# Health Policy & Performance Board Priority Based Report

**Reporting Period:** Quarter 3 – Period 1<sup>st</sup> October 2023 – 31<sup>st</sup> December 2023

# 1.0 Introduction

This report provides an overview of issues and progress against key service area objectives and milestones and performance targets, during the third quarter of 2023/24 for service areas within the remit of the Health Policy and Performance Board. These areas include:

- Adult Social Care (including housing operational areas)
- Public Health

# 2.0 Key Developments

2.1 There have been a number of developments within the Directorate during the second quarter which include:

# Adult Social Care

# Local Dementia Strategy

It is proposed that once ratified, the governance of the delivery plan sits with the Aging Well Group, who will monitor progress of the delivery plan through quarterly reporting to that group.

# **Strengths Based Practice**

In relation to the Strengths Based Training from Helen Sanderson; the first Training Cohort took place prior to Christmas and the Second one will be taking place from end of Jan. There are 250 staff in total.

# **Domiciliary Care – Leaflets and Time Bandings**

New public-facing leaflets explaining domiciliary care provision were approved and distributed across teams. The leaflets set out in the details which will be discussed with people before and after they access domiciliary care and provide a written reminder to be left following an assessment. The new leaflets define new time bandings for allocated care calls which Premier Care are working to. These help define conversations about care calls and set expectations.

# **Domiciliary Care Soft Market Test**

A Soft Market Test exercise was undertaken in December to test the level of interest from Domiciliary Care providers in the market. The Soft Market Test exercise was also used as an opportunity to gain information from providers in advance of the re-tender of the Domiciliary Care service during 2024. 19 providers responded to the Soft Market Test, 17 of which responded to the Soft Market Test questionnaire and the findings will inform the re-tender process.

# Healthwatch Halton & Advocacy Hub Performance Framework

Under the new contract for Healthwatch Halton & Halton's Advocacy Hub, a new performance framework was developed. This new performance framework is currently being implemented and Halton Borough Council is seen as leading the way in terms of Q3

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measuring the effectiveness of local Healthwatch. Halton's performance framework is being promoted by Healthwatch England as best practice and is being shared with other Healthwatch's and Commissioners across England.

# Extra Care Housing

The support service within Halton Housing's Extra Care schemes at Naughton Fields, Barkla Fields and Hazlehurst provides on-site support to help promote independence, physical and mental wellbeing and engagement with the community. The service contract was due to end on 31<sup>st</sup> December 2023. A waiver has been sought and the service has been re-contracted for a further nine months in order to give time to look at contract options going forward.

# Local Authority Urgent & Emergency Care Support Grant

The Department of Health and Social Care have provided a grant to Local Authority (LA) areas that are within Integrated Care Board areas that have been classed as Tier 1 because of the challenges faced with hospital capacity and demand over winter 2023/24. Grant proposal should be used to: prevent avoidable hospital admissions or reducing discharge delays; be deliverable over winter 23/24; are in addition to LA expenditure and capacity plans linked to NHS winter surge plans and Better Care Fund demand and capacity plans.

The indicative grant provided to Halton is £299,864. The grant is being used in three areas, as follows:-

- Bring forward a permanent rate increase of 6% for domiciliary care.
- Increase reablement capacity.

Increase capacity within our Hospital Discharge Teams and Halton's Intermediate Care & Frailty Service.

# Public Health

The Public Health team continues to work with partners to improve health outcomes and tackle health inequalities, The Director of Public Health is currently supporting health inequalities as a scrutiny topic and the final report will be going to the February meeting. Work with the ICB about the evidence base and action that can be taken to improve health is ongoing with public health leads and intel lead assigned to each of four One Halton groups to help shape actions planning for strategy delivery.

Digital weight management program Fresh Start was selected to be included in the Food active poster exhibition, which took place at Liverpool Museum. The exhibition celebrated best practise from across the northwest.

Working with local businesses, local police and voluntary in ongoing with regards to suicide awareness and reduction. HBC wellbeing portal which aims to be a single point of information for both staff and managers regarding staff wellbeing is due to launch soon.

An Individual Placement Support programme is in development and likely will commence in April 2024. The program provides focused support to individuals who have drug and or alcohol issues to help them into employment. We are working with a team from OHID and Warrington's drug and alcohol commissioner to discuss plans for the procurement of the joint Halton-Warrington IPS service.

