

Health Scrutiny Sub-Committee

Thursday 8 September 2022 at 2.00 pm

**To be held in the Town Hall,
Pinstone Street, Sheffield, S1 2HH**

The Press and Public are Welcome to Attend

Membership

Councillor Ruth Milsom
Councillor Steve Ayris
Councillor Martin Phipps
Councillor Anne Murphy
Councillor Kevin Oxley
Councillor Jackie Satur
Councillor Gail Smith
Councillor Garry Weatherall
Vacancy Labour

PUBLIC ACCESS TO THE MEETING

Meetings of the Health Scrutiny Sub-Committee are chaired by Councillor Ruth Milsom.

A copy of the agenda and reports is available on the Council's website at www.sheffield.gov.uk. You may not be allowed to see some reports because they contain confidential information. These items are usually marked * on the agenda. Members of the public have the right to ask questions or submit petitions to Health Scrutiny Sub-Committee meetings and recording is allowed under the direction of the Chair. Please see the [webpage](#) or contact Democratic Services for further information regarding public questions and petitions and details of the Council's protocol on audio/visual recording and photography at council meetings.

Health Scrutiny Sub-Committee meetings are normally open to the public but sometimes the Committee may have to discuss an item in private. If this happens, you will be asked to leave. Any private items are normally left until last on the agenda.

Meetings of the Health Scrutiny Sub-Committee have to be held as physical meetings. If you would like to attend the meeting, please report to an Attendant in the Foyer at the Town Hall where you will be directed to the meeting room. However, it would be appreciated if you could register to attend, in advance of the meeting, by emailing committee@sheffield.gov.uk, as this will assist with the management of attendance at the meeting. The meeting rooms in the Town Hall have a limited capacity. We are unable to guarantee entrance to the meeting room for observers, as priority will be given to registered speakers and those that have registered to attend.

Alternatively, you can observe the meeting remotely by clicking on the 'view the webcast' link provided on the meeting page of the [website](#).

If you wish to attend a meeting and ask a question or present a petition, you must submit the question/petition in writing by 9.00 a.m. at least 2 clear working days in advance of the date of the meeting, by email to the following address: committee@sheffield.gov.uk.

In order to ensure safe access and to protect all attendees, you will be recommended to wear a face covering (unless you have an exemption) at all times within the venue. Please do not attend the meeting if you have COVID-19 symptoms. It is also recommended that you undertake a Covid-19 Rapid Lateral Flow Test within two days of the meeting.

If you require any further information please email committee@sheffield.gov.uk.

FACILITIES

There are public toilets available, with wheelchair access, on the ground floor of the Town Hall. Induction loop facilities are available in meeting rooms. Access for people

with mobility difficulties can be obtained through the ramp on the side to the main Town Hall entrance.

**HEALTH SCRUTINY SUB-COMMITTEE AGENDA
8 SEPTEMBER 2022**

Order of Business

- 1. Welcome and Housekeeping**
The Chair to welcome attendees to the meeting and outline basic housekeeping and fire safety arrangements.
- 2. Apologies for Absence**
- 3. Exclusion of Press and Public**
To identify items where resolutions may be moved to exclude the press and public
- 4. Declarations of Interest** (Pages 5 - 8)
Members to declare any interests they have in the business to be considered at the meeting
- 5. Minutes of Previous Meeting** (Pages 9 - 14)
To approve the minutes of the last meeting of the Sub-Committee held on 21st June 2022.
- 6. Public Questions and Petitions**
To receive any questions or petitions from members of the public
- 7. Sheffield Teaching Hospitals – CQC Inspection and Maternity Services Update – Report of Sheffield Teaching Hospitals NHS Foundation Trust** (To Follow)
- 8. CQC Improvement Update** (Pages 15 - 24)
- 9. Work Programme** (Pages 25 - 36)

ADVICE TO MEMBERS ON DECLARING INTERESTS AT MEETINGS

If you are present at a meeting of the Council, of its executive or any committee of the executive, or of any committee, sub-committee, joint committee, or joint sub-committee of the authority, and you have a **Disclosable Pecuniary Interest (DPI)** relating to any business that will be considered at the meeting, you must not:

- participate in any discussion of the business at the meeting, or if you become aware of your Disclosable Pecuniary Interest during the meeting, participate further in any discussion of the business, or
- participate in any vote or further vote taken on the matter at the meeting.

