

Adult Social Care and Health Overview and Scrutiny Committee

Wednesday 22 June 2022

Minutes

Attendance

Committee Members

Councillor Clare Golby (Chair)
Councillor John Holland (Vice-Chair)
Councillor John Cooke
Councillor Joy Coventry-Moreton (Nuneaton and Bedworth Borough Council (NBBC))
Councillor Tracey Drew
Councillor Dave Humphreys
Councillor Marian Humphreys
Councillor Christopher Kettle
Councillor Jan Matecki
Councillor Chris Mills
Councillor Penny-Anne O'Donnell (Stratford-upon-Avon District Council)
Councillor Kate Rolfe

Officers

Lynn Bassett, Sarah Duxbury, Zoe Mayhew, Nigel Minns, Isabelle Moorhouse, Pete Sidgwick and Paul Spencer.

Others in attendance

Chris Bain and Ben Clarke, Healthwatch Warwickshire (HWW)
Councillor Margaret Bell, Portfolio Holder for Adult Social Care and Health
David Lawrence Press

1. General

(1) Apologies

Apologies for absence from the meeting were received from Councillor Mandy Tromans (replaced by Councillor Dave Humphreys), Councillor Kyle Evans (NBBC, replaced by Councillor Joy Coventry-Moreton), Councillor Pam Redford (Warwick District Council), also from Dr Shade Agboola, Director of Public Health.

(2) Disclosures of Pecuniary and Non-Pecuniary Interests

None.

(3) Chair's Announcements

The Chair advised that Nuneaton and Bedworth Borough Council had appointed a new representative on the Committee, Councillor Kyle Evans. The new North Warwickshire Borough Council representative was Councillor Judy Macdonald. The Chair thanked retiring members for their service and welcomed new members to the Committee. It was noted that a number of presentations would be provided which had been circulated in advance by email.

(4) Minutes of previous meetings

The Minutes of the committee meetings held on 27 April and 17 May 2022 were approved as true records and signed by the Chair.

2. Public Speaking

None.

3. Questions to Portfolio Holders

Councillor John Holland had given notice of the following questions: The Joint Strategic Needs Assessment (JSNA) divided Warwickshire into 23 areas and identified the needs of each. How many of the areas have action plans in place to address inequalities? What progress is being made in meeting the needs identified?

Councillor Margaret Bell responded that three place-based partnerships had been established as part of the Integrated Care System (ICS) to look at local issues and feed into the Health and Wellbeing Board (HWBB). The Place Partnership Boards had taken on the JSNA activity and all were working on their respective action plans. She had attended a lot of their meetings. The priorities for each area would be based on the JSNA data and other data. This fed into the HWBB and on to the Integrated Care Partnership. Some of the priorities had changed post Covid. There continued to be updates for each area from available JSNA data. This work was fundamental, informing both priorities and the inequalities agenda.

Councillor Holland viewed it that nothing had been implemented and linked this to 'levelling up'. He gave an example from his local area of a priority to provide a new community centre, in a joint scheme involving both the District and County Council. This remained a priority for the Place Partnership. The Chair suggested that this local issue could be discussed outside the meeting, which the portfolio holder agreed to do. She did not agree with Councillor Holland's view that nothing had been done. The action plans were in place, some had been fulfilled and there had been delays impacted by the Covid pandemic.

Councillor Kate Rolfe referred to the shortage of care staff, using an example to show the challenges faced in arranging care packages. She asked the portfolio holder if this was happening more than should be the case. Councillor Bell agreed there was a challenge in getting care packages, which could impact on hospital discharges. End of life care was prioritised and once in

place, the health and care support were excellent. There were workforce challenges and endeavours to address this. Councillor Rolfe then referred to the difficulties faced by carers through the current cost of living increases. She asked if there was any statistical data on the impact for carers in Warwickshire. Councillor Bell did not have such data to hand. It was suggested that these items could be raised under the later agenda item which would give a workforce update.

Councillor Chris Kettle thanked the Portfolio Holder for pursuing with the Clinical Commissioning Group (CCG) an issue about provision of a new health centre linked to residential development. Councillor Bell added that this concerned the need for a broader consultation. The CCG had agreed to undertake that consultation and no decisions had yet been taken on the final scheme. This was followed by a discussion about planning and infrastructure contributions through Section 106 agreements. In Nuneaton, at Weddington an additional 5,000 homes would be built following a number of planning consents. The separate planning applications avoided contributions towards infrastructure costs, such as highways. There needed to be a holistic approach. It was clarified that Section 106 contributions from smaller sites could now be amalgamated and it was important that the planning authority had a dialogue with CCGs about impact and to give a strategic overview. Discussion took place about attracting the GPs / clinical staff to work in the new premises. Sometimes they were linked to an existing practice or GPs were employed through an alternate provider contract. There was an ongoing task and finish group on GP services looking at the issues raised, which would report in due course. Further points on the current planning system and the need to consider planning applications individually.

