

OVERVIEW AND SCRUTINY BOARD

A meeting of **Overview and Scrutiny Board** will be held on

Wednesday, 12 July 2017

commencing at **5.30 pm**

The meeting will be held in the Meadfoot Room, Town Hall, Castle Circus,
Torquay, TQ1 3DR

Members of the Board

Councillor Barnby
Councillor Bent
Councillor Bye
Councillor Darling (S)
Councillor Lewis (C)

Councillor Stockman
Councillor Stocks
Councillor Tolchard
Councillor Tyerman

Co-opted Members of the Board

Penny Burnside, Diocese of Exeter

A prosperous and healthy Torbay

For information relating to this meeting or to request a copy in another format or language please contact:

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Email: scrutiny@torbay.gov.uk

OVERVIEW AND SCRUTINY BOARD AGENDA

1. **Election of Chairman**
To elect a Chairman of the Board for the 2017/2018 Municipal Year.
2. **Apologies**
To receive apologies for absence, including notifications of any changes to the membership of the Board.
3. **Appointment of Vice-chairman**
To consider appointing a Vice-chairman of the Board for the ensuing Municipal Year.
4. **Minutes** (Pages 4 - 5)
To confirm as a correct record the minutes of the meeting of the Board held on 3 May 2017.
5. **Declarations of Interest**
 - a) To receive declarations of non pecuniary interests in respect of items on this agenda

For reference: Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.
 - b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(Please Note: If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)
6. **Urgent Items**
To consider any other items that the Chairman decides are urgent.
7. **Strategic Agreement between Torbay and South Devon NHS Foundation Trust and Torbay Council/South Devon and Torbay Clinical Commissioning Group** (Verbal Report)
The Chief Executive (supported by representatives from Torbay and South Devon NHS Foundation Trust and South Devon and Torbay CCG) to provide an update on the proposals for the Strategic Agreement between the Council and the Trust and the CCG.

The Mayor to answer any questions.

The Board to consider making any recommendations to the Council.

- 8. Acute Services Review** (Pages 6 - 11)
Representatives of Torbay and South Devon NHS Foundation Trust and South Devon and Torbay Clinical Commissioning Group to brief the Board on the Acute Services Review.
- 9. Torbay Air Show** (To Follow)
The Assistant Director – Customer and Community Services to present her report on the future of Torbay Air Show.

The Mayor to answer the Board’s questions.

The Board to consider making any recommendations to the Council.
- 10. Transformation project - Generating income through Housing Policy Framework Document** (Verbal Report)
To discuss the progress being made towards a suggested, amended Policy Framework document in relation to the Housing Company.
- 11. Revenue Budget 2018/2019** (Pages 12 - 15)
To consider the attached draft report and consider making recommendations to the Mayor.
- 12. Work Programme** (Pages 16 - 18)
To agree the attached Work Programme for the 2017/2018 Municipal Year.



Minutes of the Overview and Scrutiny Board

3 May 2017

-: Present :-

Councillor Lewis (C) (Chairman)

Councillors Barnby, Bent, Doggett, Stockman, Stocks, Tolchard and Tyerman

(Also in attendance: The Mayor and Councillors Ellery, Excell, Haddock, King, Parrott and Thomas (D))

78. Apologies

An apology for absence was received from Councillor Bye.

79. Minutes

The minutes of the meeting of the Board held on 15 March 2017 were confirmed as a correct record and signed by the Chairman.

80. Rationalisation of Discretionary Welfare Funds

The Board received an update on the progress that had been made in rationalising the discretionary welfare funds which were available to the Council. It was noted that officers from across the authority had worked to ensure that there were effective schemes in place to make best use of the limited resources available to the Council to ensure that local people could be helped in times of crisis.

81. Transformation Programme - Update

The Board received an update on the current position in relation to the Transformation Programme, including the achievements to date. It was noted that a number of projects were now included in the Forward Plan with decisions scheduled to be made in the coming months.