These prohibitions apply to any form of participation, including speaking as a member of the public.

You **must**:

- leave the room (in accordance with the Members' Code of Conduct)
- make a verbal declaration of the existence and nature of any DPI at any meeting at which you are present at which an item of business which affects or relates to the subject matter of that interest is under consideration, at or before the consideration of the item of business or as soon as the interest becomes apparent.
- declare it to the meeting and notify the Council's Monitoring Officer within 28 days, if the DPI is not already registered.

If you have any of the following pecuniary interests, they are your **disclosable pecuniary interests** under the new national rules. You have a pecuniary interest if you, or your spouse or civil partner, have a pecuniary interest.

- Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner undertakes.
- Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period* in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

*The relevant period is the 12 months ending on the day when you tell the Monitoring Officer about your disclosable pecuniary interests.

- Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority –
 - under which goods or services are to be provided or works are to be executed; and
 - which has not been fully discharged.

- Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.
- Any licence (alone or jointly with others) which you, or your spouse or your civil partner, holds to occupy land in the area of your council or authority for a month or longer.
- Any tenancy where (to your knowledge) –
 - the landlord is your council or authority; and
 - the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.
- Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where -
 - (a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and
 - (b) either -
 - the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or
 - if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.

If you attend a meeting at which any item of business is to be considered and you are aware that you have a **personal interest** in the matter which does not amount to a DPI, you must make verbal declaration of the existence and nature of that interest at or before the consideration of the item of business or as soon as the interest becomes apparent. You should leave the room if your continued presence is incompatible with the 7 Principles of Public Life (selflessness; integrity; objectivity; accountability; openness; honesty; and leadership).

You have a personal interest where –

- a decision in relation to that business might reasonably be regarded as affecting the well-being or financial standing (including interests in land and easements over land) of you or a member of your family or a person or an organisation with whom you have a close association to a greater extent than it would affect the majority of the Council Tax payers, ratepayers or inhabitants of the ward or electoral area for which you have been elected or otherwise of the Authority's administrative area, or
- it relates to or is likely to affect any of the interests that are defined as DPIs but are in respect of a member of your family (other than a partner) or a person with whom you have a close association.

Guidance on declarations of interest, incorporating regulations published by the Government in relation to Disclosable Pecuniary Interests, has been circulated to you previously.

You should identify any potential interest you may have relating to business to be considered at the meeting. This will help you and anyone that you ask for advice to fully consider all the circumstances before deciding what action you should take.

In certain circumstances the Council may grant a **dispensation** to permit a Member to take part in the business of the Authority even if the member has a Disclosable Pecuniary Interest relating to that business.

To obtain a dispensation, you must write to the Monitoring Officer at least 48 hours before the meeting in question, explaining why a dispensation is sought and desirable, and specifying the period of time for which it is sought. The Monitoring Officer may consult with the Independent Person or the Council's Standards Committee in relation to a request for dispensation.

Further advice can be obtained from Gillian Duckworth, Director of Legal and Governance on 0114 2734018 or email gillian.duckworth@sheffield.gov.uk.

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Health Scrutiny Sub-Committee

Meeting held 21st June 2022

PRESENT: Councillors Ruth Milsom (Chair), Steve Ayris (Deputy Chair), Vic Bowden, Abtisam Mohamed, Anne Murphy, Kevin Oxley, Martin Phipps, Garry Weatherall.

Lucy Davies, HealthWatch Sheffield representative.

1. WELCOME AND HOUSEKEEPING

1.1 The Chair welcomed attendees to the meeting and outlined housekeeping arrangements.

1.2 The Chair explained that the Committee would be taking the agenda items in a different order to that which had been published – items 1-6, then 8, 9, 7.

2. APOLOGIES FOR ABSENCE

2.1 Apologies were received from Councillor Gail Smith with Councillor Vic Bowden as substitute.

3. EXCLUSION OF PRESS AND PUBLIC

3.1 No items were identified where resolutions may be moved to exclude the public and press.

4. DECLARATIONS OF INTEREST

4.1 Councillors Abtisam Mohamed, Garry Weatherall and Martin Phipps declared a personal interest in relation to item 8 on the agenda, as patients of GP surgeries involved in the proposals.

4.2 Lucy Davies, HealthWatch Sheffield representative, declared a personal interest (once appointed) in relation to item 8, as a patient of a GP surgery involved in the proposals.

