff were currently paid on different days, and although arrangements had been put in place for advances of pay, there still existed some hardship cases for a small number of staff.
- ICT operational issues – training on, and use of different IT systems had caused some difficulties, however a number of IT ‘clinics’ had been put in place to help address this.
- Recruitment – an ongoing issue and staff were continuing to work around a number of staffing vacancies.
- Education Grant – as part of their personal development plans, some members of staff had been awarded a sum of money to help with work related training and development. A number of staff had reported that since their transfer this sum had stopped. Mr Hinchell informed that a promise had been made to investigate this, but no answer had been received at the time of this report.

A Member thanked Ms McGee and Mr Hinchell, but requested that it would have been more helpful if Members had been provided a written report in advance of the meeting.

A Member questioned Mr Hinchell as to whether staff felt confident in approaching managers and asked if more qualitative questioning be included in future staff surveys about the transfer, encouraging staff to feel more inclined to feedback any concerns they may have.

The Chair thanked both speakers and re-iterated Member’s request for a written summary, asking that this be circulated to the Adult Health and Care Overview and Scrutiny Members after the meeting.

**Resolved - That**

**(1) the report be noted; and**

**(2) a written report be circulated to Members of the Overview and Scrutiny Committee, summarising the points raised by Mr Hinchell in his verbal report.**

**17 FINANCIAL MONITORING - 2018/19 Q1**

Matthew Gotts, Principal Accountant Financial Management introduced the regular report of the Assistant Director: Finance and Section 151 Officer that provided Members with detail to scrutinise budget performance for the area of activity that formed part of the People Theme as at appendices sets out the projected revenue and capital monitoring position for 2018/19 as at the close of quarter 1 (30 June 2018). The report also provided details of the Medium Term Financial Strategy 2019/20 - 2022/23 (MTFS) and information relating to the preparation of the budget for 2019/20.

The Principal Accountant Financial Management provided Members with a summary presentation that set out the budgetary figures for 2018/19 and information regarding key areas of relevance / note i.e.

- 2017/18 Outturn;
- 2018/19 Q1 forecast and variance figures;
- 2018-19 Adult Social Care Budget & Pressures (£8.59m);
- Pooled Fund with Wirral CCG (£129.9m);
- All Age Disability Service; and
- Key Capital Schemes (2017/18 and 2018/19).

The Principal Accountant Financial Management's presentation also provided members with a further breakdown of the key budget expenditure relating to Older People (65+) Care and Complex Care (18-64) Services i.e. services user numbers and average costs as follows:

Neighbourhoods (65+) Service User Numbers					
Care Type	March '18	June '18	+/- (%)	Vol as % of service	Cost as % of budget
Long-Term Res. and Nursing Care	1,051	1,056	0.5%	29%	47%
Short-Term Care	304	252	(17.1%)	7%	11%
Community Care	1,843	1,939	5.2%	53%	34%
Direct Payments	416	409	(1.7%)	11%	8%
Total	3,262	3,292	0.9%		

Complex Care (18-64) Service User Numbers					
Care Type	March '18	June '18	+/- (%)	Vol as % of service	Cost as % of budget
Long-Term Res. and Nursing Care	308	315	2.3%	21%	31%
Short-Term Care	84	86	2.4%	6%	4%
Community Care	941	930	(1.2%)	61%	56%
Direct Payments	206	195	(5.3%)	12%	9%
Total	1,179	1,176	(0.3%)		

Members reiterated their request that any overhead slides / presentations should be circulated to the committee in advance of the meeting to enable them sufficient time to review the data content ahead of the meeting.

Members questioned Mr Gotts on the content of his presentation and the apparent disparity in the numbers relating to the increased figures in terms of

personal budgets - and reported reduction in direct payments. Members were apprised that personal budgets related to where a person was informed of their care and support service provision, and the equivalent value that they could choose to take as a Direct Payment should they wish to. Direct Payments were where a person chooses to receive the money to arrange their own care and support services, as a Direct Payment from the Council, rather than the Council arranging actual services to meet their needs. Individuals may then choose to spend the Direct Payment on a range of services to meet their specific needs.

