

HEALTH POLICY AND PERFORMANCE BOARD

At a meeting of the Health Policy and Performance Board held on Tuesday, 8 November 2011 at Council Chamber, Runcorn Town Hall

Present: Councillors E. Cargill (Chairman), J. Lowe (Vice-Chairman), Austin, Baker, Dennett, M Lloyd Jones, C. Loftus, Macmanus, Zygadllo and Mr P. Cooke

Apologies for Absence: Councillor Horabin and C. Plumpton Walsh

Absence declared on Council business: None

Officers present: L. Derbyshire, J. Gibbon, A. McNamara, S. Wallace-Bonner and L Wilson

Also in attendance: Mr D Tanner (Head of Community Commissioning NHS Halton & St Helens) and Mr D Lyon GP (Castlefields, Runcorn)

In accordance with Standing Order 33, Councillor Wright Portfolio Holder – Health and Adults

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

	<i>Action</i>
HEA29 MINUTES	
The Minutes of the meetings held on 23 August 2011 and 13 September 2011 having been printed and circulated were signed as a correct record.	
HEA30 PUBLIC QUESTION TIME	
The Board was advised that no public questions had been received.	
HEA31 SSP MINUTES	
The Minutes of the Health Strategic Partnership Board of its meeting held on 14 July 2011 were submitted to the Board for consideration.	
RESOLVED: That the minutes be noted.	

HEA32 REDESIGN OF COMMUNITY NURSING SERVICES

The Board received a presentation from Mr D Tanner, Head of Commissioning, NHS Halton and St Helens and Dr David Lyon, GP, Castlefields, Runcorn on the changes to community nursing services provided by Bridgewater Community NHS Trust which had resulted from the redesign and re-specification of those services.

The presentation:-

- Explained the background to the redesign and re-specification of the services;
- Highlighted the reasons why change was required i.e. that there had been:-
 - multiple specifications;
 - a perceived disconnection between General Practice and community nursing teams;
 - an Increasing potential for duplication and overlap;
 - artificial boundaries leading to multiple visits; and
 - a recognition that there were opportunities to develop a more holistic approach;
- Gave details of the Integrated Nursing Team i.e it would comprise of district nurses, community matrons, treatment rooms, phlebotomy and practice nurses and would focus on practice population and be based in GP practices wherever possible;
- Explained that there would be four teams in Runcorn, and four teams in Widnes;
- Outlined the changes for patients i.e.
 - A more holistic approach – potentially fewer visits / appointments;
 - A 24/7 service;
 - A single point of contact;
 - Greater consistency; and

- Highlighted how the redesign of the service fitted into future developments i.e.
 - The foundation for integrated Community Multidisciplinary Teams – including social care;
 - with current integration plans and developments in Halton; and
 - with Pro-Active Care model (Mersey Cluster PCT), home based holistic care, managing long term conditions, reducing unplanned admissions and reducing re-admissions.

The Board welcomed the report and noted the numerous benefits for patients having an individual identified as their single point of contact to meet their care requirements. The Board also noted that a wider team was available should there be any difficulties such as a breakdown in the relationship between the patient and nurse or to cover sickness absence.

RESOLVED: That

- (1) the presentation and comments raised be noted; and
- (2) Mr D Tanner and Mr D Lyon be thanked for their informative presentation.

Note: (Councillor M Lloyd Jones declared a Personal Interest in the following three items of business due to her husband being a Non Executive Director of Halton & St Helens Primary Care Trust.)

HEA33 LEARNING DISABILITY PARTNERSHIP BOARD – ANNUAL SELF ASSESSMENT REPORT 2010/11

The Board considered a report of the Strategic Director, Communities which presented Members with the Valuing People Now: Partnership Board Annual Self Assessment Report 2010-11 and outlined the process involved in its completion.

The Board was further advised that the Partnership Board Annual Self Assessment Report was an optional requirement for all Learning Disability Partnership Boards to complete in order to determine progress on implementing Valuing People Now.

The Board was further advised that in the North West region, local authorities were continuing to support the work of the North West Training and Development Team to promote the rights of people with learning disabilities and share good practice across the region.

It was reported that Halton's Self Assessment had been completed by relevant officers of the Council and senior managers of NHS Halton and St Helens. In addition, members of the Partnership Board, including senior officers, Elected Members, people with learning disabilities and family carers have had the opportunity to comment on and amend the report prior to its formal sign off by the Co-Chairs, and representatives for family carers and adults with learning disabilities.