4.3 Councillor Ruth Milsom declared a personal interest in relation to item 7, knowing a user of the service under discussion.

5. PUBLIC QUESTIONS AND PETITIONS

5.1 Two questions were received from Michael Suter, Chair of Sheffield Save our NHS. These were read out by the Policy & Improvement Officer:

5.2 Q: The new South Yorkshire Integrated Care System Board has not consulted

with the public on their constitution or responded to members of Sheffield Save Our NHS about the new constitution. This does not bode well for public accountability and transparency. Can the Sheffield Health scrutiny committee ensure all meetings of the ICS/ ICB are in public and the public are allowed to submit questions? Can the ICB confirm that no private companies will be members of the Board. Why has there been no consultation with the public, as there has been in other parts of England and Wales in the setting up of the Board and its functions?

The Policy and Improvement Officer confirmed that a response had been requested from the Integrated Care Board, and would be sent to the questioner and members of the sub-committee once received.

- 5.3 Q: Since the CQC audit of Sheffield Teaching Hospitals last year where they found the Trust was no longer good but requires improvement. Has the Health Scrutiny Committee followed this report up by monitoring any improvements in the health care specifically has there been an increase in staffing levels if so can you report on them. Has the mental health services improved and can you find out what improvements have taken place. The maternity services are of particular concern due to the ongoing staffing shortages and the safety levels for patients. Can you inform the public on whether the maternity services have improved and find out what the staffing levels are at present.

The Chair confirmed that these issues would be added to the Committee's work programme, and a written response sent to the questioner.

6. CO-OPTION OF HEALTHWATCH REPRESENTATIVE

- 6.1 The Policy & Improvement Officer presented a report asking the Sub-Committee to co-opt a (non-voting) HealthWatch Sheffield representative to the Committee for the 2022/23 year. This would provide a framework for the statutory relationship between Health Scrutiny and HealthWatch, and strengthen the sub-committee's approach to public engagement as HealthWatch Sheffield will feed the views and experiences of local people into scrutiny discussions.

- 6.2 The report explained that in previous years HealthWatch Sheffield was appointed as an 'Observer' member to Health Scrutiny by full council, but under the new Council Procedure rules the Sub-Committee can appoint co-opted members itself.

- 6.3 **RESOLVED UNANIMOUSLY** that the Health Scrutiny Sub-Committee:-

Co-opts a HealthWatch Sheffield representative to the Health Scrutiny Sub-Committee for the 2022/23 municipal year.

- 6.4 The Chair welcomed Lucy Davies, Chief Operating Officer HealthWatch Sheffield, as a co-opted member of the sub-committee.

7. PROPOSAL TO RELOCATE STEP DOWN BEDS FROM WAINWRIGHT CRESCENT TO LIGHTWOOD HOUSE

7.1 Greg Hackney, Senior Service Manager, Sheffield Health and Social Care NHS Foundation Trust, and Heather Burns, Deputy Director Mental Health Transformation, NHS Sheffield Clinical Commissioning Group presented a report seeking the sub-committee's view on whether proposals to relocate Step Down beds from Wainwright Crescent to Lightwood House constitute a 'substantial change' to the service and therefore require formal consultation with the Health Scrutiny Sub-Committee.

7.2 The Sub-Committee heard that the current site at Wainwright Crescent does not support the provision of dignified, respectful of modern community-based care; and that there were significant limitations to making meaningful improvements to the current building. The report stated that moving the service to Lightwood House would provide therapeutic care and support in a modern facility; dignity and privacy; meaningful activities through more and flexible private and communal space and better local leisure facilities. The proposal would result in a reduction of 1 bed, however improvements to patient flow would mitigate this.

7.3 In response to concerns that moving the site further to the south of the city may deter some patients from using the (voluntary) service, NHS representatives felt that the improvement in quality to the service as a result of the move would be likely to encourage uptake of the service – but that more work would be done to look at this.

7.4 Members of the Sub-Committee welcomed the opportunity to visit the site.

7.5 **RESOLVED UNANIMOUSLY:** That the Health Scrutiny Sub-Committee:-

1. Does not consider the proposal to relocate step down beds from Wainwright Crescent to Lightwood House to be a 'substantial service change' and therefore does not require further formal consultation with the Sub-Committee.
2. Requests a progress report come back to the sub-committee in 6 months; to include information on whether the move has affected demand for the service, and an offer of a site visit for members of the sub-committee.