Resolved: that all non-executive members be requested to consider the current position in relation to the Transformation Programme and provide feedback to the Overview and Scrutiny Co-ordinator and Overview and Scrutiny Manager on the projects which should be included in the 2017/2018 Work Programme.

82. Overview and Scrutiny Annual Report

Resolved: that the Overview and Scrutiny Annual Report be published and submitted to the Adjourned Annual Meeting of the Council in accordance with the Constitution.

83. Exclusion of press and public

Prior to consideration of the item in Minute 84, the press and public were formally excluded from the meeting on the grounds that the item involved the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972 (as amended.)

84. Future Operation of Children's Services

The Director of Children's Services provided a verbal update on the future operation of Children's Services.

Resolved: that a task-and-finish group be established, to work alongside the Executive and Senior Leadership Team, to review all of the Council's existing joint arrangements and to consider the future alternative options for the Council and the delivery of services.

Chairman



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Report to Torbay Health and Wellbeing Scrutiny Committee

12 July 2017

Acute Services Review

1 Introduction

This paper updates the Committee on progress being made under the Acute Services Review (ASR) and in particular covers the specific aspects on which the Committee has asked to be briefed:

- Impact on Torbay Hospital and Torbay as a whole
- Timescales
- Plans around engagement and consultation

2 Recommendation

The Committee is asked to note this report and the progress being made to ensure acute services are sustainable and meet the needs of the local population.

3 Background

The ASR was announced last November when the draft Devon wide five-year Sustainability and Transformation Plan (STP) was published, along with the detailed case for change, 'Services not Structures', available via the CCG website. Securing sustainable acute hospital services across Devon is one of seven main priorities set out in the STP for transforming health and care services across the county.

The review was undertaken because doctors said key acute hospital services were likely to become unsustainable in future due to the difficulty of recruiting key clinical staff, large increases in demand for services and the challenge of consistently meeting national service standards.

It was recognised that across Devon there is variation in service provision, patient outcomes and experience. Whilst providers aim for best practice some of the workforce challenges mean this can be compromised. The three core requirements of the ASR were to:

- Examine any gaps in current acute services and review whether national clinical standards are being consistently met
- Identify those acute services that are vulnerable because of workforce or other challenges and which are at risk of becoming unsustainable

- Engage with staff, stakeholders and the public on the criteria for decision-making.

The Review focused on the high priority acute services – urgent and emergency care; stroke (incorporating hyperacute and rehabilitation); maternity, neonatology and paediatrics.

Since December a series of more than 25 workshops has been held looking at each of these areas, led by a medical director. More than 100 clinicians from Devon's four main hospitals, (including Torbay), GPs, NHS managers and patient representatives (with lived experience of the service being reviewed) have been involved in reviewing how we can ensure the safe, effective and affordable delivery of acute hospital services across Devon.

In March, 12 engagement events were held across Devon in order to gain views from patients and the public on what they felt were the important criteria against which any future proposals should be judged. Views from these meetings were shared at the clinical workshops and included the importance of ensuring safe hospital services, delivering services closer to accepted national standards and better clinical outcomes. The full feedback report is available via the CCG website.

4 Stage 1: recommendations

The clinically preferred recommendations from the clinical workshops were published on 20 June. These included ways to enhance how clinicians work – including adopting best practice models of care, improved resilience by partnering between hospitals, new workforce solutions to solve recruitment challenges, and use of technology to improve productivity. The main clinical recommendations per service area are set out below.

Urgent and emergency care

- Continued provision of 24/7 urgent and emergency care services (including A&E) at all four main acute hospitals – Torbay, Derriford, North Devon and the Royal Devon and Exeter. This will ensure that key emergency services continue to operate at the four main hospital locations.
- Enhance the way these services operate, in particular how the four sites are better networked with workforce solutions required to ensure that there are enough nurses, other clinical staff and doctors at junior, middle grade and consultant levels to provide safe, reliable, sustainable care 24 hours a day, seven days a week.

