

These notes indicate the decision(s) taken by the named Cabinet Member on the date shown and the officers responsible for taking the agreed action. For background documentation please refer to the report(s) to the Cabinet Member available on the Council's web site ([www.oxfordshire.gov.uk](http://www.oxfordshire.gov.uk).)

The decision(s) take effect at the time and date specified, unless before that time written notice is given in accordance with the Council's Scrutiny Procedure Rules requiring the decision to be called in for review by the relevant Scrutiny Committee.

If you have a query please contact Julie Dean (Tel: (01865) 815322; E-Mail: [julie.dean@oxfordshire.gov.uk](mailto:julie.dean@oxfordshire.gov.uk))

**DELEGATED DECISIONS BY CABINET MEMBER FOR PUBLIC HEALTH &  
THE VOLUNTARY SECTOR - WEDNESDAY, 25 JUNE 2014**

<i>List published 26 June 2014 Decisions will (unless called in) become effective at 5.00pm on 3 July 2014</i>		
<i>RECOMMENDATIONS CONSIDERED</i>	<i>DECISIONS</i>	<i>ACTION</i>
<b>1. Declarations of Interest</b>	None.	Rachel Dunn
<b>2. Questions from County Councillors</b>	There were two questions from Cllr Glynis Phillips in relation to items 4 and 5 (please see below).	
<b>3. Petitions and Public Address</b>	None.	
<p><b>4. Provision of Adult Drug and Alcohol Treatment Services</b></p> <p>The Council has a statutory obligation to "take such steps as it considers appropriate for improving the health of the people in its area" (s2B National Health Service Act 2006 ("NHS Act 2006") as amended by s12 Health and Social Care Act 2012). This includes "providing services or facilities for the prevention, diagnosis or treatment of illness" (s 2B (3) (c) NHS Act 2006).</p> <p>Public Health has a ring fenced budget, and within this an allocation has been made for an Integrated Adult Drug and Alcohol Treatment Service. This information is reported to the Cabinet.</p> <p>The contracts with the two current providers expire on 31 March 2015 so a</p>		

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<p>decision is required in order to proceed with procurement arrangements.</p> <p>Costs of commissioning these services is greater than £500,000 and commitment to incur this expenditure has not previously been made by the Council due to existing contracts having been transferred in on 1 April 2013. For this reason incurring of this expenditure for the commissioning of these services is considered a key decision.</p> <p><b><i>The Cabinet Member for Public Health &amp; the Voluntary Sector is RECOMMENDED to approve the incurring of expenditure for the commissioning of Adult Drug and Alcohol Treatment Services and to delegate to the Director of Public Health, following consultation with the Cabinet Member for Public Health and the Voluntary Sector, the authority to determine tenders and contracts in order to secure the provision of services.</i></b></p>	<p>Approved.</p>	<p>Director of Public Health (Jo Melling)</p>
<p><b>5. Smoking Cessation Programme</b></p> <p>Smoking is still the single greatest cause of preventable illness and premature death in the UK. Smoking kills nearly 80,000 people each year in England alone. Despite the obvious risks to their health, nearly 15% of adults in Oxfordshire are still smoking and two thirds of them would have become addicted before they were 18. Public Health in Oxfordshire County Council (OCC) is responsible for a programme of work to improve local services to stop smoking. A range of local approaches is needed, particularly the provision of stop smoking services in community settings and targeting hard to reach and higher risk</p>		

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<p>groups.</p> <p>Public Health has a ring fenced budget, and within this an allocation has been made for smoking cessation services as reported in the financial monthly monitoring reports to cabinet.</p> <p>Contracts with current providers expire on 31 March 2015, so a decision is required in order to proceed with procurement arrangements. As the costs of commissioning these services are significant with regard to the revenue budget allocated to the Cabinet Member the commissioning of these services is considered a key decision.</p> <p>Please note that the report itself does not contain exempt information and is available to the public. However, Annex 1 provides additional information on the proposed service model if a commissioning decision is made. This is commercial and sensitive as it contains information that would give potential providers advance knowledge of decisions which should only be released through the formal procurement route. Therefore:</p> <p><i>the public should be excluded during consideration of Annex 1 to the report because its discussion in public would be likely to lead to the disclosure to members of the public present of information in the following prescribed category:</i></p> <p>3. <i>Information relating to the financial or business affairs of any particular person (including the authority holding that information) and since it is considered that, in all the circumstances of the case, the</i></p>		