8. PRIMARY CARE ESTATE TRANSFORMATION PLANS AND ENGAGEMENT FINDINGS

8.1 Representatives from NHS Sheffield Clinical Commissioning Group - Abigail Tebbs, Deputy Director of Delivery, Primary Care Estates and Digital, Lucy Ettridge, Deputy Director, Communications, Engagement and Equality and Dr Terry Hudson, Chair (apologies from Jackie Mills, Director of Finance) – attended the meeting to present a report on a programme to invest and transform primary

care in three areas of the city, including the proposal to build 5 new health centres.

8.2 The Sub-Committee discussed the report, which set out the Draft Pre-Consultation Business Case (PCBC), the Pre-Consultation Engagement Findings, and the draft consultation plan and asked for the Sub-Committee's consideration and comments prior to approval for the PCBC and consultation being sought from the CCG's Primary Care Commissioning Committee at its meeting on the 23rd June 2022.

8.3 The Sub-Committee expressed comments and concerns on the reports. The Health Scrutiny Sub-Committee:-

1. Is concerned that there may be some inaccuracies in the way the survey data from the pre-engagement exercise was analysed - specifically around the 'net agree' figures and how 'neutral' responses may have been counted.
2. Is disappointed that the 'Carry Forward' options from the long list will not be included in the consultation, and would like the PCCC to look carefully at whether the 'carry forward' offers could be viable.
3. Is concerned that the Pre-Consultation Business Case does not adequately address or mitigate:
 - Negative impacts identified through the Equality Impact Assessment
 - Negative patient responses from the pre-consultation engagement around ability and willingness to travel further to access services.
4. Is concerned that the low response rate to the pre-consultation engagement (2%) undermines its findings, and runs counter to the NHS '4 tests for service change' requirement around strong public and patient engagement.
5. Is concerned that the travel times to new sites have not been properly considered in this process, and has doubts around the accuracy of some of the walking travel times as set out in the Pre-Consultation Business Case – eg local members felt that walking from Burngreave Surgery to Spital Street in 4 minutes would be challenging.
6. Is disappointed that travel by bus was not considered as a factor in identifying suitable locations for the new sites.
7. Is concerned that the proposals don't address the fundamental issue facing patients trying to access primary care - the lack of GP appointment availability.
8. Is concerned that the proposals will result in an increase in travel - running counter to the City's ambitions around carbon reduction and '15 Minute Neighbourhoods'.
9. Thinks that the consultation document should be clearly and informatively set out – making it clear how this consultation is different to the pre-consultation engagement process; and addressing upfront the issues raised through that engagement. Committee members welcome the opportunity to

be involved in the 'Readers Panel'.

8.4 **RESOLVED UNANIMOUSLY:** That the Health Scrutiny Sub-Committee:-

Agrees to submit its comments and concerns on the Primary Care Estate Transformation Plans, as set out in 8.3 above, to the meeting of NHS Sheffield Clinical Commissioning Group's Primary Care Commissioning Committee on the 23rd June 2022.

9. **ICB UPDATE**

9.1 Present for this item were Joe Horobin, Director of Integrated Commissioning, Sheffield City Council and Dr Terry Hudson, Chair, NHS Sheffield Clinical Commissioning Group. Apologies were received from Jackie Mills, Director of Finance, NHS Sheffield CCG.

9.2 A briefing on the NHS reforms was provided, setting out the current and future structures and relationships in Sheffield, and explaining the NHS and Social Care System in Sheffield.

9.3 The Sub-Committee heard that the governance arrangements for the new system were still evolving and further updates could be brought to future meetings – but that the changes provide an opportunity to reshape relationships across commissioning and delivery to get the best outcomes for localities, neighbourhoods and residents across the city. Maintaining accountability to local people, and a commitment from the system to 'place' and neighbourhood level would be important in this. The transition from CCG to ICB will remove the leading role that local clinicians have played in the health and care governance system, and maintaining the local insight, intelligence and accountability that this provided will be key.

9.4 It was confirmed that there is no local accountability of the ICB Chair written into the ICB constitution. The ICB Chair will be accountable to the Secretary of State.

9.5 It was expected that Local Authority representation on the Integrated Care Board would be a Chief Executive. There may be opportunities for elected member involvement in the Integrated Care Partnership, but no detail was available yet.