Stroke services

- Continue to provide first-line emergency response for people experiencing symptoms of a stroke at all four hospitals. This will include rapid stroke assessment, diagnostics and thrombolysis. These services will be supported by 'Acute Stroke Units' (ASUs) at all four sites, and will ensure rapid intervention and aftercare for those with a stroke.
- As part of working towards clinical best practice to improve outcomes for stroke patients, two specialist 'Hyperacute Stroke Units' (HASUs) will be developed in Exeter and Plymouth, serving the whole population of Devon. Patients attending these units will receive three or more days of intensive treatment for their stroke immediately following emergency treatment, following which they will return home or to their local ASU. HASUs are highly specialist units, bringing together teams of staff highly expert in acute stroke

care into a designated facility with access to diagnostics and equipment specific to the needs of people who have experienced a stroke, providing best practice treatment 24 hours a day. This model has been proven to reduce death rates and long-term disability following a stroke. The numbers of these units are increasing across the country because of the strong evidence of improved outcomes for stroke patients. These enhanced services will link closely with the local emergency stroke assessment and treatment, ongoing acute care and rehabilitation services

Maternity, paediatrics and neonatal services

- Retention of consultant-led maternity services, with access to 24/7 clinical care and specialist services, at all four hospitals. Of the 12,285 births in Devon last year, 89% took place in these units
- Deliver choice for home or midwifery-led births to continue to be provided in line with the national strategy 'Better Births'.
- Explore the potential to relocate the four midwifery-led units at Newton Abbot, Okehampton, Honiton and Tiverton alongside our consultant-led units at our main hospital sites in line with the strong evidence base for this approach. Only 2% of births in Devon took place in the four standalone midwife-led units.
- Retention of neonatal services at all four main hospital sites is also recommended, further developing the networking arrangement between neonatal services across Devon. To ensure this network is sustainable into the future, we will expand the advanced neonatal nurse practitioner role within Level 1 services to augment the expertise provided by resident medical staff, addressing the current and predicted medical workforce challenges for this specialty. We will adopt best practice care in delivering transitional care, in line with the national evidence that this improves outcomes.
- Expansion of ambulatory paediatric assessment units, which provide a responsive alternative to hospital admission, and will provide the necessary number of inpatient beds on all four hospital sites. Moving to this model of care will also require increased access to specialist services for children and young people with very complex needs. All options to safely staff this model in all four hospitals will be explored including joint approaches to recruitment and job planning, training opportunities for staff and rapid development of new roles such as physician associates and advanced nurse practitioners. There is also more work to do to ensure better care for children with mental health issues as part of plans to develop CAMHS (Children and Adolescent Mental Health Services).

In addition to the above four core acute services, the sustainability of the following vulnerable services has also been reviewed.

Histopathology: patients will continue to access this service at their local hospital, but some of the technical and clinical services will be delivered in a new way through two or three Specialist Reporting Laboratories. This 'hub and spoke' model is in line with the Carter Review.

ENT: services will be delivered in all four acute hospitals in Devon with comprehensive services being retained in Torbay, Exeter and Plymouth hospitals and a satellite service in North Devon building on the successful partnership between the Royal Devon & Exeter and North Devon District. In addition to existing outpatient, diagnostic and audiology services in

North Devon, day case ENT operations will resume and, as previously, major operations will be undertaken at the Royal Devon & Exeter with acute ENT emergencies being stabilised in North Devon District and treated at the Royal Devon & Exeter. Head and neck cancer patients will receive their care in the Royal Devon & Exeter, Derriford Hospital and Torbay Hospital, with major surgery being undertaken in Royal Devon & Exeter and Derriford only, as has been the case for some time.

Neurology: To better manage demand and improve access times, a Devon-wide referral management system will be put in place to ensure patients needing neurology expertise are quickly assessed and directed to the most appropriate care. For general neurology, a clinical and operational network will be put in place to ensure patients receive the earliest possible access for diagnosis and they receive services in a consistent way irrespective of where they live.

