

Merton Council

Healthier Communities and Older People Overview and Scrutiny Panel



Date: 11 February 2015

Time: 7.15 pm

Venue: Committee rooms B, C & D - Merton Civic Centre, London Road, Morden
SM4 5DX

AGENDA

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|---|--|---------|
| 1 | Apologies for Absence | |
| 2 | Declarations of Pecuniary interest | |
| 3 | Minutes of the meeting held on the 14 January 2015 | 1 - 6 |
| 4 | Matters arising from the minutes of the 14 January 2015 | |
| 5 | Health and Wellbeing Strategy and update from the Health and Wellbeing Board | 7 - 14 |
| 6 | Outcomes from the Adult Social Care Consultation (report to follow) | |
| 7 | Work Programme 2014-15 | 15 - 18 |

**This is a public meeting – members of the public are very welcome to attend.
The meeting room will be open to members of the public from 7.00 p.m.**

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Healthier Communities and Older People Overview and Scrutiny Panel membership

Councillors:

Peter McCabe (Chair)
Brian Lewis-Lavender (Vice-Chair)
Pauline Cowper
Mary Curtin
Brenda Fraser
Suzanne Grocott
Sally Kenny
Abdul Latif

Substitute Members:

Joan Henry
Najeeb Latif
Gregory Patrick Udeh
Jill West

Co-opted Representatives

Myrtle Agutter
Saleem Sheikh
Hayley James

Note on declarations of interest

Members are advised to declare any Disclosable Pecuniary Interest in any matter to be considered at the meeting. If a pecuniary interest is declared they should withdraw from the meeting room during the whole of the consideration of that matter and must not participate in any vote on that matter. If members consider they should not participate because of a non-pecuniary interest which may give rise to a perception of bias, they should declare this, withdraw and not participate in consideration of the item. For further advice please speak with the Assistant Director of Corporate Governance.

What is Overview and Scrutiny?

Overview and Scrutiny describes the way Merton's scrutiny councillors hold the Council's Executive (the Cabinet) to account to make sure that they take the right decisions for the Borough. Scrutiny panels also carry out reviews of Council services or issues to identify ways the Council can improve or develop new policy to meet the needs of local people. From May 2008, the Overview & Scrutiny Commission and Panels have been restructured and the Panels renamed to reflect the Local Area Agreement strategic themes.

Scrutiny's work falls into four broad areas:

- ⇒ **Call-in:** If three (non-executive) councillors feel that a decision made by the Cabinet is inappropriate they can 'call the decision in' after it has been made to prevent the decision taking immediate effect. They can then interview the Cabinet Member or Council Officers and make recommendations to the decision-maker suggesting improvements.
- ⇒ **Policy Reviews:** The panels carry out detailed, evidence-based assessments of Council services or issues that affect the lives of local people. At the end of the review the panels issue a report setting out their findings and recommendations for improvement and present it to Cabinet and other partner agencies. During the reviews, panels will gather information, evidence and opinions from Council officers, external bodies and organisations and members of the public to help them understand the key issues relating to the review topic.
- ⇒ **One-Off Reviews:** Panels often want to have a quick, one-off review of a topic and will ask Council officers to come and speak to them about a particular service or issue before making recommendations to the Cabinet.
- ⇒ **Scrutiny of Council Documents:** Panels also examine key Council documents, such as the budget, the Business Plan and the Best Value Performance Plan.

Scrutiny panels need the help of local people, partners and community groups to make sure that Merton delivers effective services. If you think there is something that scrutiny should look at, or have views on current reviews being carried out by scrutiny, let us know.

For more information, please contact the Scrutiny Team on 020 8545 3390 or by e-mail on scrutiny@merton.gov.uk. Alternatively, visit www.merton.gov.uk/scrutiny

All minutes are draft until agreed at the next meeting of the committee/panel. To find out the date of the next meeting please check the calendar of events at your local library or online at www.merton.gov.uk/committee.

HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

14 JANUARY 2015

(19.15 - 21.30)

PRESENT Councillors Councillor Peter McCabe (in the Chair),
Councillor Brian Lewis-Lavender, Councillor Pauline Cowper,
Councillor Mary Curtin, Councillor Brenda Fraser,
Councillor Suzanne Grocott, Councillor Sally Kenny,
Councillor Abdul Latif, Myrtle Agutter, Saleem Sheikh and
Hayley James

Caroline Holland (Director of Corporate Services) and Simon
Williams (Director, Community & Housing Department) Stella
Akintan (Scrutiny Officer)

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

None.