9.6 **RESOLVED:** That the Health Scrutiny Sub-Committee:-

Notes the update with thanks, and looks forward to future discussions on this issue.

10. **ANY OTHER BUSINESS**

10.1 The Chair agreed to email members of the Sub-Committee for suggestions for the work programme.

- 10.2 Further to the public question on CQC inspections, the Chair stated that an item would be included in the work programme for the Trusts to give an update on their CQC inspection improvements plans – to include information on staffing levels, maternity services and mental health services.



Report to Health Scrutiny Sub-Committee

Report of:	<i>Sheffield Health and Social Care NHS Foundation Trust</i>
Report to:	<i>Health Scrutiny Sub-Committee</i>
Date of Decision:	<i>8 September 2022</i>
Subject:	<i>CQC Improvement Update</i>

Purpose of Report:

The attached slides provide the Sub-Committee with a CQC improvement update from Sheffield Health and Social Care NHS Foundation Trust – following on from a discussion at the Healthier Communities and Adult Social Care Scrutiny Committee meeting in September 2021 - [Sheffield City Council - Agenda item - Care Quality Commission Inspection Update - Sheffield Health and Social Care NHS Foundation Trust](#)

Recommendations:

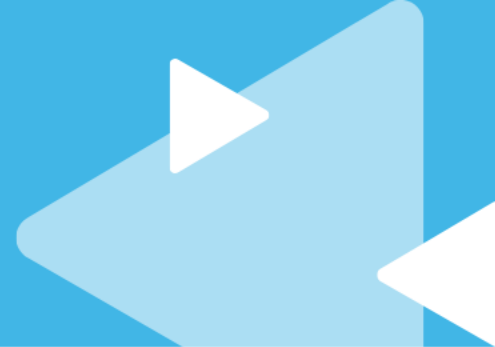
To consider, discuss and note the update.

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Health Scrutiny Sub-Committee Meeting

September 2022






Our overall CQC ratings 2020 / 2021

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2020

Overall trust quality rating

Inadequate 

2021

Overall trust quality rating

Requires Improvement 

Domain ratings August 2021

Overall trust quality rating	Requires improvement ●
Are services safe?	Requires improvement ●
Are services effective?	Requires improvement ●
Are services caring?	Good ●
Are services responsive?	Requires improvement ●
Are services well-led?	Requires improvement ●

Further improvement in 2022

Acute Wards and Psychiatric Intensive Care Unit (Inspection published February 2022)

Overall rating upgraded to Requires Improvement and warning notice lifted

CQC noted:



Range of treatments provided suitable to needs of patients



Mandatory training levels in management of aggression and violence achieved



Staff work well together as multidisciplinary team



Improved environment for sexual safety, privacy and dignity



Good practice followed in respect to Safeguarding

We formally exited enhanced support in June 2022

Background of improvement



Equality and
Diversity Strategy



Staffing levels
suitable for services
provided



Timely completion of
serious incident reports



Improved
Safeguarding



Access to information
for ward staff



Governance
processes are
embedded and
sustainable



Awareness and involvement of
duty of candour



Patients involved in
treatment planning and
care



How do we know things are getting better?

Culture and
Quality Visits

Out-of-Area
Quality
Assurance

Board Visits

Auditing Care
Standards

Performance
Reviews

We know we have more to do

Staffing

We have recruitment plans in place and work with NHS England & Improvement with the intention of reducing job vacancies to zero

Buildings

We have made great improvements to our wards to make them safe and therapeutic places but further work is required. We have plans underway to build new facilities

Learning Disability

We continue to work with partners in Sheffield and South Yorkshire to develop responsive, person-centred care pathways for people with Learning Disabilities

Ensuring staff on busy wards receive training and supervision

We are focusing efforts across SHSC to ensure that training and supervision happen within all core services

Ensuring patients, carers and advocates are involved in care

We have made improvements in this area and are currently implementing our service user engagement strategy



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Report to Health Scrutiny Sub-Committee

8 September 2022

Report of: Gillian Duckworth, Director of Legal and Governance

Subject: Committee Work Programme

Author of Report: Emily Standbrook-Shaw, Policy & Improvement Officer
Emily.standbrook-shaw@Sheffield.gov.uk

Summary:

The Committee's Work Programme is attached at Appendix 1 for the Committee's consideration and discussion. This aims to show all known, substantive agenda items for forthcoming meetings of the Committee, to enable this committee, other committees, officers, partners and the public to plan their work with and for the Committee.