# 3.0 Emerging Issues

3.1 A number of emerging issues have been identified during the third quarter that will impact upon the work of the Directorate including:

# Adult Social Care

Each One Halton Organisation will be required to monitor progress of the Dementia Delivery Plan within their own organisation, against relevant actions, and provide commentary/evidence for the monitoring report. Progress reports will be provided to the One Halton Board.

# **Prevention Strategy**

The Adult Social Care Prevention Strategy is in its final stages of completion and will include plans for the Council's Adult Social Care 'Front Door'. The Prevention Strategy will be completed in January 2024.

## Adult Social Care Commissioning Strategy

The Commissioning Strategy for Care and Support outlines our commissioning intentions over the next three years and is in it's final stages off formal approval. Progress against the actions identified in the Delivery Plan are in the process of being collated and will be monitored via the Adults Senior Management Team on an ongoing basis.

## Floating Support Tender

The Floating Support Service is currently out for re-tender and will close to tender submissions on 17<sup>th</sup> January 2024. The submissions will then be evaluated by dedicated panel of officers before an award is made. The new service will commence on 1<sup>st</sup> July 2024, following a three-month mobilisation period.

# Public Health

The 'cost of living crisis' refers to the fall in 'real' disposable incomes that the country has experienced since late 2021.

The government has responded to the crisis with several packages of support such as the Household Support Grant throughout last year. The latest budget where updates on support were announced was not as generous as in previous years as such it can be expected that families and people living in Halton in greatest need will continue to experience poor health as a result of the harsh economic environment.

Related to the cost-of-living crisis a number of NHS services/ staff have gone on strike including nurses, ambulance staff and junior doctors. This has a direct impact on access to care for people with a health condition. A BBC news report estimates that 250,000 and 350,000 hospital appointments, including operations, could be cancelled in the most recent round. This is likely to exert further pressure on services external to the NHS on which people depend such as council and voluntary sector as well as further impact on population health.

# 4.0 Risk Control Measures

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements. As such Directorate Risk Registers were updated in tandem with the development of the suite of 2018/19 Directorate Business Plans.

As a result, monitoring of all relevant 'high' risks will be undertaken and progress reported against the application of the risk treatment measures in Quarters 2 and 4.

# 5.0 Progress against high priority equality actions

There have been no high priority equality actions identified in the quarter.

# 6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key business areas that have been identified by the Directorate. It should be noted that given the significant and unrelenting downward financial pressures faced by the Council there is a requirement for Departments to make continuous in-year adjustments to the allocation of resources in order to ensure that the Council maintains a balanced budget. Whilst every effort continues to be made to minimise any negative impact of such arrangements upon service delivery they may inevitably result in a delay in the delivery of some of the objectives and targets contained within this report. The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained at the end of this report.

# Commissioning and Complex Care Services

# Adult Social Care

# Key Objectives / milestones

Ref	Milestones	Q3 Progress
1A	Monitor the Local Dementia Strategy Action Plan, to ensure effective services are in place.	<ul> <li>✓</li> </ul>
1B	The Homelessness strategy be kept under annual review to determine if any changes or updates are required.	<b>√</b>
1C	Monitor the effectiveness of the Better Care Fund pooled budget ensuring that budget comes out on target.	<b>~</b>
1D	Integration of Health and social care in line with one Halton priorities.	✓

		Appendix
1E	Monitor the Care Management Strategy to reflect the provision of integrated frontline services for adults.	<ul> <li>✓</li> </ul>
1F	Continue to establish effective arrangements across the whole of adult social care to deliver personalised quality services through self-directed support and personal budgets.	<ul> <li>✓</li> </ul>

# **Supporting Commentary**

**1A** The One Halton Dementia Delivery Plan has recently been presented to the Aging Well Group and is being presented to the One Halton Board to agree how best to deliver the actions that require a cross Board input.