Other: a number of other vulnerable services including breast surgery, dermatology, interventional radiology, interventional cardiology, and vascular services are being reviewed and work is underway to finalise clinical proposals for the future delivery of these services across Devon.

5 Stage 2: next steps

These recommendations provide greater certainty of direction for services that were perceived as under threat but they represent a beginning, rather than the end of the process.

So in stage 2, these recommendations will now be tested in more detail to ensure they can be delivered with safe, cost-effective and reliable staffing solutions for the future. Once this assurance work is complete, the recommendations can be finalised and will be provided to the two CCG's Governing Bodies for formal commissioning.

Inevitably however, the proposals emerging from these reviews have not provided solutions to all the clinical, staffing and financial sustainability issues. Retaining four sites for maternity, neonatal and paediatric inpatient care, in a way that is safe and resilient in and out of hours is a challenge, given our current and predicted workforce constraints. Therefore more work will be required to ensure we can deliver safe and resilient 24/7 clinical expertise at the right level.

Creative solutions and new ways of working will have to be found to resolve current and future workforce gaps and make these services sustainable in a way that is also affordable.

Some solutions will be achieved through new partnerships between hospitals and through Devon-wide service networks, others through new workforce models which will take time to fully develop and will need increased investment in professional development and training. Creating these solutions in a way that is sustainable and affordable will be the next stage of each service review.

Networked solutions will require significant changes to the ways that clinicians work and different levels of cooperation may be needed for different services. For example, one level of cooperation may mean that services operate within a clinical network with expert

discussion on best care for individual patients across all four hospital sites. At the other end of the cooperation spectrum, the most integrated networks could see the majority of services of a specialty managed and staffed by one provider. It would have responsibility for the standards and delivery of services in each of the other locations where treatment is provided.

6 Impact on Torbay Hospital and Torbay as a whole

Overall the recommendations will support Torbay Hospital to deliver sustainable acute services to the people of Torbay which meet national best practice.

No services are being lost from the hospital under these recommendations and the proposed strengthening of networking arrangements will support the Trust in specialist areas where recruitment is especially challenging.

For maternity, the Torbay team will be part part of the NHSE recommended 'Local Maternity System' (LMS) which is being created across Devon and so will be involved in developing the full business case to support this work. Particular focus will be on the recommendation to consider moving the midwifery-led unit at Newton Abbot to Torbay Hospital. If this was to happen the options available in the Bay would be increased – evidence suggests that more woman would choose to give birth in a midwifery led unit with the security of knowing obstetrician care is available on site if required.

The stroke recommendations strengthen care in Devon by proposing the establishment of two HASUs. Although Torbay is not one of the proposed locations, the Torbay team will support the RDE team in providing a HASU in Exeter whilst continuing to provide ASU care locally.

The HASU in Exeter will mean that part of the pathway for patients in SDT will take place in Exeter so that all patients receive the benefit of HASU care. The plan is for a 72 hour stay at HASU, but first point of access will be local ASU where assessment, diagnostics and thrombolysis will take place with repatriation for the remainder of the pathway (rehab) locally.

Histopathology is a real issue at present for Torbay with workforce challenges at consultant level. Closer working with PHT and RDE initially will provide immediate support and consideration is being given to histopathology services across Devon (and potentially Cornwall) moving into a single network. This is a non-patient facing service so will have no impact on patients in terms of access.

7 Timescales

Working groups will test the recommendations over the next quarter, involving key staff in discussions surrounding any changes that need to be made to working practices to ensure the proposals can be effectively delivered. Implementation plans will be prepared, based on sustainable resource models so as to ensure they are affordable.

Much of this work will need to be undertaken on a site by site basis so as to address the specific needs of that location in terms of staffing and service quality.

We would expect the outcome of this further work to be published in late autumn, with full business cases for change being presented to the clinical commissioning groups.

8 Engagement and consultation

Should the final proposals be likely to result in significant change to local services, the public will be fully consulted in line with the NHS' statutory requirements.