Any changes since the Committee's last meeting, including any new items, have been made in consultation with the Chair, and the document is always considered at the regular pre-meetings to which all Group Spokespersons are invited.

The following potential sources of new items are included in this report, where applicable:

- Questions and petitions from the public, including those referred from Council
- References from Council or other committees (statements formally sent for this committee's attention)
- A list of issues, each with a short summary, which have been identified by the Committee or officers as potential items but which have not yet been scheduled (See Appendix 1)

The Work Programme will remain a live document and will be brought to each Committee meeting.

Recommendations:

1. That the Committee's work programme, as set out in Appendix 1 be agreed, including any additions and amendments identified in Part 1;
2. That consideration be given to the further additions or adjustments to the work programme presented at Part 2 of Appendix 1;
3. That Members give consideration to any further issues to be explored by officers for inclusion in Part 2 of Appendix 1 of the next work programme report, for potential addition to the work programme; and

Background Papers: None

Category of Report: Open

COMMITTEE WORK PROGRAMME

1.0 Prioritisation

1.1 For practical reasons this committee has a limited amount of time each year in which to conduct its formal business. The Committee will need to prioritise firmly in order that formal meetings are used primarily for business requiring formal decisions, or which for other reasons it is felt must be conducted in a formal setting.

1.2 In order to ensure that prioritisation is effectively done, on the basis of evidence and informed advice, Members should usually avoid adding items to the work programme which do not already appear:

- In the draft work programme in Appendix 1 due to the discretion of the chair; or
- within the body of this report accompanied by a suitable amount of information.

2.0 References from Council or other Committees

2.1 Any references sent to this Committee by Council, including any public questions, petitions and motions, or other committees since the last meeting are listed here, with commentary and a proposed course of action, as appropriate:

Issue	
Referred from	
<i>Details</i>	
<i>Commentary/ Action Proposed</i>	

3.0 Member engagement, learning and policy development outside of Committee

3.1 Subject to the capacity and availability of councillors and officers, there are a range of ways in which Members can explore subjects, monitor information and

develop their ideas about forthcoming decisions outside of formal meetings. Appendix 2 is an example 'menu' of some of the ways this could be done. It is entirely appropriate that member development, exploration and policy development should in many cases take place in a private setting, to allow members to learn and formulate a position in a neutral space before bringing the issue into the public domain at a formal meeting.

2.2 Training & Skills Development - Induction programme for this committee.

Title	Description & Format	Date

Appendix 1 – Work Programme

Part 1: Proposed additions and amendments to the work programme since the last meeting:

Item	Proposed Date	Note

Part 2: List of other potential items not yet included in the work programme

Issues that have recently been identified by the Committee, its Chair or officers as potential items but have not yet been added to the proposed work programme. If a Councillor raises an idea in a meeting and the committee agrees under recommendation 3 that this should be explored, it will appear either in the work programme or in this section of the report at the committee's next meeting, at the discretion of the Chair.

Topic	
Description	
Lead Officer/s	
Item suggested by	<i>Officer, Member, Committee, partners, public question, petition etc</i>
Type of item	<i>Referral to decision-maker/Pre-decision (policy development/Post-decision (service performance/ monitoring)</i>
Prior member engagement/ development required <i>(with reference to options in Appendix 2)</i>	
Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 3)</i>	
Lead Officer Commentary/Proposed Action(s)	

Part 3: Agenda Items for Forthcoming Meetings

Meeting 3	November 23 rd 2022	Time				
Topic	Description	Lead Officer/s	Type of item <i>Decision/Referral to decision-maker/Pre-decision (policy development)/Post-decision (service performance/ monitoring)</i>	Prior member engagement/ development required <i>(with reference to options in Appendix 1)</i>	Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 2)</i>	Final decision-maker (& date) This Cttee/Another Cttee (eg S&R)/Full Council/Officer
Primary Care Capital Transformation	Consideration of proposal to create 5 GP led hubs in the City.	Jackie Mills, NHS Sheffield CCG. Joe Horobin, SCC	Consideration of 'Substantial Variation' to health services.	Sub-Committee has had previous engagement – considered at June meeting of the Sub-Committee.	Considering the results of the public consultation before making recommendations to the ICB on the proposals.	This Committee
Standing items	<ul style="list-style-type: none"> • <i>Public Questions/ Petitions</i> • <i>Work Programme</i> 					