4. Questions to the NHS

None.

5. Approach to Levelling Up

Nigel Minns, Strategic Director for People introduced this item, supported by Sarah Duxbury, Assistant Director of Governance and Policy. In February, the Government published the Levelling Up White Paper, which outlined its strategy to “spread opportunity and prosperity to all parts of the country” by 2030, through twelve national missions. The missions were detailed in an appendix to the report. The approved Council Plan included a commitment to the Levelling Up agenda and to understanding what that meant for Warwickshire. Additionally, two reports had been considered by Cabinet setting out the overall direction on, and proposed approach to Levelling Up, with a planned further report in July after consideration by the four overview and scrutiny committees and a range of stakeholders.

The aim was to create a reference point for the Levelling Up agenda, complementing existing work and highlighting specific challenges and opportunities in the county. The report provided an outline of the emerging approach along with content tailored to this committee’s remit and to seek member input to feed into the subsequent report to Cabinet.

The detail of the report listed the twelve missions in the White Paper, and a diagram mapped these to the Council Plan areas of focus, showing a considerable degree of overlap. Equally there was overlap between the remits of the overview and scrutiny committees, the missions and areas of focus. Appendix 2 to the report set this out in more detail, highlighting the areas of most relevance to the remit of this Committee.

The report outlined the stakeholder engagement to date. Using the feedback received, alongside the ongoing engagement with partners and stakeholders, the working definition for Levelling up in Warwickshire was anchored around:

- Increasing opportunity and social mobility
- Reducing disparities
- Building community power
- Creating sustainable futures

The report then set out the key features of the overall approach, reflected in five key principles which complemented the Council Plan. Core to the Levelling Up agenda was the need to prioritise effort and activity to where it was most needed. Attention would be focussed on specific places and groups, determined by robust evidence, whilst enabling other places and communities to address local levelling up imperatives through more community powered approaches. Robust, credible data would be used at a variety of geographical levels to determine where interventions could have the biggest impact. The report outlined the frameworks which would be used. The Community Powered Warwickshire programme was a key lever for the Levelling Up approach and would be central to delivering the Council's vision.

Following approval of the Levelling Up approach, the Committee would be able to consider how it wished to track progress, through the related strategies, elements of the Integrated Delivery Plan, and the new Performance Management Framework.

The following questions and comments were submitted, with responses provided as indicated:

- Councillor Rolfe spoke of the difficult times presently with cost of living increases, people on low incomes, in poverty and reliant on food banks. The levelling up aspirations were wonderful, but there would be widening gaps, especially in areas perceived as affluent. It was questioned how the current position would be addressed.
- Nigel Minns responded that the challenges were recognised in this approach. A plan would not be set out at this stage. It was more about the overarching approach and principles, engagement and the start of the journey. There was a long way to go. It was important at this stage to have a 'golden thread' running through all strategies and could be argued previously that elements had been viewed in isolation. Councillor Rolfe linked poverty to poorer health.
- Councillor Holland supported the levelling up aims. Currently there were widening gaps with higher inflation benefitting those with assets and impacting most on those with lower incomes. The presentation had rightly been complex. Some things could be measured easily, an example being life expectancy, which according to data from the Office for National Statistics had reduced by two years. The geography was important, with a comparison made to the large areas used for the JSNA and the much smaller areas to measured crime data. More use could be made of local councillors' knowledge including town and parish councillors. He then referred to data showing that people with a mental health condition on average had a lower life expectancy by 20 years. He thanked officers for the presentation, welcoming the approach. Nigel Minns assured that there would be extensive engagement, including with very local councils and groups as part of the community powered approach.