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of pecuniary interests

3 MINUTES OF THE MEETING HELD ON THE 12 NOVEMBER (Agenda Item 3)

The minutes were agreed.

4 MATTERS ARISING FROM THE MINUTES OF THE 12 NOVEMBER (Agenda Item 4)

There were no matters arising from the minutes.

5 BUDGET & BUSINESS PLAN 2015-2019 (Agenda Item 5)

The Director of Corporate Services introduced the report stating that each of the departments were given ratings to protect the more vulnerable areas. Current savings have been agreed and banked unless departments find there will be a difficulty in achieving these. There is a small capital programme within the remit of this panel most of which is grant funded by the Department of Health; there are no changes to the Panel's capital programme at present. The budget gap for the next four years is £32 million. The budget for 2015-16 is set but there are significant gaps for 2016-17 and 2017-18.

Councillor McCabe asked to what extent government grants will be reduced over the next few years?

The Director of Corporate Services said the Revenue Support Grant has been estimated to reduce from £31 million to £12 million. These are based on our assumptions, which were fairly accurate last time.

Councillor Grocott expressed concern that we are making budget decisions for 2016-17 and beyond yet we are not yet clear what the funding settlement will be.

Councillor McCabe said we expect officers to make projections for prudent planning.

The Director of Community and Housing said the consequences would be catastrophic if we don't plan ahead. We can improve our engagement with the public if we are looking ahead. We should plan ahead on reasonable assumptions then be prepared to review them if circumstances change.

There is a national concern about adult social care and it is often in the news especially in relation to care homes and home care. Merton has tried to protect the adult social care budget, it has had an increased share of the council budget over the last four years. While we support the principles of the Care Act it will introduce new pressures and risks into the system.

There are also national concerns around quality of care and the cost model, e.g; the fifteen minute visits and nationally people are questioning if we have a system that is based on quality care. The Local Government Association and the Association of the Directors of Adult Social Services are currently in discussions with central government about this. Any government will have a deficit and look to local government to make savings. Merton has been resilient but looking ahead we have harder things we need to do. Virtually all spend is statutory there is no room for manoeuvre and savings will have a higher level of impact.

Some of the replacement savings are not achievable in full. Providers have been squeezed to the limit; if we go any further we will encounter difficulties in commissioning care.

There are currently seven ways that people can get in touch with adult social care and we are looking for ways to rationalise this. The voluntary sector is confident that it can undertake this role competently as in fact it already does. Reviewing care packages reflects existing practice and is simply looking for greater savings on balance from this.

In relation to Day care services for people with learning disabilities, the Director of Community and Housing said that the department believe in keeping day care services, as this is a vital service for our carers. In Merton we are going against the trend of closing centres. However we need to make savings so we are reducing staff in day centres and there are some reductions in bespoke activity. We need more volunteers to work with staff and offer a mix of support, day care and respite at the weekends. We will ask customers and carers if they can manage with less.

The Director of Community and Housing said that overall the savings relate to:

1. A reduction in preventative services, we will try to retain as many as possible
2. Staffing savings: remodelling existing processes to deliver a reliable service which is possible, albeit difficult with careful planning.
3. Third party spend: This will include direct payments as we cannot exempt people because of the means by which the payment is made. We will look at support packages they may go down but it is not inevitable. We often set support plans when people are at their highest level of need so we will go back and look at what their on-going requirements are.

The consultation on adult social care was launched after the December cabinet to allow maximum time for responses and to fit into the decision making process. The feedback will come to this panel on the 11th February and Cabinet on the 16th February. This will ensure that the decision makers are aware of the consultation results.

In terms of the equality impact assessment, it is a level three impact which will affect our protected groups and there are doubts about our ability to mitigate it.

The Chair invited members of the public to address the meeting:

Jeanette Townley, speaking on behalf of Sally Burns.