In conclusion, it was reported that the self assessment had been submitted to the Learning Disabilities Observatory by the 29th July deadline and a copy was attached as Appendix 1 to the report.

The Board noted that to support the progress of Valuing People Now, commissioning responsibility for non health related services had transferred from the PCT to the Council in April 2009. In addition, from April 2011, the funding for these services had passed directly to the Council as the non ring fenced Learning Disability Health Reform Specific Grant. It was also noted that although the funding was not ring fenced and efficiency savings would have to be made, the same level of service would need to be provided.

The Board also noted that to improve access to information and to share best practice, reports could be published on the Learning Disability Observatory. This was funded by the Department of Health to collect information on the health and care of people with learning disabilities at www.ihal.org.uk.

RESOLVED: That the report and comments raised be noted.

HEA34 CARING FOR OUR FUTURE: SHARED AMBITIONS FOR CARE AND SUPPORT CONSULTATION

The Board considered a report of the Strategic Director, Communities which provided Members with an overview of the Governments 'Caring for our Future: Shared Ambitions for Care and Support' document.

The Board was advised that on 15 September 2011,

the Government had launched 'Caring for our Future: Shared Ambitions for Care and Support' which was an engagement with people who used care and support services, carers, local councils, care providers, and the voluntary sector regarding the priorities for improving care and support.

The Board was further advised that Caring for our Future was an opportunity to bring together the recommendations from The Law Commission, The Commission on the Funding of Care and Support and The Government's Vision for Adult Social Care.

It was reported that the recommendations from these Commissions would be used as a basis for exploring what the priorities for reform should be and the Board were invited to comment on the consultation to inform these future discussions. In addition, it was reported that the Government had identified six areas where they believed there was the biggest potential to make improvements to the care and support system and which were highlighted in the report.

As part of Caring for our Future, the Government also wanted to hear people's views on the recommendations made by the Commission on Funding of Care and Support and how these proposals should be assessed, including in relation to other potential priorities for improvement. The Commission's recommendations presented a range of options, including the level of a cap and the contribution that people made to living costs in residential care, which could help to manage the system and its costs.

Furthermore, it was reported that as this was such an important issue for the Local Authority and its partners, in relation to the future provision of Adult Social Care, Halton wished to submit a local response to the consultation exercise and as such Halton Council Social Care Divisional Managers, Commissioners, Workforce Development staff, Key Health Stakeholders (5 Borough Partnership, Hospitals, PCT and Public Health), Domiciliary Care and Residential Care providers and Registered Housing Providers had been invited to comment on the consultation questions.

In addition, it was reported that opportunities had also been taken to raise the consultation with partners during events/meetings that were already scheduled e.g. the Health Partnership Board which had been held on 13th October 2011.

A full list of consultation questions were set out in Appendix 1 to the report. Furthermore, the Board was advised that a report on the response would be presented to the Executive Board for consideration at its 1 December 2011 meeting.

The Board noted the financial implications and the potential challenges the Council faced as a result of the White Paper which would be published in Spring 2012 and which was set out in paragraphs 5.1 – 5.4 of the report. In addition concern was raised regarding the extension of contracts in light of the potential changes. It was reported that contracts had conditions built into them to deal with such changes.

It was suggested that a report be presented to the Board on the implications of the White Paper when it had been published in the Spring of 2012.

RESOLVED: That

- (1) the report and comments raised be noted; and
- (2) a report on the implications of the White Paper be presented to a future meeting of the Board.

Strategic Director
- Communities

HEA35 ADULT SOCIAL CARE CUSTOMER CARE REPORT FOR THE YEAR 1 APRIL 2010 TO 31 MAR 2011

The Board considered a report of the Strategic Director, Communities which provided an analysis of complaints, compliments and other enquiries processed under The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 in order to meet statutory requirements to publish an Annual Report.

The Board was advised that the new complaints approach replaced a 3 stage process – an initial investigation and response, a detailed Stage 2 independent investigation and, where requested, a Stage 3 Review Panel hearing, to review the Stage 2 investigation. This had been replaced by a format where, right at the start, the Customer Care Team worked with the person making the complaint to agree the details of the complaint and what would resolve it. At that point, how it was to be handled and the likely timescales, taking into account complexity and complainant's availability etc, were explored and agreed, although they could be further negotiated as required.