Members requested that an update on the technology schemes (and reasons for delays) within the Adult Care and Health Capital and Revenue Budget be reported to the next meeting of the Overview and Scrutiny Committee.

The Chair thanked Mr Gotts for his report.

### **Resolved - That**

**(1) the report be noted; and**

**(2) an update on the technology schemes within the Adult Care and Health Capital and Revenue Budgets be reported to the next meeting of the Overview and Scrutiny Committee.**

## **18 WIRRAL UNIVERSITY TEACHING HOSPITAL - CQC INSPECTION**

Janelle Holmes, Chief Executive Officer Wirral University Teaching Hospitals NHS Foundation Trust presented her report that informed that the CQC inspected the Trust between 13th March and 3rd May 2018. The report stated that the Trust was rated as 'Requires Improvement' overall due to a combination of a range of observations, that included:

- instability in the Executive Team and turnover of senior leaders;
- compliance with Fit & Proper Persons Requirement;
- ineffective governance (including risk management, quality monitoring, quality of information, concerns around culture, assessment of competence and skills, incident handling arrangements);
- environmental cleanliness;
- assessment of falls and pressure ulcer risk;
- access to Children's Emergency Department 24 hours per day;
- transfer of patients out of hours; and
- use of Deprivation of Liberty Safeguards.

Having recently taken up her post, Ms Holmes informed that the rating had not been unexpected, but the Trust was clear in its aim to draw a line under the report and implement a number of key recommendations and actions agreed by the Trust's Board. Plans to address the requirements identified by CQC had been submitted to the Chief Inspector of Hospitals, NHS Improvement (NHSI) and NHS England (via Wirral Health & Care Commissioning). The immediate steps initiated by the Board involved:

- action to stabilise and transition rapidly towards a substantive leadership team and Board of Directors;
- the appointment of an executive lead for quality & governance. Paul Moore joined the Board on 9th July 2018. He will provide the leadership to transform quality governance, and drive on behalf of the CEO and Board the Quality Improvement Plan in concert with the Executive Medical Director and Executive Director of Nursing;
- allocation of dedicated PMO support to accelerate and manage delivery of quality improvement actions;
- the Board refreshing its strategy, vision and organisational priorities to reflect more directly its ambition of safe, high quality and sustainable clinical services for patients, and its dedication towards providing outstanding care;
- initiation of a wide-ranging organisational development programme to strengthen and promote effective leadership at all levels – intended to continue to drive the programme to develop organisational culture;
- the executive lead for quality & governance has undertaken a initial review of quality governance capacity and capability within the Trust. He has put forward a series of recommended immediate improvements, which have been wholly supported by the Board, to simplify, rationalise and strengthen oversight and control of quality, safety and risk management. Over the coming months, the executive lead for quality & governance will lead on behalf of the Board the delivery of the CAC action plan, changes to the Board's committee structure, the approach to risk management and learning, and specifically target improvements in serious incident handling. This will focus on addressing better internal control, assurance and accountability for quality, risk management and exemplary corporate governance; and
- the Trust's full participation in enhanced monitoring by NHS Improvement and Wirral Health & Care Commissioning. The Trust is committed to working closely with all stakeholders to achieve system level improvement that will enable and support safe, high quality and sustainable clinical services now and in the future.

Members questioned Ms Holmes on a number of key points of concern, primarily those surrounding reported issues of leadership failings and bullying culture. Members also highlighted concerns regarding the recruitment of staff, general vacancies and how certain areas of the Trust had been labelled as 'not fit for purpose'. Members further highlighted concerns that the proposals for leadership training and investment in staff development did not appear to cascade through the entire organisation and staff morale remained low. The Chair identified that the Overview and Scrutiny Committee would be keen to hear from staff, RCN and/or Union Representatives to seek reassurance and hard evidence that these particular issues were being satisfactorily addressed.