Ms Townley said Merton provides a brilliant day care service. Centres provide a safe reliable place for people to meet up. Staff in the day care centres are good, and we need to maintain their level of expertise as they are dealing with complex care and they provide therapy as well as behaviour management and activities. They link activities to a range of disabilities. Carers have all the work related stress and is the equivalent of working two jobs. There is concern over the consultation, we feel cheated; its unfair and completely wrong and we were only asked after it was completed.

Lyla Adwan-Kamara, CEO, Merton Centre for Independent Living Outlined three main concerns:

The savings should be measured by the impact on the service rather than the a ratio for each department.

The equality impact assessments.

The consultation process .

Merton is already a low spend borough and has saved £17 million over the last four years. The proposed changes to day care services will lead to reduced independence, people being isolated; this is not reflected in the equality impact assessments.

When the consultation process began, accessible surveys were made available a week later for disabled people. Until yesterday there were no plans to consult with scrutiny and we are pleased there has been a change in this regard.

Sarah Henley, local resident.

Sarah said she relies on 24 hour care, this enables her to make decisions about when she goes to bed, gets up meets friends, goes shopping and to various activities such as swimming, art class the pub. She relies on three pots of money, the independent living fund, money from social services and her own savings. She is very worried that more cuts could mean that she has to go into residential care and be stuck in front of a tv all day. This would take away her freedom to do activities and not have the support she needs.

Councillor Brian Lewis Lavender said he was concerned about the effect of the cuts on the most vulnerable people in the borough. He is concerned about proposals to make staff cuts and replace them with volunteers. The staff have knowledge and built relationships with people. Volunteers come and go they are less reliable which will have an adverse effect on clients.

Councillor Grocott said Cabinet have asked for below inflation payments to providers, we should also use reserves for some of the savings that need to be made.

Councillor McCabe said he has raised concerns a number of times about squeezing providers to the extent that could go out of business or move out of the borough. Have we made too much provision for inflation? Also is concerned that some of providers care generate high profits from care homes.

The Director of Corporate Services said that The Consumer Price Index has fallen our contracts are based on the Retail Price Index which is higher, we will keep this under review for future years.

The Director of Community and Housing said we have moved below inflation uplift to providers, can we buy and support the same prices as this year. Our block projects are coming to an end and providers are asking for an increase.

Councillor Grocott said we may not need to use the 1.5% uplift since inflation has dropped.

Councillor McCabe asked if we will be able to recruit the volunteers required to help keep the day centres open?

The Director of Community and Housing said the use of volunteers had been successful in the library service and although it is a different service we can encourage people to get involved. We also need to improve the offer for volunteers.

Councillor Latif asked if we had taken into consideration for the fact that the council will be liable for volunteers?

The Director of Community and Housing said he recognises this is an issue we have to ensure that our practice is safe and appropriate.

Hayley James Co-opted Member said she had started to deliver the volunteers strategy when working at MVSC. It is important to look at creative ways to deliver services. The volunteers service will get better because of the merger of MVSC and Volunteer Centre Merton so it can work.

Councillor Grocott moved a motion asking the Panel to reject saving CH13.

The proposal is for officers to look for a replacement saving for 2015/16 such as a review of the amount currently included as an inflationary uplift were overstated or seeing if any saving proposals for 2016-17 could be brought forward to 2015-16. If not, the money should be taken from the reserves.

Councillor Lewis Lavender seconded the motion

Councillors : Lewis Lavender, Latif and Grocott voted in favour of the motion

Councillors: McCabe, Cowper, Fraser, Kenny and Curtin voted against the motion

The motion was denied

The meeting ended at 21.30

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Committee: Healthier Communities and Older People Overview and Scrutiny Committee

Date: 11 February 2015

Agenda item: 5

Wards: ALL

Subject: Health and Wellbeing Board and Health and Wellbeing Strategy Update

Lead officer: Kay Eilbert

Lead member: Councillor Peter McCabe, Chair of the Healthier Communities and Older People overview and scrutiny panel.

Forward Plan reference number:

Contact officer: Stella Akintan, stella.akintan@merton.gov.uk; 020 8545 3390

Recommendations:

- A. That members of Healthier Communities and Older People Overview note and consider the update on the work of the Health and Wellbeing Board and the plans to refresh the Health and Wellbeing Strategy for 2015-18.
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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

To provide an update on the work of the Health and Wellbeing Board. To outline the focus on integration and prevention in the work of the Board and Public Health and to provide an update on the review and refresh of the Merton Health and Wellbeing Strategy for 2015-18.