The Committee is aware from previous reports that the NHS in Devon is spending well above its financial allocation. Our regulators have been clear with us that this cannot continue. Over the last 12 months, working as a system, we have saved more than £100 million by reducing the amount spent on agency staff, by running services more efficiently and by changing the way we deliver care. The current year will be even more challenging.

To tackle some of the health inequalities that exist across Devon – with a 15 year gap in life expectancy depending on where someone lives – we will also need to make progress in changing how we invest the budget we have available, to best achieve better outcomes for the people of Devon.

In the coming months, we will begin to talk to patients and the public about some of the difficult choices we will need to take.

Our aim will be to bring together proposals for different services in a single engagement and consultation process so as to reflect the overall challenges facing the health and social care system, reduce confusion and maximise public understanding and input. Until stage 2 of the ASR and similar work in other areas is complete, it is not possible to be precise as to when this will take place in this financial year.

9 Conclusion

The ASR has been a thorough and challenging process. The work of the clinicians, patient representatives and NHS managers involved in the Review has been considerable and has involved an appropriate level of challenge to make sure the proposals are robust and future-proofed. We would like to thank everyone who participated in these reviews.

The learning from this phase of the ASR will be taken into the next stage of the process and will also inform our workstreams in the STP.

Simon Tapley MSc
Chief Operating Officer/ Deputy Chief Officer
3 July 2017

Revenue Budget 2018/2019

DRAFT Report to the Mayor

July 2017



1. Background

- 1.1 In early 2017, it was recognised by the Mayor and Group Leaders that all councillors need to be involved in discussions about the future priorities of the Council and the areas of lower priority. This is in line with the views expressed by the Overview and Scrutiny Board over recent years that its annual reviews of the Council's priorities and resources should take place earlier in the year to enable debate on the current level of expenditure and the services that this provides. This would lead to a greater understanding of the issues and options when reviewing the Mayor's budget proposals.
- 1.2 To this end, Service Profiles are in the process of being prepared which show the gross and net revenue budget for each service area and describe the service which is provided and the reason why the service is provided. The Profiles also include the areas of focus of the service over the coming years, performance information, current transformation projects and workforce implications. The Mayor had previously published proposals for generating income, efficiencies and/or service change and these proposals were included in the draft Service Profiles.
- 1.3 The two Monitoring Working Parties (covering the Joint Commissioning Team) and the Joint Operations Team Liaison Group met to discuss the information within the draft Service Profiles with the appropriate Directors and Assistant Directors. All members of the Council were invited to attend these meetings. The views from those meetings were discussed at the meeting of the Overview and Scrutiny Board held on 12 July 2017 and this report sets out those views.
- 1.4 In accordance with the Constitution, the Mayor is asked to take account of the budget formulation work within this Report when he publishes his proposals for the Council's overall financial approach to service expenditure levels and local taxation for 2018/2019.

2. Children's Services

- 2.1 Consideration was given to the Children's Services Medium Term Financial Strategy which was agreed by the Council in February 2017. The Director of Children's Services provided an overview on the progress being made to achieve the savings required in 2017/2018. It was noted that this was the first year of the Strategy and that more work was still to be undertaken to drive further savings out of the system.
- 2.2 A number of the savings have been rated as "green" and the Director was very confident of achieving these. Of those rated as "amber", the Director was confident that the IYSS in-house efficiencies and agency staffing would be achieved but savings such as home to school transport and placement would be more difficult.
- 2.3 The Strategy is, in part, a financial improvement plan for 2017/2018 – 2020/2021. In future years, savings in the range of £50,000 to £600,000 were identified arising from a reduction in the Children Looked After population. The Director expressed confidence that the savings would be at the upper end of the bandwidth. It has since been confirmed that the upper

end of this range was currently being considered as an “amber” Transformation Project within the budget preparation work being undertaken.

