



**AGENDA PAPERS MARKED 'TO FOLLOW' FOR  
HEALTH SCRUTINY COMMITTEE MEETING**

Date: Tuesday, 12 February 2013

Time: 6.30 pm

Place: Room 7 and 8, Quay West, Trafford Wharf Road, Trafford Park, M17 1HH

<b>A G E N D A</b>	<b>PART I</b>	<b>Pages</b>
4.	<b>UPDATE ON THE SHADOW HEALTH AND WELLBEING BOARD</b>	1 - 10
	To receive an update on the operation Shadow Health and Wellbeing Board prior to its establishment as a decision making body in April 2013.	
8.	<b>RESPONSE TO THE HEALTH SCRUTINY COMMITTEE'S LETTER: AGEING WELL REVIEW</b>	11 - 14
	To receive, for the Committee's consideration, the response to the letter dispatched shortly after Health Scrutiny Committee on 17 October 2012 in respect of the recommendations arising from the Ageing Well review.	

**THERESA GRANT**  
Chief Executive

Membership of the Committee

Councillors J. Lloyd (Chairman), J. Lamb (Vice-Chairman), S. Taylor, J. Brophy, Mrs. A. Bruer-Morris, D. Butt, Mrs. V. Ward, K. Procter, J. Holden, J. Harding, Mrs. J. Wilkinson and B. Shaw (ex-Officio)

Further Information

For help, advice and information about this meeting please contact:

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## Health Scrutiny Committee - Tuesday, 12 February 2013

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This agenda was issued on **Thursday, 7 February 2013** by the Legal and Democratic Services Section, Trafford Council, Quay West, Trafford Wharf Road, Trafford Park, Manchester, M17 1HH.

## TRAFFORD COUNCIL

**Report to:** Council  
**Date:** 12<sup>th</sup> February 2013  
**Report for:** Information  
**Report of:** Executive Member for Health and Wellbeing

### Report Title

**Progress Update on the Shadow Health and Wellbeing Board**

### Summary

**The Health and Social Care Act which received the Royal Assent in March 2012 requires local authorities to establish a Health and Wellbeing Board (HWB) by April 2013. This board will be a formal committee of upper tier and unitary authorities under section 102 of the Local Government Act 1972.**

**A Shadow Health and Wellbeing Board for Trafford was established in September 2011. This paper summarises the progress of the Health and Wellbeing Board during the shadow year of 2012-2013.**

### Recommendations

- 1. That OSC note the progress of the Shadow Health and Wellbeing Board.**

Contact person for access to background papers and further information:

Name: Imran Khan, (Partnerships Officer). Ext. 1361.

### Background Papers:

Health and Social Care Act 2012  
Equity and Excellence – Liberating the NHS (Government White Paper)  
Report to the Executive (25/07/2011) – Proposal to Establish a Shadow Health and Wellbeing Board in Trafford

## **Background**

- 1.1 Trafford Council has been engaged in the Department for Health's programme of 'Early Implementers' of Health and Wellbeing Boards. This programme includes over 130 councils and early engagement has proved useful in sharing learning and influencing the approach of the Department of Health.
- 1.2 In order to take this forward a joint Working Group, which forms part of the wider Transformational Change programme for Health arrangements, has been established to oversee the project. This is chaired by Deborah Brownlee, Corporate Director for Children and Young People's Services, and has met frequently since the start of the 2011.
- 1.3 During March 2011 the group hosted a multi-agency workshop across the public and voluntary sector to discuss and debate a Health and Wellbeing Board for Trafford. This was useful in helping to shape and define the focus, priorities and governance arrangements for Trafford's Health and Wellbeing Board.
- 1.4 The workshop concluded that the Trafford Health and Wellbeing Board should be developed in ways that maximise the opportunities and minimise transition risks for the Trafford public sector economy.
- 1.5 The following principles were developed as an indicative 'transition strategy' from the workshop:
  - Provide a smooth transition for the current Health and Wellbeing Partnership Board and Joint Commissioning governance arrangements.
  - Preserve key assets of skills, knowledge, experience and 'organisational memory' within the local health and wellbeing delivery system.
  - Maximise 'opportunity management' during the health system reconfiguration.
  - Provide for business continuity, risk minimisation and stable exit management of the PCT up to its statutory close in April 2013.
  - Provide stability, clear consistent leadership and support during the system transition.