- Councillor Marian Humphreys spoke about securing money to build new schools, nurseries and health facilities. There were challenges for rural areas with a lack of bus services and regular concerns from parents who did not secure their child a place at the local primary school. A need for wide engagement and at an early stage.
- Several members complemented the report.
- Councillor Matecki welcomed the ambition but was concerned at the potential to deliver this. He considered the current system was broken and there was too much focus on bringing in a new system.
- Chris Bain of HWW spoke about inequality through age discrimination, for both younger and older people. A need to 'age proof' when designing things like housing, transport, lighting and public spaces, as an essential part of levelling up. There were additional layers of challenge for older people from an ethnic minority group. Including these aspects at an early stage would be helpful. Nigel Minns acknowledged this as an important point, also referencing the combined challenges around age and rural isolation. This and the previous points from councillors were all being captured, to feed into the subsequent report.
- Councillor Drew raised points which rested within the remit of the Communities Overview and Scrutiny Committee and would be referred to that committee, when it met later in the day. They concerned transport infrastructure and delivery of priority road schemes. She reminded of the declaration on climate emergency and decisions to support active travel, with pedestrian, cycling and use of public transport. She suggested that this part of the document be updated accordingly to take the emphasis away from passive travel by car.
- The Chair referred to the State of Warwickshire document published last year. Several of the points raised in the levelling up report had been included in the earlier document, as activity which should be, but currently were not, being undertaken. She sought reassurance that they would be tackled as part of the levelling up process. The Chair then referred to regional levelling up and devolution. She was aware that the majority of the County's areas in deprivation were located in Nuneaton and Bedworth (N&B), also speaking on impacts for life expectancy and service provision for health and education. There were many good points in the document about the desired outcomes, but not the potential work which was needed to achieve them. In N&B there was a low starting point and huge disparities across the County. She sought more information in how the process would be undertaken to achieve the desired end point.
- Nigel Minns confirmed that many of the communities in deprivation were located in N&B, some were in North Warwickshire with others located elsewhere in the County. He had met with the chief executives of both councils who would prioritise those areas. Something different was required as there had been several initiatives over previous years. Currently the focus was on the overall approach and setting a priorities list strategy. The report would go to Cabinet and a series of action plans would be developed. It would then be for members to hold officers to account on how the actions and targets were being achieved. He was unable to comment on the regional relationships at this stage but acknowledged there would be aspects for both the sub-region and the West Midlands. The Chair responded that the regional element was included within the levelling up document.
- The Chair raised that some previous programmes and interventions had not been successful, evidenced by the resultant data. There was a need to change the approach to achieve the desired outcomes.
- Nigel Minns responded that some previous schemes may have been too siloed. This was a fundamental change of approach that all work had a levelling up focus to it. He used the 'health in all policies' approach as an example. For levelling up, all policies and strategies would be assessed to see how they contributed to levelling up and to ensure a coherent

holistic approach. This was about levelling up Warwickshire, so the community powered approach and broad engagement in a different way, was key.

- The Chair stated the need to level up Warwickshire internally, before looking at adjacent areas. There were significant disparities within the County which should be addressed as the priority. Nigel Minns confirmed that this was the focus. Looking at the wider levelling up agenda, it was unlikely that Warwickshire would be a priority when compared to many other urban deprived areas.
- The Chair sought a geographic breakdown of the numbers of questionnaires completed in each area of the County. Sarah Duxbury confirmed that the Voice of Warwickshire survey could be broken down. Currently, officers were reviewing and analysing the responses, and this information would be circulated. The Chair welcomed the focus on internal levelling up stating the need to look at the north of the County.
- Discussion about the bidding process for the first round of levelling up funding. There had been no successful bids in North Warwickshire. The Chair said this was project specific but formed part of the wider levelling up agenda. Examples were provided of the bids submitted in both N&B and North Warwickshire.

Resolved:

That the Committee:

1. Notes the report and asks Cabinet to consider the points raised above.
2. Refers the points raised on transport to the Communities Overview and Scrutiny Committee.

6. Workforce Update - the Care Market

The Committee received a presentation from Lynn Bassett, Organisational Development Team Manager and Zoe Mayhew, Strategy and Commissioning Manager within People Strategy and Commissioning. The presentation covered:

- National staffing picture – showing recruitment and retention, vacancies and a comparison between March 2021 and May 2022
- National context, with data on the increase in the number of homecare hours delivered and those it had not been possible to deliver equating to 671%
- Data on commissioned provision - comprising domiciliary care, specialist housing services, residential care, nursing homes, supported living services and extra care housing
- Learning and Development Partnership – showing examples of the support offer
- Staff learning and development – a coordinated approach with health, delivering Warwickshire specific training with a range of training offers, qualification programme, support for managers and sharing good practice
- A data slide on qualifications and training
- Training figures and training. In 2020/21 - 2,150 places attended; in 2021/22 - 3,091 places attended
- Impact of training, delivered in blended approach to increase flexibility. Keeping excellent attendance, with three-month reviews taking place to monitor impact.