3. Adult Services

- 3.1 The Director of Adult Services briefed members on the continuing negotiations with the Torbay and South Devon NHS Foundation Trust (the Integrated Care Organisation (ICO)) and the South Devon and Torbay Clinical Commissioning Group in relation to the Risk Shared Agreement. It was hoped that all parties would agree to the Council capping its risk meaning the costs to the Council would be known and fixed for the current year through to 2019/2020 (i.e. for the life of the existing five year contract). The Risk Share Agreement would continue with this as a variation and the ICO would formally rescind its notice. The future years agreement of the three parties still faced a potential risk in that NHS regulators would need to be assured, but it was felt that the proposal fitted with the national policy direction of the NHS refreshed five year forward view.
- 3.2 The Director also set out the impacts on the Council if the proposed deal was not accepted. The alternative solution would re-link the income the Council provides to the ICO with the direct expenditure on adult social care.

4. Public Health

- 4.1 The Director of Public Health provided an overview of the Public Health Business Plan for 2017/2018 giving an explanation on the mandated and non-mandated work that the Council undertakes. The Plan also showed those areas across the wider Council where Public Health provided support.
- 4.2 The Adults and Public Health Monitoring Working Party will be holding further meetings in order to understand further the services which are provided by the Public Health team, how other Council areas can assist in meeting the Public Health Outcomes Framework and the consequences of such action.

5. Community and Customer Services

- 5.1 The Liaison Group gave consideration to the draft Service Profile for Culture, Events and Sports and made the following comments:
- The Mayor and the Senior Leadership Team should give further consideration to how the Public Health grant can be used to support the wider public health agenda within the Council.
 - The remaining grants that the Council makes to community and voluntary organisations should be identified and consideration given to how those organisations can be better supported. In the first instance, those organisations should be positively exploring alternative options to become self funding.
 - In relation to Torre Abbey, consideration should be given to whether further capital investment could see an increase in revenue income. A risk assessment needs to be undertaken to ensure that the Council effectively manages its relationships with its funders whilst seeking to reduce the operating costs of its services.
- 5.2 The Group received an update on the current procurement exercise in relation to public toilets and would wish to see further details as they become available over the summer. The

costs associated with the provision of public toilets was discussed and, whilst it was accepted that TOR2's costs may be lower than the Council has listed within its revenue budget, this means that the costs of operating other services within the TOR2 contract may be significantly higher than the Council understands them to be. This issue needs further debate as the future of the contract with TOR2 is discussed.

- 5.3 An update was also received on the current procurement exercise in relation to libraries. Again the Group would wish to be kept informed as further details become available but it is recognised that the Council will need to determine what it can afford to provide in terms of library provision moving forward.

6. Corporate and Business Services

- 6.1 The Group discussed the Council's pension costs and the options which were available to reduce these. It was noted that a longer payback period was being investigated as was the possibility of establishing a service delivery company. This latter proposal however was likely to provide savings over the longer term and would not address the budget pressures in the coming financial year.

- 6.2 The draft Service Profile for Council Assets shows a net expenditure of approximately £1.5 million on repairs and maintenance. This budget line was discussed and it was clarified that only £266,000 of this was for reactive maintenance and therefore had a discretionary element. However, given the financial pressures on the Council especially in the short term, this could be an area where a temporary reduction in budget could be made. This Service Profile also included net expenditure of approximately £1.2 million for office accommodation. Questions were raised about whether reducing the desk to staff ratio had been considered thereby freeing up Tor Hill House for new tenants.

7. Conclusions, comments and recommendations

- 7.1 The Council's Medium Term Resource Plan shows a funding gap in 2018/2019 of £9.6 million. The amount of savings projected to be made through the Transformation Programme for 2018/2019 totalled approximately £5 million (as at 26 April 2017). However, the Board recognise that over 70% of those expected savings are rated as "red" or "amber".
- 7.2 The findings of the Overview and Scrutiny Board over the recent years remain – there are difficult decisions to be made and they need to be made at pace in order to meet the budget challenges that the Council faces. The Mayor needs to have confidence that the Transformation Programme will deliver the savings that he needs in order to present a balanced budget to Council.
- 7.3 It also needs to be recognised that the Transformation Programme will not solve the problem and that other solutions are needed.
- 7.4 The Board has identified some smaller areas of spend where it may be possible to find savings. This includes ensuring that the provision of any grant to an outside organisation is assessed against a set criteria and that consideration is given to finding alternative means of supporting such organisations.
- 7.5 However, the big areas of spend within the Council are Children's Services, Adults Services, Public Health and Waste, Cleansing and Natural Environment. The focus needs to be on ensuring that these services are delivered as cost effectively as possible.