## **2. Scope of the Shadow Health and Wellbeing Board (SHWB)**

- 2.1 The primary purpose of the Shadow Health and Wellbeing Board is to prepare the Council and the local Clinical Commissioning Group for the statutory roles of the formal Health and Wellbeing Board. The SHWB's focus will be to provide the leadership required to improve the health and wellbeing of the population of Trafford.

- 2.2 The SHWB will be responsible for overseeing the production and delivery of a joint health and wellbeing strategy (JHWS) which will be based on the Joint Strategic Needs Assessment (JSNA).
- 2.3 The SHWB will monitor the delivery of several outcomes covering public health, children and adult social care. The SHWB will also be responsible for ensuring that health outcomes within the 'Trafford 2021 vision' are delivered against.
- 2.4 The SHWB will also be responsible for reviewing the commissioning plans of the clinical commissioning group and the local authority with regard to how they address the needs identified in the JSNA and those outcomes written into the health and wellbeing strategy.
- 2.5 The SHWB will continue as the thematic lead for health and wellbeing within the Local Strategic Partnership and as such will have a key input into the wider determinants of health such as housing and the economy. The nature of the relationship between the health and wellbeing board and wider LSP will emerge in the shadow year.
- 2.6 The board will develop a set of health and wellbeing outcomes; these will be strongly influenced by the national public health outcomes framework and the JSNA.
- 2.7 The board will have due regard to the annual report of the Director of Public Health which will formally be presented to the board each year.
- 2.8 The board will be part of the assurance process for making sure that processes are in place to protect the public's health in the event of an emergency.

### **3. Shadow Health & Well Being Board Progress Update during 2012/13**

- 3.1 Trafford has a long history of direct partnership working to tackle health issues and a number of structures sit behind this. The formation of a shadow Health and Wellbeing Board in September 2011 brought together these arrangements whilst presenting an opportunity to streamline structures which address the five principles above.
- 3.2 The former Joint Commissioning Board (Adults) and the Health and Wellbeing Partnership have been formally disestablished and a new SHWB along with a Joint Strategic Commissioning Group have formed to take their place.
- 3.3 The Joint Strategic Commissioning Group is a managers/officers group comprising of Commissioning Managers from Trafford Council and NHS Trafford (to be superseded by the local Clinical Commissioning Group commissioners during 2012/13). It has responsibility for taking action and developing and delivering strategies and plans which will implement the commissioning intentions resulting from the existing Joint Health and

Wellbeing Strategy. It is also be responsible for updating the Joint Strategic Needs Assessment (JSNA).

The Joint Strategic Commissioning Group reports on progress to the Shadow Health and Wellbeing Board. It will also be a focus for engagement with local communities and will oversee the work of partnership groups including the Learning Disability Commissioning Group, the Mental Health Strategic Leadership Group and the ICES Board. Finally it also oversees the work of appropriate sub-groups set up to deliver the priorities within the strategy.

- 3.4 The SHWB has strengthened relationships to ensure that commissioning arrangements for children and young people are linked to the work of the SHWB through the Joint Commissioning Board (CYPS) and Children's Trust Board.
- 3.5 On this basis, the SHWB has started to oversee the development of strategies and plans to address health inequalities and improve health and wellbeing and to have an overview of the delivery of the priorities set out in the relevant, existing joint strategies. A Joint Strategic Needs Assessment (JSNA) has been produced and published and is available on the Info Trafford web portal at <http://www.infotrafford.org.uk/jsna>. The Census 2011 data has now been published by the Office for National Statistics (ONS) and the JSNA will be refreshed from 1<sup>st</sup> April 2013 with this new information through the JSNA Steering Group.
- 3.6 The SHWB has overseen the development of the draft Trafford Joint Health & Well Being Strategy (JHWS) 2013-16 with full and summary versions available. The strategy has been co-produced with key stakeholders (local residents, statutory bodies, voluntary sector and the Trafford Partnership). Currently the JHWS is in Phase 3 consultation and engagement and work is continuing during January – March 2013 to receive feedback on the identified eight priority areas (childhood obesity, child and emotional wellbeing, physical activity, reduction in alcohol harm, long term conditions, deaths from heart disease, stroke and cancer, support for people with enduring mental illness and dementia and reduce common mental disorders). The JHWS will be formally launched at the Trafford Partnership Annual Conference in April 2013.
- 3.7 Members of the SHWB (elected members, officers and CCG) attended a HWB simulation event organised by the North West Transition Alliance in 2012 to develop their insight on the development needs of the Shadow Board. The development plan will be used to further the work programme of the SHWB for 2013/14 through a Board development workshop planned for February 18<sup>th</sup> 2013 facilitated by the Transition Alliance.
- 3.8 A draft Communications and engagement plan has been presented to the SHWB to ensure communication of the role, work programmes and achievements of the Board. The Trafford Partnership support team cascade regular briefings and news updates within the established communication channels.