- School careers support – the partnership was part of the careers hub program and was notified of career events and parents’ evenings
- College / university careers support – the partnership attended college career days to seek additional employees in either a permanent or bank role
- Promoting job vacancies – examples were provided of the range of methods used
- Recruitment support – the partnership worked with providers and other agencies to raise the profile of social care
- Impact of job vacancies and recruitment support - data for 2020/22 and 2022/23 on the number of jobs advertised, events held and what this work had achieved
- Staff retention and wellbeing – examples of the support and incentives available
- Next steps

Discussion took place on the following areas:

- Councillor Matecki spoke of the need for additional frontline carers, commenting that in Warwick district there were two vacancies for every unemployed person. The report did not mention overseas recruitment to fill vacancies. Officers replied that a proposal to do this was currently being formulated to attract carers from overseas on behalf of commissioned providers, as an enabler.
- Councillor Marian Humphreys praised home care services. She advocated the benefits of coordinated NHS and social care visits or better still having a hybrid health and care role to reduce duplication. She outlined the many aspects to care visits at home to meet the service users’ needs and the significant training requirements. She reiterated the value of these staff which should be recognised more and be promoted in schools to attract people to this service area.
- Chris Bain said this was a complex problem, both in Warwickshire and nationally. The image of social care and to a lesser extent health was a perception of older people who were in decline. To attract younger people, it was necessary to address this image and there was a role for the media to play. Some media reporting had a negative impact, which could deter people from working in these services. There were recruitment challenges across social care and many parts of the NHS, with alternate employments offering more money. Rates of staff turnover in some organisations were significant which was not helpful. This added to pressures with induction, training and embedding the organisation’s culture. The challenge was multi-layered and there was no quick fix. A need to start by repairing the image of health and social care to make it an attractive career.
- Councillor Mills echoed the points about making the service attractive to students, speaking of the potential for a career path into the NHS. Lynn Bassett responded that this was a challenge. Some of the methods were to emphasise the technology aspects, to use a practical approach whilst delivering information and to demonstrate the career potential.
- Councillor Cooke spoke on the recruitment aspects, commending the combined application form. He asked whether there was a sufficient advertising budget, which was confirmed and there was excellent support from the communications team too.
- Councillor Drew considered there was a service gap between social services and emergency response in the community by first responders. Referring to the meeting documents, there seemed little reference to preventative or community work. In her locality she was aware of an individual who repeatedly and inappropriately called for West Midlands Ambulance Service (WMAS). Filling the referenced gap in service would help to alleviate

pressures elsewhere in the NHS. On attracting carers, she noted that people had a range of needs, and 'one size' did not fit all.

- Zoe Mayhew spoke of the work within various parts of the NHS to triage and avoid unnecessary admission from A&E into the acute hospitals. Of the local acute trusts, George Eliot Hospital (GEH) had the best results for non-admittance from A&E. The three acute hospitals had recently confirmed that people who were conveyed to hospital by WMAS did need hospital care. The majority of people calling for an ambulance did need medical support. There were ongoing conversations about commissioning a low level, preventative service to help people to remain at home and manage their long-term conditions. Through primary care a lot of education was taking place on correct use of the 999 and 111 services, to reduce reliance on A&E services.
- The Chair asked if there may be other reasons why people were attending the GEH A&E department routinely and whether this indicated a shortage of primary care services. She would pursue this outside the meeting.
- Councillor Rolfe commented on the extremely difficult situation currently. She referred to the data that 2.2 million hours of care service had not been delivered nationally for the first quarter of 2022 and it was likely that this data had doubled over the last three months. She found this frightening and wanted to explore what this meant for Warwickshire service users in real terms.
- Zoe Mayhew advised that there were a number of contributing factors. The data would include some people putting informal alternatives in place with family members bridging the gap. The Council had used its in-house reablement service extensively, particularly for domiciliary care and some interim solutions had been commissioned, including bedded provision to assist discharge from hospital. In Warwickshire, it had not reached the situation where people were in absolute crisis, as various solutions had been found to plug the gap.
- Councillor Rolfe sought more information about career progression opportunities for carers, asking if this may be a barrier to attracting people to the service. She gave anecdotal feedback of a person who had switched careers to become a carer and their enjoyment of this new role.
- Zoe Mayhew spoke about the national workforce strategy. It included clearer career progression aspects for those working in social care. Specific detail was provided about the care certificate undertaken at the commencement of employment, further training and how this could be progressed into an apprenticeship. In Warwickshire the care certificate was now portable, so when employees moved to another employment, they were able to demonstrate the training completed avoiding the need to repeat that training.
- Councillor Holland thanked officers for the presentation. He spoke about recent national articles on the lack of funding, and absence of a national workforce plan. Against this background, he found this a positive report.
- A discussion about the impact of increasing fuel costs, which had contributed to 21 domiciliary care workers leaving their roles recently. Some had transferred to care homes to remove the travel costs. As a solution, a revised commissioning approach was being sought, to make it more localised. This should help providers to schedule services more efficiently and increase capacity. It was hoped that the fair cost of care exercise would assist with the fee structure to support some of the current pressures.
- Councillor O'Donnell referred to young people becoming carers, the challenges they would face and need for resilience. It was important to target the right people when suggesting this career. She spoke about career progression, including a gateway into nursing, for those who wanted to take that route. She asked for an indication of how many current carers may want to transfer to nursing and if the current arrangements were sufficient to allow this.