- 7.6 The Board continues to have concerns about the budget position for Children’s Services both in terms of the ability (with a demand-led service) to deliver a balanced budget in 2017/2018 and the additional savings to be made against the Medium Term Financial Strategy. The Children’s Services Monitoring Working Party will continue to meet in the coming months and the Overview and Scrutiny Board will discuss progress against the Strategy at its meeting in September 2017.
- 7.7 [Add in recommendation/comment on Risk Share Agreement after an update is received from the Director of Adult Services at the meeting of the Overview and Scrutiny Board on 12 July 2017.]
- 7.8 The Work Programme of the Overview and Scrutiny Board for the coming year will focus on the elements within the Transformation Programme against which financial savings need to be made. This will help inform the Board’s discussions once the Mayor’s budget proposals are published for consultation.

Work Programme 2017/2018



Areas for review

Topics	Key Lines of Enquiry	Methodology
Torbay Economic Strategy	Does the proposed strategy deliver the objectives that the Council wishes to see?	Task-and-Finish Group
CCTV	Does the Business Case deliver the objectives that the Council wishes to see? Are the costs within the Business Case acceptable compared with the outcomes which will be achieved?	Task-and-Finish Group
Transformation Project – TOR2	What is the Council trying to achieve through this project? Is progress being made? What is Plan B?	Task-and-Finish Group
Transformation Project – Public Toilets	What is the Council trying to achieve through this project? Is progress being made? What is Plan B?	Task-and-Finish Group
Transformation Project – Libraries	What is the Council trying to achieve through this project? Is progress being made? What is Plan B?	Task-and-Finish Group
Transformation Project – Digitalisation	What is the Council trying to achieve through this project? Is progress being made? What is Plan B?	Task-and-Finish Group
Public Health – Outcomes and Expenditure	What areas of Public Health are non-mandated and how can councillors influence these areas? What outcomes are being achieved within Public Health?	Adults and Public Health Monitoring Working Party
Acute Services Review	What consultation is being proposed? Are the proposals in the interests of health services in the area?	Sustainability and Transformation Review Panel
Torbay Community Development Trust		Tbc
Business Improvement District Company		Tbc
Police and Crime Commissioner	Based on experiences elsewhere in Devon and Cornwall, what more can be done between the Office of the Police and Crime Commissioner and Torbay Council to improve outcomes for the community of Torbay?	Tbc
Future Direction of Torbay Council		Tbc
Education in Torbay	What is the current position in relation to the provision of school places and school planning?	Task-and-Finish Group

Timetable of Meetings

(All Wednesdays unless otherwise stated)

Date	Meeting	Issue	Key Lines of Enquiry	Attendees	Notes/Outcomes
21 June 2017 9.00 a.m.	Work Programme				
28 June 2017 9.30 a.m.	Briefing	Revenue Budget 2018/2019 – Budget Advisory Recommendations	To share feedback from the Monitoring Working Parties/Liaison Group on the revenue budget for 2018/2019		
		Work Programme	To identify any further items to be included within the emerging Work Programme.		
12 July 2017	Board	Election of Chairman			
		Appointment of Vice-chairman			
		Annual Strategic Agreement	(Dependant on outcome of ICO Board/CCG Governing Body)	Cllr Parrott Caroline Taylor Paul Cooper (ICO)	
		Revenue Budget 2018/2019	To make recommendations to the Mayor and Executive in relation to budget formulation		
		Acute Services Review	What are the expected implications for the population of Torbay of the Acute Services Review (as they are understood at this time)? What are the timescales for the next stages of the Review? How do you plan to ensure the community is engaged throughout the process?	Liz Davenport Simon Tapley	
		Future of Torbay Airshow	Should the Council continue to deliver the Torbay Airshow?	The Mayor Fran Hughes	
		Housing Company	To review the direction of travel towards an amended Policy Framework	Cllr King Caroline Taylor	
	Overview and Scrutiny Work Programme	To agree the Work Programme for the forthcoming year			