DETAILS

2.1 Background

2.1.1 Health and Wellbeing Boards are nearly two years into their statutory role as a committee of the Council. Building on the strong partnership with the voluntary sector in Merton and increasing partnership work with Merton CCG and other health providers, the HWB continues to focus on integration, health inequalities and addressing the wider determinants of health.

2.1.2 This focus reflects a broader recognition, at national policy as well as local level, that prevention is key to sustainability. A number of recent reports, including London Health Commission's Better Health for London and the NHS Five year Forward View recognise the need for **a radical shift in our approach to health and wellbeing, away from a clinical focus, to working across the determinants of health and prevention.**

2.2 Focusing on Prevention

- 2.2.1 As previously reported a priority for Public Health has been to focus on prevention. Working to address the wider determinants of health, trying to embed public health across the Council, and working with community groups to reduce inequalities. This has been undertaken through a range of new initiatives (some of which were reported to this Committee at its September meeting).
- 2.2.2 More recently Public Health secured £45,000 from the South West London Academic Health and Social Care Network for a Proactive GP pilot scheme. The pilot aims to embed prevention in GP practices and to increase early diagnosis of long-term conditions, when they can be cured or managed in primary care.

The timing of the pilot is opportune for GPs with the recent publication of new GP standards, which include proactive care with a focus on patient involvement and links into communities.

2.3 Merton Health and Wellbeing Strategy and JSNA

- 2.3.1 Merton's first Health and Wellbeing Strategy has now been in place for eighteen months, having been developed in partnership and consulted on widely. The Health and Wellbeing Board has monitored progress and reports on the delivery plan for each of the key priorities have been made annually. There is a commitment to review and refresh the Strategy for 2015

The Strategy refresh is in line with the new JSNA <http://www.merton.gov.uk/health-social-care/publichealth/jsna.htm> ., feedback from the Health and Wellbeing Peer Challenge, the Merton Partnership Conference on Health Inequalities 2013 and the focus on inequalities, prevention and integration specifically through the Better Care Fund.

2.3.2 HWB Strategy Task Group

In line with the approach in developing the first Health and Wellbeing Strategy, a short-life start and finish task group has been working to refresh the strategy, including Council representatives from Public Health, Children Schools and Families, Environment and Regeneration and Communities and Housing , Merton CCG and MVSC.

The Task Group has worked making strategic priorities and outcomes more focused, specifically relating to the five themes that emerged from the Merton Partnership Conference on Health Inequalities that make up 'a good life':

2.3.3 Priority Themes

There are five priority themes that will make up the refreshed Health and Wellbeing Strategy

Theme 1 Best start in life - early years and achieving a strong educational base for children and young people

Theme 2 Good health – preventing illness, ensuring early detection of illness and accessing good quality healthcare.

Theme 3 Good life skills, lifelong learning and good work.

Theme 4 Community participation and feeling safe

Theme 5 A good built and natural environment

Core, cross cutting themes of the Strategy will be tackling health inequalities – bridging the gap between east and west Merton – focussing on prevention and working in an integrated way.

2.3.4 Draft Outcomes and Key Priorities

Draft outcomes have been identified and agreed by a lead officer or joint leads for each theme. Following discussion at the Health and Wellbeing Board and HWB Strategy Task Group it was agreed that outcomes, actions and indicators should, as far as possible, focus on areas that need improvement in Merton, tackle health inequalities across the borough and be ambitious but realistic in the context of financial pressures.

It has also been suggested that a small number of outcomes should be agreed as top priorities for the Health and Wellbeing Strategy for the year ahead, to provide a real focus for the work and collaborative leadership of the Health and Wellbeing Board

Final outcomes are currently being developed by relevant lead officers, together with actions, indicators, baselines, trajectories and governance lead by the relevant Board, collaboratively with the HWB. This is work in progress and full details are being developed for each priority theme for the Delivery Plan template included in Appendix 1

2.3.5 HealthWatch Consultation Event

HealthWatch held an engagement event on the HWB Strategy on Thursday 5 February 2015 at Vestry Halls, Mitcham which included discussions on each of the priority themes.