**1B** The Homelessness Forum are due to meet February 2024 to explore key priority objectives, that will form part of the Homelessness action plan, The homelessness strategy is under review. Initial meeting held with Policy, with a devised timetable to complete the strategy review and sign off by September 2024

**1C** Budget projected to come in on target.

**1D** Integration work continues through the One Halton work streams.

**1E** Integration work continues through the One Halton work streams.

**1F** Work continues to maintain and improve the delivery of self-directed support and personal budgets.

# **Key Performance Indicators**

Older People:						
Ref	Measure	22/23 Actual	23/24 Target	Q3	Current Progress	Direction of travel
ASC 01	Permanent Admissions to residential and nursing care homes per 100,000 population 65+ <b>Better Care Fund</b> <b>performance metric</b>	TBC	600	NA	NA	NA
ASC 02	Total non-elective admissions in to hospital (general & acute), all age, per 100,000 population. <i>Better Care Fund</i> <i>performance metric</i>	Q2 22/23 actual = 4,286	No plan set	5,32 2	NA	1

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100.00		TDO	050/	NIA	N I A	Append
ASC 03	Proportion of Older People (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF 2B) Better Care Fund performance metric	TBC	85%	NA	NA	NA
Adults wi	th Learning and/or Physica	l Disabili	ties:			
ASC 04	Percentage of items of equipment and adaptations delivered within 7 working days (VI/DRC/HMS)	97%	97%	100 %	<ul> <li>Image: A start of the start of</li></ul>	Î
ASC 05	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 1) SDS	74.5%	80%	73.9 %	✓	Ţ
ASC 06	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 2) DP	22.6%	45%	36.1	<ul> <li></li> </ul>	Î
ASC 07	Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF 1G)	93.6%	89%	93%		Î
ASC 08	Proportion of adults with learning disabilities who are in Employment (ASCOF 1E)	5.8%	5.5%	6.2%		Î
Homeles	sness:					
ASC 09	Homeless presentations made to the Local Authority for assistance In accordance with Homelessness Act 2017. Relief Prevention Homeless Advice	NA	2000	851 389 189 81 192	NA	NA

		1				Appendix
ASC 10	LA Accepted a statutory duty to homeless households in accordance with homelessness Act 2002	NA	200	81		1
ASC 11	Number of households living in Temporary Accommodation Hostel Bed & Breakfast	NA	NA	134 22		Î
Safeguard	ling:					
ASC 12	Percentage of individuals involved in Section 42 Safeguarding Enquiries	ТВС	30%	40%	<b>~</b>	Î
ASC 13	Percentage of existing HBC Adult Social Care staff that have received Adult Safeguarding Training, including e- learning, in the last 3- years (Previously PA6 [13/14] change denominator to front line staff only.	62%	85%	74%		Î
ASC 14	The Proportion of People who use services who say that those services have made them feel safe and secure – Adult Social Care Survey (ASCOF 4B)	78.8%	89%	TBC	TBC	TBC
Carers:						
ASC 15	Proportion of Carers in receipt of Self Directed Support.	98%	99%	99%	<b>~</b>	Î
ASC 16	Carer reported Quality of Life (ASCOF 1D, (this figure is based on combined responses of several questions to give an average value. A higher value shows good performance)	7.5% (2021- 22)	NA	NA	NA	NA

						Appendix
ASC 17	Overall satisfaction of carers with social services (ASCOF 3B)	39.3% (2021- 22)	NA	NA	NA	NA
ASC 18	The proportion of carers who report that they have been included or consulted in discussions about the person they care for (ASCOF 3C)	69.5% (2021- 22)	NA	NA	NA	NA
ASC 19	Social Care-related Quality of life (ASCOF 1A). (This figure is based on combined responses of several questions to give an average value. A higher value shows good performance)	18.9%	20%	NA	NA	NA
ASC 20	The Proportion of people who use services who have control over their daily life ( ASCOF 1B)	78.4%	80%	NA	NA	NA
ASC 21	Overall satisfaction of people who use services with their care and support (ASCOF 3A)	70.4%	71%	NA	NA	NA

# Supporting Commentary

# Older People:

- **ASC 01** Still some reporting issues but this data should be available in Q4.
- ASC 02 There is no Q3 data available yet, however, Q2 figures are now available. Q2 actual unplanned admissions = 5322, Q3 data not available until mid Feb 24. The 5322 seen in Q2 is a significant increase (+24%) on the 4286 seen in Q2 22/23. This increase has mostly been seen in 0-day admissions (+36%) however longer overnight admissions have also increased (+16%). These increases are in the adult population 18-64's increased by 33% and 65+ increased by 21%. The number of unplanned admissions by children 0-17 fell by 7%. The number of unplanned re-admissions increased broadly in-line with the overall increase, with 30+ day readmissions increasing by 21% and 90+ day readmissions increasing by 26%.
- **ASC 03** Annual collection only to be reported in Q4.