Whilst the specific data sought was not available, there was a pathway into nursing from people completing the care certificate and then an apprenticeship. Further points about the profile of care staff, who may work around other responsibilities and not see their opportunity to progress. People working in care could be used as advocates to show the value and rewards of this role.

- The Chair was surprised that businesses were not more efficient in their allocation of staff to maximise capacity. Zoe Mayhew confirmed that the Council had given a lot of support to providers to help them manage their businesses efficiently. This was ongoing and there were varying degrees of support required by different providers.
- It was questioned if research took place to identify the causes of people leaving care roles, especially in areas where there was significant turnover. In some cases, the causes would be beyond direct control. In others, it may be the way an organisation was run, and the Council could provide support and advice. Issues linked to travel in rural areas were raised particularly.
- The Chair touched on the current image of care work. There was a need to explain the varying roles and skill sets required, including digital skills, also that it was not just elderly people who needed support.
- Reference was made to delayed hospital discharges. It was questioned if all care roles were filled, how this would assist. Officers replied that this was complex. Hospital discharge in Warwickshire had historically been timely, but pressures had been felt since the previous year. Other contributors were the increasing complexity of care needs, meaning the person could not return to their previous care arrangements, or people perhaps being discharged from hospital too soon with a need for ongoing primary care support. Increasing the amount of domiciliary care staffing would assist, but given the interdependencies, it would not resolve everything.
- Chris Bain added that delayed hospital discharges were a system problem. He then referred to earlier contributions on the challenges of recruiting younger people. In his view, a more granulated approach, recognising the pressures they faced meant these issues did not happen. He made a plea for more care in how these challenges were presented and not to use the characterisations made earlier in the debate.
- A member was concerned about community care arrangements, specifically the short duration of the care visits, the travelling requirements between visits and for staff a lack of satisfaction at the service they were able to deliver in the time available.

The Chair thanked officers for the presentation and for responding to members' questions.

Resolved

That the Committee notes the presentation.

7. Year End Performance Progress Report

Pete Sidgwick, Assistant Director for Social Care and Support introduced this item. The Council Plan year end Performance Progress Report for the period 1st April 2021 to 31st March 2022 was considered and approved by Cabinet on 16th June 2022. The report provided an overview of progress of the key elements of the Council Plan, specifically in relation to performance against Key Business Measures (KBMs), strategic risks and workforce management. A separate financial monitoring report for the period covering both the revenue and capital budgets, reserves and delivery of the savings plan was also provided at the same Cabinet meeting.

The Committee received a tailored report with information relevant to its remit. It provided commentary on year end performance for 2021/22. It was noted that future performance reporting would be based on the new Council Plan 2022-2027. The Cabinet had also approved the implementation of a new Performance Management Framework effective from 1st April 2022, which would provide a sharpened focus on performance and trajectory to support delivery of the Council's new priorities and areas of focus.

Members were reminded of the two high level outcomes within the Council Plan and progress to achieve these outcomes was assessed against 54 KBMs, of which 12 were within the remit of the Committee. One of these had been paused as a result of ongoing data restrictions linked to the Covid-19 pandemic. Of the remaining 11 KBMs, nine were on track and two were not.