The Chief Executive Officer Wirral University Teaching Hospitals NHS Foundation Trust re-affirmed that the Trust had a zero tolerance attitude to bullying and was happy to share the organisational development plan and that there was a general view that the above mentioned issues were getting better.

She added that Members would see the changes and Members of the Overview and Scrutiny Committee were invited to view, first hand, some of the plans in action. The Chair suggested that such visits be arranged through Healthwatch Wirral.

Further questioning took place on CQC areas of concern and the Wirral University Teaching Hospital NHS Trust's Improvement Plan. Members requested that the Improvement Plan be forwarded to the Health and Care Performance Panel for ongoing review.

**Resolved – That**

**(1) the report be noted;**

**(2) a copy of the CQC inspection report and the Wirral University Teaching Hospital (WUTH) NHS Trust's Improvement Plan be provided to the Health and Care Performance Panel for review; and**

**(3) Overview and Scrutiny Members wishing to visit the WUTH NHS Trust liaise with Healthwatch Wirral to assist with the planning of such visits.**

19 **SEACOMBE BIRTHING CENTRE / HIGHFIELD UNIT - IMPACT (VERBAL UPDATE)**

Gary Price, Director of Women and Children - Wirral University Teaching Hospital (WUTH) NHS Trust and Debbie Edwards, Divisional Director of Nursing and Midwifery WUTH NHS Trust introduced a short video and presentation that highlighted the impact of the Seacombe Birthing Centre / Highfield Unit and the services provided in the heart of the community.

Ms Edwards informed that the Seacombe Centre had been selected as an 'early adopter' site having been the location of an unused nursery with an identified demand for locally provided midwifery care (including birthing). Funding had been identified and confirmed to help mothers to be with a service of continuity of care throughout pregnancy, birth and on to post-natal care. The service had been shown to provide a more flexible service for women, despite some initial concerns regarding staffing cover i.e. on call arrangements.

Ms Edward's presentation informed that the National Maternity Review – Better Births had identified:

- How important it was for women to know and form a relationship with the professionals caring for them.
- A preference to be cared for by one midwife or a small team of midwives throughout the maternity journey. Providing better support for women, and enabling midwives to better meet their needs, identify problems and provide a safer service



- Team Continuity model a ‘team of 4-6’ that can operate in several ways – including examples based of annualised hours, giving midwives the flexibility to manage their own time.

Ms Edward’s reported that since its establishment in February 2018, as at the end of July 2018 the Seacombe Birthing Centre had assisted in 24 Community Deliveries – 17 Home Births, 7 Births at the Seacombe Centre, and another 8 due within next 4 weeks.

Members were informed that safeguards were in place to ensure emergency cases were properly managed and each pregnancy was risk assessed to ensure clinical risks were minimised. The service also provided reduced pressure on hospital based triage services and enabled speedier assessment for mothers to be at the Seacombe Centre, providing the service closer to home. Members were very pleased to note that there had been no complaints at all regarding the services provided.

The Chair thanked Ms Edwards and Mr Price for their presentation, noting that the content had been extremely informative and it was pleasing to note the value placed upon staff by their patients.

**Resolved – That**

**(1) the presentation be noted; and**

**(2) Overview and Scrutiny Members wishing to visit the Seacombe Birthing Centre / Highfield Unit liaise with Healthwatch Wirral to assist with the planning of such visits.**

20 **URGENT CARE CONSULTATION (VERBAL UPDATE)**

Jacqui Evans, Assistant Director Integrated Commissioning Programme introduced a high level update presentation on the Urgent care Consultation currently being undertaken. Ms Evans explained that a formal report had been planned for dissemination to the Adult Health and Care Overview and Scrutiny Committee, however due to further delays in the consultation process a verbal update had been provided instead.

The presentation informed that Provided Clinical Commissioning Groups (CCGs) had been provided with a set of standards that must be followed when providing urgent care services. Using feedback from a ‘listening exercise’, 2 options had been developed for review and public consultation would shortly begin on these options. A third option had been considered, but discounted during the process for a number of reasons. The presentation further informed that the key messages behind the Urgent Care Review and consultation were:

- the need to improve access to urgent care services across Wirral;
- an Urgent Treatment Centre based at Arrowe Park;
- no change to Wirral's only A&E or Children’s A&E services;

- the need for easier access and clearer choices for urgent care services;
- stronger links with primary care and bringing care closer to home; and
- re-design of NHS 111 to provide an improved service.