3.9 The SHWB has received regular updates on the establishment of the Local HealthWatch from the transition from LiNK. The position of Chair of the Trafford HealthWatch has been appointed to and is a member of the SHWB.

#### **4. Governance and Accountability**

4.1 The SHWB will advise the Council and the local commissioning group in its first year. The SHWB will deliver against the outcomes of the Trafford Partnership. As such, it will also act as the thematic partnership responsible for co-ordinating the integration of commissioning of the health and wellbeing agenda across adult social care, children services and public health.

4.2 A representative of the board will sit on the Trafford Partnership Executive and will be responsible for ensuring the SHWB is able to influence the work of other thematic partnerships.

4.3 The SHWB will be expected to meet in public with minutes published and available on the Council website. Certain items will need to be considered in private for reasons of confidentiality or exemption under the provisions of the Council's Access to Information Rules. The intention is for the SHWB to meet on a bi-monthly basis as a minimum during 2012-13 year. However the Board reserves the right to call meetings of the board at any time during the shadow year to respond to priority issues. The Board will be formally supported by Democratic Services, with technical support being provided by the Corporate Director – Communities and Wellbeing and the Partnerships team.

4.4 When the Board becomes fully operational from April 2013, it will be formally part of the Council's political decision-making structure with the Chair and membership appointed at the Annual Meeting of the Council. In the interests of good governance, it is recommended that arrangements associated with the committees of the Council are introduced in respect of the operation of the SHWB to ease the transition in 2013. Such arrangements include quorum for meetings, substitute members, the process of decision-making, status of reports and member conduct.

4.5 The scrutiny function at Trafford Council has recently undergone a review and the outcome was determined at the Annual Meeting of the Council in May 2012. It has been recognised that developing informal relationships between the SHWB and the Health Scrutiny function would be beneficial at this time of significant change both nationally and locally and invitations to attend meetings of the SHWB are extended to the Chair and Vice-Chair of Health Scrutiny at Trafford Council.

4.6 The Chairman of the SHWB will seek to hold regular meetings between the Chairman and Vice Chairman of Scrutiny Members for Health to maintain an awareness of issues in readiness for the adoption of formal powers provided for in the Health and Social Care Act.

4.7 A copy of the terms of reference for the SHWB is attached at Appendix 1. These will be further reviewed during the shadow year and will need to be

revised as the health and wellbeing board is formally constituted under the Act.

## **5. Membership**

5.1 The Shadow Health and Wellbeing board has opted for a small membership in line with the guidelines set out by the Department of Health. The membership of the board during 2012/13 will be as follows:

- Executive Member for Community Health and Wellbeing
- Executive Member for Adult Social Services
- Executive Member for Supporting Children and Families
- Shadow Executive Member for Community Health and Wellbeing
- Non-Executive Member GM Cluster Board
- Corporate Director of Communities and Wellbeing
- Corporate Director of Children and Young People
- Joint Director of Public Health
- Chair of Pathfinder Clinical Commissioning Group
- Nominated Director Pathfinder Clinical Commissioning Group
- Pathfinder Clinical Commissioning Group Lay Member
- Chair of LINK until such time that it becomes Health Watch

5.2 The Executive Member for Community Health and Wellbeing will chair the board and a nominated individual will serve as vice chair. Where a discussion is to be held on a particular subject; for example maternity services, other stakeholders will be invited to attend the board.