Meeting 4	December 7 th 2022	Time				
Topic	Description	Lead Officer/s	Type of item <i>Decision/Referral to decision-maker/Pre-decision (policy development)/Post-decision (service performance/ monitoring)</i>	Prior member engagement/ development required <i>(with reference to options in Appendix 1)</i>	Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 2)</i>	Final decision-maker (& date) This Cttee/Another Cttee (eg S&R)/Full Council/Officer
Wainwright Crescent Step Down Beds	Progress report following implementation of proposals as discussed at June Sub-Committee meeting	Heather Burns, NHS South Yorkshire ICB/Greg Hackney, SHSCFT	Performance Monitoring.	Site visit to be offered to Sub-Committee members.	Report expected to include patient and carer feedback. HealthWatch Sheffield will have opportunity to feed in views of local people where appropriate.	This Committee
Standing items	<ul style="list-style-type: none"> • <i>Public Questions/ Petitions</i> • <i>Work Programme</i> 					

Meeting 5	January 25 th 2023	Time				
Topic	Description	Lead Officer/s	Type of item <i>Decision/Referral to decision-maker/Pre-decision (policy development)/Post-decision (service performance/ monitoring)</i>	Prior member engagement/ development required <i>(with reference to options in Appendix 1)</i>	Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 2)</i>	Final decision-maker (& date) This Cttee/Another Cttee (eg S&R)/Full Council/Officer
Standing items	<ul style="list-style-type: none"> • <i>Public Questions/ Petitions</i> 					

	• <i>Work Programme</i>					
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Meeting 6	March 23 2023	Time				
Topic	Description	Lead Officer/s	Type of item <i>Decision/Referral to decision-maker/Pre-decision (policy development)/Post-decision (service performance/ monitoring)</i>	Prior member engagement/ development required <i>(with reference to options in Appendix 1)</i>	Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 2)</i>	Final decision-maker (& date) This Cttee/Another Cttee (eg S&R)/Full Council/Officer
Quality Accounts 2022/23	Sub-Committee to agree approach to the 2022/23 Quality Accounts process.	Principal Democratic Services Officer	Statutory consultation	Briefing on role and purpose of Quality Accounts to be included in report.		This Committee.
Standing items	<ul style="list-style-type: none"> • <i>Public Questions/ Petitions</i> • <i>Work Programme</i> 					

Items which the committee have agreed to add to an agenda, but for which no date is yet set.						
Topic	Description	Lead Officer/s	Type of item <i>Decision/Referral to decision-maker/Pre-decision (policy development)/Post-decision (service performance/ monitoring)</i>	Prior member engagement/ development required <i>(with reference to options in Appendix 1)</i>	Public Participation/ Engagement approach <i>(with reference to toolkit in Appendix 2)</i>	Final decision-maker (& date) This Cttee/Another Cttee (eg S&R)/Full Council/Officer
Adult Dysfluency and Cleft Palate Speech and Language	Healthier Communities and Adult Social Care Scrutiny Committee has previously been involved in considering 'substantial change' to service.	Lucy Ettridge/Kate Cleave, NHS South Yorkshire ICB	Consideration of 'substantial change' to service.	Last considered January 2022: Adult Dysfluency and Cleft Lip and Palate Service		This Committee

Therapy Services	Proposals have since been reviewed – still awaiting new proposal on future service model. The Scrutiny Sub-Committee will need to consider the new proposal when it has been developed.			Update.pdf (sheffield.gov.uk)		
Continence Services	Healthier Communities and Adult Social Care Scrutiny Committee received the NHS response to the report and recommendations of the Scrutiny Continence Working Group in March 2022. Committee requested that the NHS be invited to give a further update on progress at a future meeting.	Sarah Burt, NHS South Yorkshire ICB	Performance monitoring	Last considered March 2022: Continence Services.pdf (sheffield.gov.uk)		
NHS Commissioning in 'Place' – Sheffield Committee arrangements	Update on the developments of South Yorkshire ICB and the establishment of the Sheffield Place Committee	Emma Latimer – NHS South Yorkshire ICB	Briefing			This Committee
CQC CAMHS Monitoring Visit – post visit action plan.	To consider progress on addressing the issues identified through the CQC CAMHS visit, to include the	tbd	tbd			This Committee

	Children's Hospital, Care Trust and Teaching Hospitals.					
Standing items	<ul style="list-style-type: none">• <i>Public Questions/ Petitions</i>• <i>Work Programme</i>					

Appendix 2 – Menu of options for member engagement, learning and development prior to formal Committee consideration

Members should give early consideration to the degree of pre-work needed before an item appears on a formal agenda.