The Assistant Director Integrated Commissioning Programme informed that 2 specific options had been developed for public consultation, and opinions will be gathered on specific areas such as opening times and service offering. Members were apprised that it was important that the NHS provide services locally and the public would be asked what was important to them when considering where local services should be delivered across Wirral. The public will also be asked for their views on the current urgent care services as well as the newly proposed model.

Members questioned the Assistant Director Integrated Commissioning Programme seeking clarity on a number of points arising from her presentation. Members were informed that the planned service would provide a mixture of primary and clinical treatment i.e. urgent treatments that would be GP-led, involving senior nursing staff, therapists with access to social care and 3<sup>rd</sup> sector advice – primary and community care working together.

At the suggestion of the Chair, it was agreed that pre-scrutiny would take place on proposals at a special joint meeting of the Adult Care and Health, and Children and Families, Overview and Scrutiny Committees to be held in early November 2018. In addition, a confidential briefing note on proposals should also to be circulated to Members of the Overview and Scrutiny Committee in the week of 19 September 2018.

Given Members concerns regarding parking and transport issues relating to options for the Arrowe Park location, it was suggested that a Transport Steering Group be convened as soon as practicable.

#### **Resolved – That**

- (1) the presentation be noted;**
- (2) a special meeting of the Adult Health and Care and the Children and Families Overview and Scrutiny Committees be arranged for November 2018 to consider the proposals for Urgent Care Services; and**
- (3) a Transport Steering Group meeting be arranged at the earliest opportunity to review the options proposals.**

#### **21 PHLEBOTOMY SERVICE UPDATE**

Simon Banks Chief Officer, NHS Wirral Clinical Commissioning Group (CCG) presented his report that provided an update on the recent re-commission and implementation of the Community Phlebotomy Service, as commissioned by NHS Wirral Clinical Commissioning Group. The report informed that the new service, providing more clinics across Wirral, longer opening hours (8am -

6pm) and offering pre-booked appointments and drop in clinics, had commenced on 1 July 2018 and was available at 45 different locations across Wirral.

Mr Banks provided the Overview and Scrutiny Committee with further details on the service regarding how communications and updates were being provided to all GP practices throughout the implementation process, and how as at 31 July only 3 patient complaints had been received by NHW Wirral CCG since the launch of the service. He added that this was a significant improvement compared to the number of complaints received previously, and considering that the service manages approximately 16,000 blood tests a month.

Members noted that at this stage in the process 60% of GPs were fully conversant with the new options and that the CCG was working closely with Healthwatch Wirral to improve the figures.

Members were informed that the Community Phlebotomy Service will continue to support the *Healthy Wirral* agenda as part of the Wirral Plan 2020 by helping to support Wirral residents to keep as healthy as possible and reduce health inequalities, impacting upon all residents in all Wards within the Borough.

**Resolved – That the report be noted.**

## 22 **2018/19 QUARTER 1 WIRRAL PLAN AND HEALTH AND CARE PERFORMANCE**

Mr Jason Oxley, Assistant Director Health and Care introduced the report of the Director for Care and Health (DASS) that provided the 2018/19 Quarter 1 (April – June 2018) performance report for the Wirral Plan pledges under the remit of the Adult Care and Health Overview and Scrutiny Committee. The report, which was included as Appendix 1, provided a description of the progress in Quarter 1 as well as providing available data in relation to a range of outcome indicators and supporting measures.

The report also included further performance information that had been requested by Members to enable effective scrutiny. Detailed graphics / information on the Adult Social Care and Health Performance Overview were also included as an appendix to the report.

Mr Oxley informed that the report had been further developed following Member feedback and included key performance data covering the areas of health and social care.