5.3 The SHWB recognises that the membership of the board does not encompass all those who have an interest in the wider determinants of health and wellbeing. During its shadow year, the board will work with interested parties to provide a forum whereby partners can influence discussion and deliver outcomes. It is envisaged that present structures within the Trafford Partnership provide this opportunity.



## **Appendix 1**

### **TRAFFORD SHADOW HEALTH & WELLBEING BOARD**

#### **TERMS OF REFERENCE**

##### **1. Purpose**

The core purpose of the Health and Wellbeing Board (HWB) is to lead on the strategic co-ordination of commissioning across the NHS, social care and public health to secure better outcomes for the population, better quality of care for patients and care users and better value for the taxpayer.

The Trafford shadow Health & Wellbeing Board (HWB) will be the key partnership for improving and promoting the health and wellbeing of residents. Its focus will be on securing the best possible health outcomes for all people.

During this initial shadow phase of the HWB, we will be guided by the following principles:

##### **2. Operating Principles**

We recognise that it is important to establish how the shadow Board will operate when bringing together representatives from organisations with different cultures and ways of working. To work effectively together, during 2012/13 we agree to further develop and refine the following principles:

- There is a shared commitment to make the shadow Health and Wellbeing Board effective and work for the people in Trafford.
- Board members will have respect for each other's organisational culture, and relationships will be based on trust.
- Board members will be clear at the outset about what can and cannot be agreed.
- Board members will be understanding in relation to respective governance structures.
- Members will endeavour to ensure that organisational boundaries are not a hindrance.
- The shadow Board will be flexible in relation to the need to work at differing levels, from the very local to sub regional as appropriate.
- Due regard will be given to existing local structures that are effective and challenge those which do not provide value to the health system of Trafford.
- All decisions will be based on best available evidence.
- Data sharing for performance across partner organisations will be the norm not the exception.
- There is recognition that the role and functioning of the Board is evolving and will be subject to regular review by the Board.
- To work in partnership and collaborate with other non-health related strategic partnerships in Trafford.

### **3. Role**

The role of Trafford's shadow Health and Wellbeing Board will be to:

- Act in shadow form to develop itself into a functional Statutory Health and Wellbeing Board which can execute its statutory responsibilities from April 2013.
- Provide strong leadership and direction of the health and wellbeing agenda by agreeing priority outcomes for health and wellbeing.
- To develop a shared understanding of the needs of the local population and lead the statutory Joint Strategic Needs Assessment (JSNA).
- Seek to meet those needs by producing a Joint Health and Wellbeing Strategy for Trafford and ensure that it drives commissioning of relevant services.
- Drive a genuine collaborative approach to commissioning of improved health and care services which improve the health and wellbeing of local people and reduces health inequalities.
- Promote joined-up commissioning plans across the NHS, social care and public health.
- Have oversight of local Clinical Commissioning Group (CCG) and local authority commissioning plans.
- Operate as a thematic partnership within the context of the Sustainable Community Strategy *Trafford 2021* and align its work to the Trafford Partnership in that capacity.
- Improve local democratic accountability and engage with the Health and Wellbeing Forum which includes Trafford residents, service providers and other key stakeholders to understand health and wellbeing needs in Trafford.
- Monitor and review the delivery of health and wellbeing improvements and outcomes through robust performance monitoring.

Clinical Commissioning Group:

- The Health and Social Care Act 2012 sets out that every CCG will have a defined geographic area and:
- Work in partnership with the relevant local authorities and health and wellbeing boards for that area.

NHS Commissioning Board:

The NHS Commissioning Board will seek the views of emerging shadow health and wellbeing boards prior to establishing any CCG as part of the authorisation process.

### **4. Membership**

Membership of the Shadow Health and Wellbeing Board during 2012/13 will comprise of:

- Executive Member for Adult Social Services
- Executive Member for Community Health and Wellbeing
- Executive Member for Supporting Children and Families
- Shadow Executive Member for Community Health and Wellbeing

- Non Executive Director GM Cluster Board
- Corporate Director of Communities and Wellbeing
- Corporate Director of Children and Young People
- Joint Director of Public Health
- Chair of Pathfinder Clinical Commissioning Group
- Nominated Director Pathfinder Clinical Commissioning Group
- Pathfinder Clinical Commissioning Group Lay Member
- Chair of LINK until such time that it become HealthWatch

The Executive Member for Community Health and Wellbeing will chair the board and a nominated individual will serve as vice chair.