# Adults with Learning and/or Physical Disabilities:

**ASC 04** Q3 figure is above target.

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- **ASC 05** The Q3 figure is marginally down compared to the same period last year; however we are on track to meet the target. Work continues to supporting service users to have choice and control in their care planning.
- **ASC 06** We continue to promote the use of Direct Payments to support people to choose how to they manage their care package.
- **ASC 07** We are on track to meet this target, the figures are higher than they were in the same quarter 2022/23
- **ASC 08** We have currently exceeded this target and figures are higher than they were in the same quarter 2022/23

#### Homelessness:

- ASC 09 There has been a vast increase in homelessness for this quarter, which is contributed by the high volume of discontinuation notices served by Immigration Office and S21 notices served across the private rented sector. The figures show that the demand for homelessness services is set to increase further, with pressure placed on all housing services across the Borough
- ASC 10 In accordance with HRA, the team are working tirelessly to prevent homelessness. However, there has been a gradual increase in homelessness acceptances, due to the complex and priority need clients presenting as homeless.
- ASC 11 During the past quarter there has been a decrease in families placed in B&B, which is due to the additional units within Columba Hall. The supported hostel accommodation remains at full utilisation, with a delay in the move on process, due to the lack of available secure accommodation. The continuous increase in homelessness is placing additional pressure on both social and private landlord.

#### Safeguarding:

- **ASC 12** Q3 figure is slightly lower than Q2 figure by 2.5%. This is a relatively new indicator and may differ to year end data
- **ASC 13** The current Q3 figures have exceeded the actuals from last year. They are on a trajectory to meet the current target by Q4.
- **ASC 14** Annual collection only to be reported in Q4.
- Carers:
- **ASC 15** We are on track to meet this target, the figures are higher than they were in the same quarter 2022/23
- ASC Survey measures are reported annually for service users and bi-annually
- **16-21** for carers. The results of these are provided in Quarter 4, however are not published until later in the year.

The Annual Adult Social Care Survey 23/24 is now underway; results to be reported in the 2024/25 period.

The Survey of Adult Carers was administered during Q3; results to be reported in the 2024/25 period.

Further details on both surveys can be found here

# Public Health

# Key Objectives / milestones

Ref	Objective 1: Child Health	Q3 Progress
	Milestones	
PH 01	Working with partner organisations to improve the development, health and wellbeing of children in Halton and to tackle the health inequalities affecting that population.	✓
Ref	Objective 2: Adult weight and physical activity	
	Milestone	
PH 02	Reduce levels of adult excess weight (overweight and obese) and adult physical inactivity	<ul> <li>Image: A start of the start of</li></ul>
Ref	Objective 3: NHS Health Checks	
	Milestone	
PH 03	Ensure local delivery of the NHS Health Checks programme in line with the nationally set achievement targets and locally set target population groups.	U
Ref	Objective 4: Smoking	
	Milestone	
PH 04	Reduce smoking prevalence overall and amongst routine/manual and workless groups and reduce the gap between these two groups.	<b>~</b>
Ref	Objective 5: Suicide reduction	
	Milestone	
PH 05	Work towards a reduction in suicide rate.	<b>~</b>
Ref 05	Objective 6: Older People	
	Milestone	
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		Appendix
PH 06	Contribute to the reduction of falls of people aged 65 and over and reduction in levels of social isolation and loneliness.	$\checkmark$
Ref	Objective 7: Poverty	
	Milestone	
PH 07	To increase awareness of fuel poverty and drive change to tackle the issue through better understanding of services available across Halton (staff and clients).	<b>~</b>
Ref	Objective 8: Sexual health	Q3 Progress
	Milestone	
PH 08	To continue to provide an easily accessible and high quality local sexual health service, ensuring adequate access to GUM and contraceptive provision across the Borough, whilst reducing the rate of sexually transmitted infections and unwanted pregnancies.	
Ref	Objective 9: Drugs and alcohol	
	Milestone	
PH 09	Work in partnership to reduce drug and alcohol related hospital admissions.	✓

# PH 01 Supporting commentary

Regular performance contract meetings in place. Currently working with the service; developing SEND action plan incorporating the Complex Needs Pathway.

Several groups, programmes and workshops have been delivered this quarter; including three cohorts of HENRY for parents of under 5s (obesity prevention) delivered in partnership with Bridgewater 0-19 Team.