Date	Meeting	Issue	Key Lines of Enquiry	Attendees	Notes/Outcomes
19 July 2017 9.00 a.m.	Work Programme				
25 July 2017 (Tuesday) SCHOOL HOLIDAY	Briefing				
6 September 2017 5.30 p.m.	Board	Torbay Coast and Countryside Trust	What proposal is being recommended to the Council? How does the proposal meet the ambitions and principles of the Council's Corporate Plan?	The Mayor Kevin Mowat	
		Children's Services Medium Term Financial Strategy/Children's Services Improvement Plan	What progress has been made against each element of the Strategy? What progress has been made against the Improvement Plan	Cllr Parrott Andy Dempsey	
		Town Centre Regeneration	What progress is being made against each element of the Town Centre Regeneration Strategy?	The Mayor Kevin Mowat	
13 September 2017 9.00 a.m.	Work Programme				
27 September 2017 9.00 a.m.	Briefing				
11 October 2017 9.00 a.m.	Work Programme				
11 October 2017	Board	Capital Plan Monitoring 2017/2018 (Q2)			
17 October 2017 (Tuesday)	Adjourned Board (if required)	Revenue Budget Monitoring 2017/2018 (Q2)		The Mayor Martin Phillips	
8 November 2017	Briefing	Revenue Budget Proposals	To discuss the Mayor's proposals for the Revenue Budget: <ul style="list-style-type: none"> Take account of information gathered through Liaison Meetings/Monitoring Working Parties Identify issues to discuss at the Priorities and Resources Review Panels 		
			To discuss the Mayor's proposals for the Capital Plan: <ul style="list-style-type: none"> Take account of information gathered through Liaison Meetings/Monitoring Working Parties Identify issues to discuss at the Priorities and Resources Review Panels 		
Tbc	Priorities and Resources Review Panel		To review the budget proposals in relation to the Joint Commissioning Team		
Tbc	Priorities and Resources Review Panel		To review the budget proposals in relation to the Joint Operations Team		
Tbc	Priorities and Resources Review Panel		To review the budget proposals in relation to the Capital Plan		
29 November 2017	Board				
13 December 2017	Briefing				
13 December 2017	Board	Revenue Budget Proposals	To agree the recommendations in relation to the Mayor's Revenue Budget Proposals		
		Capital Plan Proposals	To agree the recommendations in relation to the Mayor's Capital Plan Proposals		

Date	Meeting	Issue	Key Lines of Enquiry	Attendees	Notes/Outcomes
		Capital Strategy	To review the proposed Capital Strategy and agree any recommendations		
		Corporate Asset Management Plan	To review the proposed Corporate Asset Management Plan and agree any recommendations		
10 January 2018 9.00 a.m.	Work Programme				
24 January 2018	Board	Revenue Budget Monitoring 2017/2018 (Q3)		The Mayor Martin Phillips	
		Annual Strategic Agreement 2018/2019	Does the proposed Agreement meet the objectives of the Council?	Cllr Parrott Caroline Taylor	
31 January 2018	Briefing				
14 February 2018 SCHOOL HOLIDAY	Board	Town Centre Regeneration	What progress is being made against each element of the Town Centre Regeneration Strategy?	The Mayor Kevin Mowat	
14 March 2018	Board	Children's Services Medium Term Financial Strategy	What progress has been made against each element of the Strategy?	Cllr Parrott Andy Dempsey	
28 March 2018	Briefing				
11 April 2018	Board	Overview and Scrutiny Annual Report			

Additional items will be added to the Programme during the course of the year reflecting the Forward Plan and other emerging issues.