All agenda items will anyway be supported by the following:

- Discussion well in advance as part of the work programme item at Pre-agenda meetings. These take place in advance of each formal meeting, before the agenda is published and they consider the full work programme, not just the immediate forthcoming meeting. They include the Chair, Vice Chair and all Group Spokespersons from the committee, with officers
- Discussion and, where required, briefing by officers at pre-committee meetings in advance of each formal meeting, after the agenda is published. These include the Chair, Vice Chair and all Group Spokespersons from the committee, with officers.
- Work Programming items on each formal agenda, as part of an annual and ongoing work programming exercise
- Full officer report on a public agenda, with time for a public discussion in committee
- Officer meetings with Chair & VC as representatives of the committee, to consider addition to the draft work programme, and later to inform the overall development of the issue and report, for the committee's consideration.

The following are examples of some of the optional ways in which the committee may wish to ensure that they are sufficiently engaged and informed prior to taking a public decision on a matter. In all cases the presumption is that these will take place in private, however some meetings could happen in public or eg be reported to the public committee at a later date.

These options are presented in approximately ascending order of the amount of resources needed to deliver them. Members must prioritise carefully, in consultation with officers, which items require what degree of involvement and information in advance of committee meetings, in order that this can be delivered within the officer capacity available.

The majority of items cannot be subject to the more involved options on this list, for reasons of officer capacity.

- Written briefing for the committee or all members (email)
- All-member newsletter (email)
- Requests for information from specific outside bodies etc.
- All-committee briefings (private or, in exceptional cases, in-committee)
- All-member briefing (virtual meeting)
- Facilitated policy development workshop (potential to invite external experts / public, see appendix 2)
- Site visits (including to services of the council)
- Task and Finish group (one at a time, one per cttee)

Furthermore, a range of public participation and engagement options are available to inform Councillors, see appendix 3.

Appendix 3 – Public engagement and participation toolkit

Public Engagement Toolkit

On 23 March 2022 Full Council agreed the following:

A toolkit to be developed for each committee to use when considering its ‘menu of options’ for ensuring the voice of the public has been central to their policy development work. Building on the developing advice from communities and Involve, committees should make sure they have a clear purpose for engagement; actively support diverse communities to engage; match methods to the audience and use a range of methods; build on what’s worked and existing intelligence (SCC and elsewhere); and be very clear to participants on the impact that engagement will have.

The list below builds on the experiences of Scrutiny Committees and latterly the Transitional Committees and will continue to develop. The toolkit includes (but is not be limited to):

- a. Public calls for evidence
- b. Issue-focused workshops with attendees from multiple backgrounds (sometimes known as ‘hackathons’) led by committees
- c. Creative use of online engagement channels
- d. Working with VCF networks (eg including the Sheffield Equality Partnership) to seek views of communities
- e. Co-design events on specific challenges or to support policy development
- f. Citizens assembly style activities
- g. Stakeholder reference groups (standing or one-off)
- h. Committee / small group visits to services
- i. Formal and informal discussion groups
- j. Facilitated communities of interest around each committee (eg a mailing list of self-identified stakeholders and interested parties with regular information about forthcoming decisions and requests for contributions or volunteers for temporary co-option)
- k. Facility for medium-term or issue-by-issue co-option from outside the Council onto Committees or Task and Finish Groups. Co-optees of this sort at Policy Committees would be non-voting.

This public engagement toolkit is intended to be a quick ‘how-to’ guide for Members and officers to use when undertaking participatory activity through committees.

It will provide an overview of the options available, including the above list, and cover:

- How to focus on purpose and who we are trying to reach
- When to use and when not to use different methods
- How to plan well and be clear to citizens what impact their voice will have
- How to manage costs, timescales, scale.

There is an expectation that Members and Officers will be giving strong consideration to the public participation and engagement options for each item on a committee’s work programme, with reference to the above list a-k.

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