A series of tables were included in the report, to pull out key information around achievement of KBMs, a summary of performance from the Power Bi report and an area of note around reporting of domestic abuse incidents. Additional information was provided for those areas which were 'not on track', including one which required escalation on the percentage of successful completions as a proportion of all in treatment. A further table showed the forecast performance projection, it being expected that both of the KBMs that currently were not on track, would remain static over the forthcoming period.

The report concluded with the financial commentary for the revenue budget, delivery of the savings plan, the capital programme and risk management.

The following questions and comments were submitted, with responses provided as indicated:

- Discussion took place about the changes to inspection requirements for care homes. These would now take place only where there was intelligence of significant concerns. Pete Sidgwick explained the changes that the Care Quality Commission (CQC) had introduced to care home inspections during the Covid pandemic. A more targeted approach was expected for the future, focussing on those homes which had significant issues. For the County Council this was about its quality assurance role and a range of other information sources were available. Currently, the aim was to return to a 'business as usual' approach. This also applied to CQC regulation of the reablement service.
- A question was submitted about underspends of budgets. Generally, these were not carried forward to the subsequent financial year. An exception was the carry forward of the Better Care funding. Another councillor asked if an underspend resulted in a budget cut for the following year. Context was provided on the £280 million of funding for social care each year and the £52 million of income from residents' contributions. This was a highly complex budget area, with points made on the impact of the Covid pandemic, additional income received from the NHS and the medium-term financial planning approach. This all made it harder to forecast budget expenditure.
- Discussion about the rising number of reported domestic abuse (DA) incidents. The Chair spoke of the impact of DA on children, families and communities. She asked about the reporting of outcomes and whether cases were being resolved satisfactorily. The data was high but did not tell the complete story and further detail was sought. It was noted that the response to DA was multi-disciplinary.

- Reference to addiction outcomes with only 16.2% successful completions of all treatments. Further detail was sought, including a breakdown of the data across each area and by addiction type. It was noted this was a cross cutting issue.
- Likewise on customer service, the satisfaction target of 85% was questioned as this seemed low. More information was sought on why this target level had been agreed and this would be looked into.
- It was requested that briefing notes be provided to give further background on the rising number of reported domestic abuse incidents, addiction outcomes and the customer satisfaction target.
- The risks on sustainability of the care market was raised. There was reliance on an independent market to deliver the domiciliary and care home services. This was a risk both nationally and within the county and there were duties for the Council under the Care Act legislation. If the local market could not deliver care services, it would be deemed as a failure for the council to meet its statutory duties. In Warwickshire, there had been a good care market for a long time, but domiciliary care services had started to struggle since October 2021. Comparatively Warwickshire was better placed than many local authorities. There were continued efforts to support the care market with examples provided, including the fair cost of care. Currently, the Council was meeting its statutory duties. It was agreed that periodic updates be provided by way of briefing note.
- Reference to the numbers of people with a learning disability or autism who were in inpatient care. Further detail was sought on this area. It was an indicator which the CCG led on, which was also of importance to the County Council, due to work on transforming care. Comparatively, more people were in inpatient beds than the target level nationally. There was a programme of work across Coventry and Warwickshire to reduce this data. It was about reducing unnecessary admissions and enabling people to return to a community setting as soon as possible. There was significant involvement from NHS England in this work. The performance data was below target, and whilst the trajectory was improving, a lot more work was required as a transforming care partnership. It was requested that more information be provided from the partners involved.
- A member asked about hidden DA cases and how even more reporting could be secured. Reference to the wide impacts DA had and the services involved in responding to it. The aims of this work, which rested within Public Health amongst other agencies, was to reduce DA whilst increasing the reporting. It was expected that the reporting target would be increased, having been achieved for the previous year. This could be included within the subsequent briefing note.
- The requests for briefing notes would be considered further at the next Chair and spokesperson meeting, to ensure they covered the correct areas. The briefing notes would be provided and then consideration could be given to whether follow up reports or presentations were required.

Resolved

That the Committee comments as set out above on the progress with delivery of the Council Plan 2020-25 for the year end Performance Progress Report 2021-22.

8. Work Programme

The Committee discussed its work programme. A request was made for a follow up report on the care market, particularly the recruitment aspects, lost hours of care and resignations due to rising

fuel costs. It was agreed that this be provided via a briefing note in the first instance, to give an update on the figures presented earlier in this meeting and was important the Committee monitored this area closely.

Resolved

That the Committee notes the work programme as submitted, subject to the addition of the requested briefing notes.

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Councillor Clare Golby, Chair

The meeting closed at 12.30pm