Members were apprised of the key performance areas since the last report to the Overview and Scrutiny Committee, particularly in relation to the following:

- The employment rate for people over 50 had reached its highest rate since the plan began (38.4%). Work continued to explore ways to promote employment opportunities in later life.

- The latest figures showed that healthy life expectancy for males had increased to 61.4 up from 61.1. However in the same period healthy life expectancy for females had decreased from 61.7 to 60.3. Further analysis was being undertaken to determine the factors involved.
- The Employment rate aged 16-64 Equality Act core or Work Limiting Disabled measure had increased to its highest since the plan began at 47.5% up from 44.1% last quarter. This was an increase of 10% since the start of the plan. Wirral was closing the gap on the North West (49.5%) and National average (53.9%) which both remained static this quarter.
- In Quarter 1 23 more disabled people were in receipt of personal budgets; 616 adults (compared to 605 last Quarter. Being in receipt of personal budgets allowed people more choice and control over their lives and the support they received.
- Wirral Metropolitan College's Supported Internship Programme had now successfully supported 30 people with a Learning Disability into full time employment.
- In Quarter 1 there had been an increase in domestic abuse cases referred to the Family Safety Unit; 276 cases, compared to 238 in the previous Quarter. A seasonal spike in referrals from around May as weather conditions improve can be a catalyst for increased alcohol consumption, and the number of cases dealt with by the MARAC had also increased as a result of this, and Wirral MARAC case rates are higher than similar force and national benchmarks.

Members thanked Mr Oxley for his report, and asked if further information be provided on the definitions of healthy life expectancy vs life expectancy?

**Resolved – That the report be noted.**

## 23 **HEALTH AND CARE PERFORMANCE PANEL - TERMS OF REFERENCE**

The Chair introduced her report that sought approval for the terms of reference for the re-established Health and Care Performance Panel for the 2018/19 municipal year, and confirmation of membership of the Panel as agreed at the meeting of the Adult Care and Health Overview and Scrutiny Committee at its meeting held on 27 June 2018, and to confirm the additional nominations submitted to the Chair after that date.

It was agreed that the re-established Health and Care Performance Panel would assist in the further examination, evaluation and monitoring of the performance of health and social care providers in Wirral, and that membership for the 2018/19 municipal year would comprise of the following Members:

- Cllr Bruce Berry (Con)
- Cllr Wendy Clements (Con)
- Cllr Tony Cottier (Lab)
- Cllr Phil Gilchrist (LibDem)
- Cllr Moira McLaughlin (Lab)
- Cllr Julie McManus (Lab)
- Cllr Christina Muspratt (Lab)

**Resolved - That**

**(1) the proposed terms of reference for the Health and Care Performance Panel be approved; and**

**(2) membership of the Health and Care Performance Panel be confirmed as:**

- Cllr Bruce Berry (Con)
- Cllr Wendy Clements (Con)
- Cllr Tony Cottier (Lab)
- Cllr Phil Gilchrist (LibDem)
- Cllr Moira McLaughlin (Lab)
- Cllr Julie McManus (Lab)
- Cllr Christina Muspratt (Lab)

**24 ADULT CARE AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE - WORK PROGRAMME UPDATE**

The Chair introduced her report considering the work programme for the Adult Care and Health Overview and Scrutiny Committee that should align with the corporate priorities of the Council, in particular the delivery of the Wirral Plan pledges which are within the remit of the Committee, and reflect the health scrutiny functions delegated to the Committee.

The Chair thanked Members who had attended the Clinical Senate Scrutiny Workshop held in July 2018, and the earlier overview of workshop outcomes, adding that she would encourage attendance at future workshops on the subject of Mental Health, and informed of the upcoming 'Risk and Scrutiny' workshop to be held on 2 October 2018.

**Resolved – That**

**(1) the proposed Adult Care and Health Overview & Scrutiny Committee work programme for 2018/19, be approved; and**

**(2) the Clinical Senate Scrutiny Workshop Report be noted, and the addition of potential Clinical Senate input to the Adult Care and Health Overview & Scrutiny Committee work programme for 2018/19 be approved.**