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<p><i>public interest in maintaining the exemption outweighs the public interest in disclosing the information, in that such disclosure would give potential providers advance knowledge of decisions which should only be released through the formal procurement route.</i></p> <p><b>The Cabinet Member for Public Health &amp; the Voluntary Sector is RECOMMENDED to approve the incurring of expenditure for the commissioning of the Smoking Cessation Programme and to delegate to the Director of Public Health, following consultation with the Cabinet Member for Public Health and the Voluntary Sector, the authority to determine tenders and contracts in order to secure the provision of services’.</b></p>	Approved	Director of Public Health (Rebecca Cooper)
<p><b>6. Chill Out Fund 2014/15 - June 2014</b></p> <p>Oxfordshire County Council believes that YOUTH MATTERS and has set up a fund of £100,000 to support work with children and young people across the County. The fund supports the aspirations of those working with children and young people in Oxfordshire to ensure all children and young people can access positive activities in their leisure-time by 2020.</p> <p><b>The Cabinet Member for Public Health &amp; the Voluntary Sector is RECOMMENDED to consider the applications (listed in paragraph 5 of the report) for grant support in the light of the officer recommendation as set</b></p>	<p>The Cabinet Member considered the applications for grant support and awarded the following (amount awarded in brackets):</p> <ul style="list-style-type: none"> <li>● 28<sup>th</sup> Oxford Scout Group –</li> </ul>	Director for Children’s Services (Ruth Ashwell)

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<b><i>out in the applications annexed to the report.</i></b>	'Roof Replacement' project (£1,000) <ul style="list-style-type: none"> <li>• Adventure Plus – 'New Biking Equipment for Young People' project (£500)</li> <li>• South &amp; Vale Carers Centre – 'South &amp; Vale Young Carers project (£4,963)</li> <li>• 1<sup>st</sup> Wallingford Boys' Brigade &amp; Girls' Association – 'Camp 2014' project (£445)</li> <li>• Freeland Football Club – 'Youth Football' project (£500)</li> <li>• Angelmead Explorer Scout – '2014 Malta' project (£1,000)</li> <li>• The Nature Effect – 'Girls Mentoring Circle' project (£1,131)</li> <li>• Madley Park Residents Association – 'Madley Park Teen Zone' project (£1,000)</li> <li>• Deddington On Air – 'Radio for Youth' project (£0)</li> </ul>	

## ITEM 2 – QUESTIONS FROM COUNTY COUNCILLORS

Questions received from the following Member:

From Councillor Glynis Phillips to Cabinet Member

### Item 4 – Provision of Adult Drug and Alcohol Treatment Services

#### Question

Is there more information available about how a 'prime provider' contract would work? For example would they subcontract services themselves so that if a secondary provider failed to meet targets the prime provider could tender for another secondary provider possibly for less money? and how would the specifications be different from the current NHS contract?

#### Answer

The Prime Provider may sub contract elements of the contract, they will outline this within the tender process. The Council will retain the right to agree subcontracting arrangements, which will include provider suitability and viability checks and any alterations to their sub-contracting arrangement.

The Current Contracts are with both the NHS and the Voluntary sector providers. The difference from the current specification is for one integrated service, which following our consultations need to:

- Improve information and advice to families
- Provide better support for families
- Improve services for people with complex needs,
- Have a better range of service delivered across the county
- Have access to education training and employment
- Ensure service users are supported to access mutual aid.

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### Item 5 – Smoking Cessation Programme

#### Question

The statistic that two-thirds of smoking adults become addicted before they are 18 years old is troubling. There is the issue of where the adolescents are getting cigarettes given the restrictions on sales and whether multi-agency work in this area is effective or has a high enough profile? Is there a specific target for quitters under the age of 18?

#### Answer

Where are adolescents getting cigarettes given the restrictions on sales?

Tobacco may be available from:

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- Parents/adults who smoke
- Shops who are not adhering to Trading Standards enforcement or
- Other sources such as the internet/local community/black market. These areas are enforced by HMRC (and Trading Standards if not properly packaged).

Multi-agency work in this area

- The Oxfordshire Tobacco Alliance includes representatives from Trading Standards, who have links with HMRC.
- The Oxfordshire Smoking Advice Service campaign advocating for Smoke Free Cars and Homes may reduce access to tobacco products by adolescents at home. This campaign is promoted to Health Visitors and other stakeholders.

There is currently no target for under 18 year quitters.

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**OXFORDSHIRE  
COUNTY COUNCIL**