## **5. Meeting Arrangements**

### **Notice of Meetings**

Meetings of the Board will be convened by Trafford Council, who will also arrange the clerking and recording of meetings (a member of the Council's Democratic Services Team will act as Clerk).

### **Chairmanship**

The Shadow Board will appoint Trafford Council's Executive Member for Community Health and Wellbeing as lead and accountable authority, to chair the Board.

The Board will elect a Vice-Chairman representing the partners. The Vice-Chairman will not be from the Trafford Council.

### **Quorum**

The quorum for all meetings of the Board will be a minimum of 5 members with at least two Local Authority and two Clinical Commissioning Group members present.

### **Substitutes**

Nominating groups may appoint a substitute member for each position. These members will receive electronic versions of agendas and minutes for all meetings. Notification of a named substitute member must be made in writing or by email to the Clerk. Substitute members may attend meetings after notifying the Clerk of the intended substitution before the start of the meeting either verbally or in writing. Substitute members will have full voting rights when taking the place of the ordinary member for whom they are designated substitute.

### **Decision Making**

It is expected that decisions will be reached by consensus; however, if a vote is required it will be determined by a simple majority of those members present and voting. If there are equal numbers of votes for and against, the Chairman will have a

second or casting vote. There will be no restriction on how the Chairman chooses to exercise a casting vote.

### **Meeting Frequency**

The Shadow Board will meet bi monthly initially for development purposes and to agree priorities. In its shadow year, the SHWB reserved the right to call additional meetings within the intervening period to respond to priority issues. These meetings will be subject to the same notice period.

### **Status of Reports**

Meetings of the Board shall be open to the press and public and the agenda, reports and minutes will be available for inspection at Trafford Council's offices and on Trafford Council's website at least five working days in advance of each meeting. This excludes items of business containing confidential information or information that is exempt from publication in accordance with Part 5A and Schedule 12A to the Local Government Act 1972 as amended. The same principals will apply to information from NHS Trafford as a partner organisation on the board. Other participating organisations may make links from their website to the Board's papers on Trafford Council's website.

### **Members' Conduct**

Where appropriate rules and regulations governing the Code of Conduct of Board members will apply. Board members will be expected to declare appropriate interests where necessary.

### **Amendment of the Constitution**

The Board may vary its constitution by a simple majority vote by the members provided that prior notice of the nature of the proposed variation is made and included on the agenda for the meeting.

## **6. Governance and Accountability**

- The Shadow Board will be accountable for its actions to its individual member organisations.
- There will be sovereignty around decision making processes. Representatives will be accountable through their own organisations for the decisions they take. It is expected that Members of the Board will have delegated authority from their organisations to take decisions within the terms of reference.
- Decisions within the terms of reference will be taken at meetings and will not normally be subject to ratification or a formal decision process by partner organisations. However, where decisions are not within the delegated authority of the Board members, these will be subject to ratification by constituent bodies.
- It is expected that decisions will be reached by consensus.

# Agenda Item 8

**Deborah Brownlee**  
Corporate Director,  
Communities & Wellbeing

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for: Andrea Glasspell

Telephone number: 0161 912  
4611

Our ref:

Your ref:

Date: 05/02/2013

Dear Councillor Lloyd and Councillor Lamb,

**Re: Health Scrutiny Committee**

With regards to your letter dated 20<sup>th</sup> November 2012, I am writing in response to the query in relation to Recommendation 23 and 25.

Within Communities and Wellbeing a wide range of communication methods are deployed to enable meaningful engagement with a diverse range of stakeholders. Whilst there is a place for internet based communication, it is recognised that this form of communication does not reach everyone, particularly, people from the vulnerable groups that we are committed to supporting.

Our approach to effective communication is multi-tiered, and is based upon strong partnerships with service users, carers, professionals and providers, supported by strategically commissioned services which enable two way communication with wider community networks and individual stakeholders, including self funders.