2.3.6 Strategy Timescale

It is suggested that the Health and Wellbeing Strategy will run for three years 2015 to 2018 with regular updates to the Health and Wellbeing Board with particular focus on the agreed key priorities. The March meeting of the Health and Wellbeing Board is due to focus on agreeing the draft refresh of the Health and Wellbeing Strategy.

2.4 Better Care Fund

2.4.1 NHS England have formally approval of Merton's BCF (Better Care Fund) Plan in full. Commenting that the Merton plan 'is clear and ambitious' that they support our ambitions and that this puts Merton 'in a strong position for delivering'

BCF is an ambitious programme and preparing the plans at pace has been acknowledged by NHS England as an 'immensely challenging task'. The £3.8 billion Better Care Fund (BCF) was announced in 2013 to support transformation and integration of health and social care services. The Merton

BCF plan is now part of the wider work programme to integrate and transform local health and social care services.

2.5 Pharmaceutical Needs Assessment

2.5.1 Merton's Health and Wellbeing Board is required to produce a Pharmaceutical Needs Assessment (PNA) by April 2015.

The PNA is designed to assess the current provision of pharmaceutical services, where the current position may change and identify any current and future gaps. The PNA assists NHS England in determining applications by pharmacists for new, additional or relocated premises, hours or pharmaceutical services.

2.5.2 We have undertaken consultation (ended December 2014) to seek views on the the draft PNA and feedback gathered will be reported and reflected in the final revised PNA report. The final PNA will be published by 1 April 2015

2.6 Health and Wellbeing Board Development Session

With funding secured from London Councils the Health and Wellbeing Board had a facilitated development session on 27 January at Merton Dementia Hub to review the governance of the Board, its leadership role and influence and the future focus of the Health and Wellbeing Strategy and broader work of the Board. The outcome of the session and recommended actions will be reported to the HWB in March.

2.7 Health and Wellbeing Board Forward Plan

The latest HWB Forward Plan 2014/15 is attached to this report in Appendix 1. The Forward Plan will change following the HWB development session outlined above. It is an iterative document responding to developments and any comments from this Committee are welcome. Officers from the Health and Wellbeing Board and Scrutiny work together to avoid duplication of agendas.

3. NEXT STEPS

The focus on integration and prevention in tackling health inequalities, will continue and will be reflected in the review and refresh of the Health and Wellbeing Strategy and the wider work of the Health and Wellbeing Board..

5. ALTERNATIVE OPTIONS

It is a statutory requirement that each local authority has a Health and Wellbeing Board as a Committee of the Council and that each HWB have a Health and Wellbeing Strategy based on the Joint Strategic Needs Assessment.

6. CONSULTATION UNDERTAKEN OR PROPOSED

None for the purpose of this report.

7. TIMETABLE

The refreshed Health and Wellbeing Strategy will be for three years 2015 to 2018.

8. FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

None for the purpose of this report.

9. LEGAL AND STATUTORY IMPLICATIONS

The production of a Health and Wellbeing Strategy is statutory for each Health and Wellbeing Board.

10. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

Addressing health inequalities is a core, cross cutting principle of the Health and Wellbeing Strategy.

11. CRIME AND DISORDER IMPLICATIONS

None for the purpose of this report.

12. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

None for the purpose of this report.

APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

Appendix 1 – template for HWB Strategy 2015-18 Delivery Plan

BACKGROUND PAPERS

Merton Health and Wellbeing Strategy 2013/14

http://www.mertonpartnership.org.uk/hwb_strategy_final_web_ready.pdf

Appendix 1 – Delivery Plan Template, Health and Wellbeing Strategy 2015-18

EXAMPLE

Priority Theme 1: Best start in life – early years and achieving a strong educational base for children and young people.

Why is this important?

Short explanation of why the theme is a key determinant of health.

Outcomes

(a small number of outcomes that can be delivered through actions that can be evaluated by indicators of success)

- 1.1 All babies have the best start in life.
- 1.2 Promoting the emotional wellbeing and resilience of our children and young people.
- 1.3 Promoting healthy lifestyles and choices.
- 1.4 Helping children and young people fulfil their educational potential.

