

Shadow Health and Wellbeing Board

Work Programme of Decisions

Title of report and intended decision to be agreed by the Shadow HWB	Indicative Meeting Date	Consultees and Date/Method	Documents which may be considered	Contact Members and Officers (Method of Comment and Closing Date)
<p>Insert the title of the key decision and a short sentence describing what decision the Shadow HWB will need to make e.g. To adopt</p>	<p>Insert the date of the Shadow HWB meeting</p>	<p>Insert who has been consulted e.g. stakeholders, the date they were consulted and the method.</p>	<p>Insert the documents the Shadow HWB may consider when making their decision e.g. report.</p>	<p>Insert the name and title of the relevant Shadow HWB Member, the name of the relevant Director and the name, telephone number and email address of the contact officer.</p> <p>Also insert the closing date for comments, if no date is supplied, then the closing date will be a month before the Shadow HWB date e.g. the closing date for the Shadow HWB meeting on 8 November will be 11 October.</p>