The Board was further advised that the new procedures allowed more flexibility, focusing on getting the right outcome rather than satisfying any defined process or timescale; which were now negotiated and agreed with the complainant. It was found through evolving experience, that this approach was more person centred and encouraged greater flexibility in approach in finding solutions to complaints (e.g. mediation). However, it was reported that a 2 stage approach was sometimes still appropriate, with the second stage being invoked where it became apparent that a more detailed investigation was required, which may still be investigated by an independent person, or a more complex alternative solution explored (e.g. through detailed mediation or including other agencies). As Stage 2 complaints were still employed, they had been reported separately in the report.

It was reported that there had been 54 Statutory Complaints closed at Stage 1 in the year, showing an increase of eight from the previous year. Of those 54 there were four that had progressed to Stage 2. Of the 54 Statutory Social Care Complaints, 20 (37%) were upheld and 17 (31%) were partially upheld and 32% were not upheld. The categories of these complaints were set out in the report.

In respect of Stage 2 complaints there had been four. In one, an investigation had been undertaken by an Independent Investigator with the other three being conducted internally by Senior Managers. Three of these Stage 2 complaints had been partially upheld and one had been completely upheld.

In addition, it was reported that the complaints system had been evaluated by asking people how satisfied they were with the way their complaint had been handled. Of those who replied 82% were satisfied with both the response and outcome of their complaint compared to 65% and 55% respectively in the preceding year.

In conclusion, it was reported that compliments had been received across a broad range of service areas. The following list were examples of some of the compliments received:-

- “Thanks for the caring thoughtful understanding care given by team members after her discharge from hospital also their help to keep her dignity”,
- “Thanks to the team for getting the banister fitted two weeks after the initial contact - very happy

with it I don't know how they coped without it.” ;
and

- “Words cannot describe the major impact that you have made on my journey to becoming well again....”

The Board welcomed the report and noted that there had been a small number of complaints considering the range of services the Council provided. In addition, it was also noted that the number of complaints had also reduced in comparison to last year.

In addition, the Board noted the joint complaints protocol that had been agreed with the 5 Borough Partnership, Halton and St Helens NHS, Knowsley and St Helens Council’s and local hospital trusts on how complaints that concern more than one of the organisations would be handled and that Intermediate Care would also follow the same principles.

It was suggested that a similar report on compliments be presented to a future meeting of the Board.

RESOLVED: That

- (1) the report and comments raised be noted; and
- (2) a report on compliments be presented to a future meeting of the Board.

Strategic Director
- Communities

HEA36 QUALITY ASSURANCE OF COMMISSIONED SERVICES

The Board considered a report of the Strategic Director, Communities which informed Members of the role of the Quality Assurance of Commissioned Services.

The Board was advised that in accordance with its statutory duties Members of the Council carried out Inspections on registered Council establishments.

The Board was further advised that at the present time these visits were conducted by Cllr Mike Hodgkinson and Cllr Pamela Wallace. However, Councillors Ellen Cargill, Stan Parker and Geoff Zygadllo were currently completing an induction to carry out Inspections on Council establishments. In addition, it was reported that Members would be required to undertake a CRB check and training before carrying out inspections.

It was reported that visits to the Council establishment Oak Meadow, Peelhouse Lane, Widnes were conducted on a monthly basis. The majority of health, social care and support services were commissioned through the independent sector and there was no statutory requirement for Members to visit services provided by the independent sector.

Furthermore, it was highlighted that the Residential Care Homes and Domiciliary Care Agencies were registered with the Care Quality Commission (CQC), the statutory body charged with regulation of registered residential and nursing care services. However, it was the responsibility of the Communities Directorate to commission local services and a significant part of that role was the quality assurance of services delivered within the Authority.

The report set out the role of Halton's Quality Assurance Team and highlighted that in Halton there were currently 201 commissioned services across Adult Social Care, including 29 registered Residential Care Homes, 12 Registered Domiciliary Care Providers and 58 registered Supported Living services, 7 registered Adult Placements, 2 registered Respite Services and 1 Community Enablement Service.

It was also reported that the Quality Assurance Team used a wide range of quantitative information and qualitative feedback to assess the quality of local services. During the period April 2010 to March 2011, the Quality Assurance Team (4 officers) had carried out 161 inspection visits. Appendix 1 to the report, illustrated the assessment of the overall quality rating for services in Quarter 2, 2010/11 (July - September). The majority of commissioned services were providing good or excellent quality care (Green) to Halton residents.

The Chairman of the Board welcomed the report and reported that Councillor Wright had a list of volunteers who would undergo a CRB check and then receive appropriate training, to support the role of the Quality Assurance team in visiting providers.