Delivery Plan Priority 1

Outcome 1.1 – All babies have the best start in life						
Action	Indicator	Baseline	Trajectory	Reporting cycle	Lead Officer	Governance Lead
List of actions that will deliver outcome 1.1						

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Healthier Communities and Older People Work Programme 2014/15



This table sets out the Healthier Communities and Older People Panel Work Programme for 2014/15 that was agreed by the Panel at its meeting on 3rd September 2014. This Work Programme will be considered at every meeting of the Panel to enable it to respond to issues of concern and incorporate reviews or to comment upon pre-decision items ahead of their consideration by Cabinet/Council.

The work programme table shows items on a meeting by meeting basis, identifying the issue under review, the nature of the scrutiny (pre decision, policy development, issue specific, performance monitoring, partnership related) and the intended outcomes. The last page provides information on items on the Council's Forward Plan that relate to the portfolio of the Healthier Communities and Older People Panel so that these can be added to the work programme should the Commission wish to.

The Panel is asked to identify any work programme items that would be suitable for the use of an informal preparatory session (or other format) to develop lines of questioning (as recommended by the 2009 review of the scrutiny function).

The Healthier Communities and Older People Panel has specific responsibilities regarding Budget and Business Plan Scrutiny and Performance Monitoring for which Lead Members are appointed:

Councillor Suzanne Grocott is lead for Performance Management
All papers members will take responsibility for Budget Scrutiny.

Scrutiny Support

For further information on the work programme of the Healthier Communities and Older People please contact: -
Stella Akintan (Scrutiny Officer)
Tel: 020 8545 3390; Email: stella.akintan@merton.gov.uk

For more information about overview and scrutiny at LB Merton, please visit www.merton.gov.uk/scrutiny

Meeting Date 03 September 2014

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Policy Development	Overview of the key issues in adult social care	Report to the Panel	Rahat Ahmed- Man, Head of Commissioning	Panel to decide if they want to look at any area in more detail.
Policy Development	Merton Clinical Commissioning Group – Overview of key issues and priorities	Report to the Panel	Adam Doyle	Panel to decide if they want to look at any area in more detail.
Policy Development	Overview of the key issues in public health	Report to the Panel	Kay Eilbert	Panel to decide if they want to look at any area in more detail.
	Work programme 2014-15	Report to Panel	Cllr McCabe	Panel to agree work programme for the year ahead

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Meeting date – 22 October 2014

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Policy Development	Challenges in getting a GP Appointment in Merton	Report to the Panel	NHS England	Panel to decide if they want to look at any area in more detail.
Policy Development	Changes to Local GP services in Merton	Report to the Panel	NHS England	Panel to decide if they want to look at any area in more detail.
Policy Development	Healthwatch Merton report on GP services	Report to Panel	Dave Curtis Healthwatch Merton Manager	Panel to review progress in this area

Meeting date – 12 November 2014

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Budget scrutiny	Budget update	Report to the Panel	Caroline Holland, Director of Corporate Services	To review budget proposals
Policy Development	End of life Care	Report to the Panel	Caroline Farrar, Merton Clinical Commissioning Group	Panel to decide if they want to look at any area in more detail.

Meeting Date – 14 January Budget Meeting

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Budget scrutiny	Budget and Business Plan 2015-2019	Report to the Panel	Caroline Holland, Director of Corporate Services, Simon Williams, Director of Community and Housing	To review budget proposals.

Meeting date – 11 February 2015

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Policy Development	Update from the Health and Wellbeing Board	Report to Panel	Dr Kay Eilbert	Look at the progress with the work of the Board
Policy Development	Health and Wellbeing	Report to the Panel	Dr Kay Eilbert	Review the revised

	Strategy			strategy.
	Feedback from the adult social care consultation	Report to the Panel		

Meeting date – 17 March 2015

Scrutiny category	Item/Issue	How	Lead Member/Lead Officer	Intended Outcomes
Policy Development	Cancer Screening	Report to the Panel	NHS England	Panel to scrutinise cancer screening rates for Merton
Policy Development	Mental Health review	Report to Panel	Dr Anjah Ghosh	Panel to consider outcomes of review of mental health services
Policy Development	Health issues in the Polish Community	Report to panel	Polish Family Association/ MCCG	To consider how to improve services for polish community to increase GP registration and less reliance on A&E