The Provider Partnership forums that the Commissioning and Service Development Directorate facilitate have a strong information sharing focus, and a commitment by all members to the effective cascading of information to their users and carers. These include: Carer's Services Board, Residential, Nursing, BME, Homecare, Mental Health and Learning Disability Service Improvement Partnerships. In addition, there are a number of user and carer partnerships which are also used to provide information about services, developments and consultations directly to user and carer networks. These include: Trafford's Citizen Reference Board, Autism and Learning Disability Partnership Boards.

To underpin the above networks a number of other roles and functions have been strategically commissioned to facilitate strong communication with

vulnerable individuals and groups. These include a mixed model to support brokerage, and a range of information and advice services.

Brokerage Support has been commissioned through a number of voluntary and community sector organisations that have strong relationships with their communities. For example, Age Uk Trafford are commissioned to provide Support Brokerage to older people and are able to provide bespoke information and advice to older people who are in need of information, advice and guidance about residential and nursing homes.

The 'HelpinHand' application is a project lead by Citizens Advice Trafford in partnership with Trafford Information Network. The multimedia application helps people find the nearest source of information and advice on a particular topic wherever they are in the borough. The App is being used by information professionals across Trafford as a mechanism for referring people on to the right organisation so that they get the accurate, up-to-date information that meets their needs.

Other information and advice options that CWB commission or have developed in partnership with providers include the wide range of information and advice leaflets produced and updated by Trafford Carer's Centre, and the drop in facility commissioned through LMCP Care Link. This is a community facility in Old Trafford which supports the provision and interpretation of information for South Asian Elders.

Whilst it is acknowledged that internet based information is not appropriate for everyone, CWB have developed My Way, the Adult Social Care Website which provides a further information channel, which is accessible and user friendly. The format focuses on the use of photographic images to help people to get the right information, the website also has the option of a talking pages which supports people who might have difficulties reading or a sight impairment. To support more access to internet based information by older people, CWB also invested in the Age Uk Trafford Silver Surfer project, which supports volunteers to develop older people's computer skills in their own home.

I hope the above information provides enough detail about our multi-faceted approach to communication with vulnerable adults. Please do not hesitate to contact me if you require any more information.

Yours sincerely,

**Andrea Glasspell**  
**Programme Manager – Personalisation and Market Development**



## TRAFFORD COUNCIL

### Democratic Services

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Helen Mitchell

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Our ref:  
Your ref:  
Date: 22 November 2012

Dear Councillors Young, Coupe and Dr. Barclay

### **Health Scrutiny Committee – 17 October**

We wish to take this opportunity to thank you and supporting officers for your recent attendance at Health Scrutiny Committee to discuss the Executive's response to the ageing well review.

As you will recall, a small number of the recommendations arising from the review were not agreed and we would like to take this opportunity to request that the Executive reconsider their response; particularly in relation to the following recommendations.

**Recommendation 14:** *Members would like to be directly informed by email of any consultations on services potentially affecting vulnerable groups before the consultations are publicly launched.*

This recommendation was not accepted by the Executive as they felt that there were challenges associated with advising all Members of consultations. Furthermore, it was noted that it was the communications team's overall responsibility to ensure such communication with Members. The Committee felt that it was essential for all Members of Council to know when consultations were taking place in order to allow for them to understand potential service changes and to contribute to the consultation where appropriate. The Committee requested that the Executive Member, Transformation and Resources respond to this request.

**Recommendation 23 and 25:** *Consider a more comprehensive directory comparable to Wrexham Borough Council's if funding or sponsorship were obtainable and ensure that information is not solely internet based and in particular consider re-publishing of the Council's A-Z of services.*

Members felt that there is too much emphasis on electronic modes of communication and that this could be a barrier to residents engaging with services provided by the Council and

other organisations. There was an undertaking given at the meeting that the Executive would take this matter back to the Partnership. The Committee would like to be informed of the outcomes of these discussions and in light of this, whether or not the Executive have reconsidered its original position.

We very much look forward to your responses and that of the Executive Member, Transformation and Resources by Wednesday 2 January 2013.

Yours sincerely

**Cllrs Judith Lloyd and John Lamb**  
**Chairman and Vice Chairman, Health Scrutiny Committee**  
CC. Cllr Williams, Anne Higgins, Ian Duncan.