The Board noted that if there were any concerns about an establishment, immediate action was taken and this could result in the establishment being placed on an amber rating and the suspension of new placements until improvements were made. The Board also noted that the establishment could be on a Council amber rating for a longer timescale than the CQC, as the Quality Assurance

Team retained the amber rating until they were satisfied that the improvements could be sustained.

The Members of the Board were reassured by the robust procedures and excellent work undertaken by the Quality Assurance Team in ensuring establishments and services provided were safe for residents of the Borough.

It was suggested that when contracts were established for independent services they contained a condition specifying that Elected Members could undertake visits. In response, it was reported that as there was not statutory requirement for Members to undertake visits in independent establishments there may be difficulties in respect of their role.

RESOLVED: That the report and comments raised be noted.

HEA37 BUSINESS PLANNING 2012-15

The Board considered a report of the Strategic Director, Policy and Resources, which gave Members an opportunity to contribute to the development of Directorate Business Plans for the coming financial year.

The Board was advised that each Directorate of the Council was required to develop a medium-term business plan, in parallel with the budget, that was subject to annual review and refresh. The process of developing such plans for the period 2012-2015 was just beginning.

The Board was further advised that at this stage members were invited to identify a small number of priorities for development or improvement (possibly 3-5) that they would like to see reflected within those plans. Suggested proposals included:

- Integration of Public Health;
- Review of Homelessness Services;
- Care Closer to Home; and
- Safeguarding and Dignity

It was reported that Strategic Directors would then develop draft plans which would be available for consideration by Policy and Performance Boards early in the New Year.

It was noted that plans could only be finalised once budget decisions had been confirmed in March and that some target information may need to be reviewed as a result

of final outturn data becoming available post March 2012.

The report also detailed the timeframe for plan preparation, development and endorsement.

The following areas were agreed to be included as priorities for development or improvement:-

- Integration of Public Health (to include Healthwatch and The Health and Well Being Board);
- Review of Homelessness Services: and
- Care Closer to Home (to include the prevention of accidents).

It was suggested that Adult Mental Health Services be included as a priority. In response, it was reported that a report would be presented to the January meeting of the Board on the re-design of services across the 5 Borough Partnership.

RESOLVED: That

- (1) the report and comments raised be noted:
- (2) the priority three areas identified above be agreed for development or improvement in the Directorate Business Plans 2012-15.

Strategic Director
– Policy and
Resources

HEA38 URGENT ITEM

The following item of business which was not included on the Agenda for the meeting was deemed by the Chairman to be an item of urgent business pursuant to Section 100B(4)(b) of the Local Government Act 1972 in order that a joint Scrutiny Committee could be arranged as soon as possible to consider the Cheshire and Merseyside Vascular Review.

HEA39 CHESHIRE AND MERSEYSIDE VASCULAR REVIEW

The Board considered a report of the Strategic Director, Communities, which gave the Members and update on the latest position with regards to the Cheshire and Merseyside Vascular Review.

The Board was advised that following the meeting of the Health Policy and Performance Board on 23rd August 2011 where the Board considered the possible implications

of the Cheshire and Merseyside Vascular Review, it could now be reported that the review had been completed and the project board now wished to consult on the final proposals of the review.

The Board was further advised that due to the significant impact that the proposals would have on local communities and the Acute Trust, it should be concluded that under Regulation 4 of the Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 SI No. 3048 regulations, the proposals posed a substantial variation in the provision of vascular services. Therefore, it was subject to a joint scrutiny meeting by Halton Borough Council, Warrington Borough Council and St. Helens Borough Council. Warrington Council had agreed to lead the process and were currently taking legal advice on the process as this was a highly complex matter as it covered nine geographical areas and their needed to be some mechanism to coordinate the scrutiny process ensuring due diligence.

It was reported that a joint meeting would be organised as soon as practicably possible and appropriate terms of reference would be drawn up giving the meeting powers to take appropriate decisions.

RESOLVED: That

- (1) the report be noted;
- (2) these proposals to constitute a significant variation to services provided to the residents of Halton be agreed;
- (3) a joint scrutiny of proposals as outlined in paragraphs 3.2 and 3.3 of the report be agreed; and
- (4) Councillors E Cargill, J Lowe and S Baker be nominated as representatives of Halton Borough Council on the joint scrutiny meeting.

Strategic Director
- Communities

Meeting ended at 8.10 p.m.