There has been a lot of activity within the infant feeding workstream this quarter, including the expansion of the Infant Feeding Team, which has enabled additional weekly breastfeeding support groups to be set up at Family Hubs in partnership with Early Help, and more antenatal community engagement work.

# PH 02 Supporting commentary

Halton continues to support weight management objectives.

Objective	Outcome
Started Service (Q3)	272
Completed 12 weeks (Q2)	28%
Completed 6 months (Q1)	14%

Halton continues to support physical activity through the 'exercise on referral' program. This service provides bespoke physical activity support for those with health conditions.

Objective	Outcome
Started Service	77
Completed 6 week review	44%
Completed 12 week review	37%

We have a work request for IT to add 6-month reviews to recordable objectives now too.

**PH 03** Throughout quarter 1 and 2 HIT have been rolling out the new Health Diagnostics IT system. This is not fully embedded yet, which means NHSHC data from GP practice data is not currently available. This should be ready by Q3.

Outcome	Q1	Q2	Q3
Invites	994	6175	6136
Completed by HT	472	652	519
in Practice			
Completed in	13	59	68
Community			
Completed in	133	59	82
Workplace			
Referrals Onward	191	362	332

# PH 04 Supporting commentary

Quitting data from Q1-Q3 2023:

Total Referrals	815
Total Set a Quit Date	621
Engagement Rate	77%
Total Quit	277
Total Still Awaiting 4 Week Quit Outcome	87
Unemployed/Never worked Set a Quit Date	89
Unemployed/Never worked Quit	37
Awaiting 4 Week Quit Outcome	3
Routine/Manual Set a Quit Date	109
Routine/Manual Quit	49
Awaiting 4 Week Quit Outcome	15

# PH 05 Supporting commentary

We continue to work closely with partners and Champs on the Zero Suicide Agenda and consistently drive Halton's action plan to drive reduction in suicides. Work continues to take place at a regional level to reduce Self-Harm in children and young people via the Beyond Transformation programme.

# PH 06 Supporting commentary

The EoR Programme which includes falls has been rolled out in some GP practices to target common health conditions such as hypertension and falls. We have had 23 new starters enrolled on the fall prevention exercise class this quarter.

# PH 07 Supporting commentary

Creation of online platform to centrally communicate up to date support available this Winter regarding cost of living as an information point for front line professionals and the wider public. Multiple sessions explaining the nature of crisis and referral options were attended by 80 front line organisations. Winter plan of targeted outreach on income maximisation options and poverty support taking place on social media and other outlets.

# PH 08 Supporting commentary

Axess hold weekly clinics in both Runcorn & Widnes, including evening, walk in and a dedicated 'Axess4u' young persons clinic. The service has been working to improve its digital front door and accessibility and are now able to offer online booking for some appointments and will be reconfiguring the website over the coming months. The outreach team continue to provide clinics at Daresbury Hotel & CGL as well as links with other programmes and delivering training to the 0-19 nurses. We are working with the service to improve access to contraception and Relationship & Sex Education in schools

# PH 09 Supporting commentary

CGL continues to delivery drug and alcohol services, working closely with other partners across the system – including Cheshire Police and the HBC Early Help Team. The Halton Drugs Strategy for 2023-26 has been finalised, and the Combatting Drugs Partnership (CDP) has produced an annual report which details progress which the CDP has made over the past 12 months. The borough will receive Individual Placement Support (IPS) funding from DHSC starting in April 2024. This new IPS funding will enable people in drug and alcohol treatment who are not currently in work to access employment, helping to break the cycle of addiction.

Audit C screenings are delivered during Health Checks and Stop Smoking consultations to clients across Halton. During Q1-Q3 Health Trainers/Health Check Officers have delivered 643 Audit C screenings in workplaces, GP practises and in the community. During Q1-Q3 the Stop Smoking Service have delivered 393 Audit C screenings with clients wishing to stop smoking

Total combined Audit C screenings delivered = 1,036

Ref	Measure	22/23 Actual	23/24 Target	Q2	Current Progress	Direction of travel
PH 01a	Healthy life expectancy at	58.0	58.0	n/a	U	Î
	birth: females (years)	(2018- 20)	(2019- 21)			

# Key Performance Indicators

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РΗ	Healthy life	61.4	61.4	n/a	U	1
01b	expectancy at birth: males (years)	(2018- 20)	(2019- 21)			
PH 02	A good level of child development (% of eligible children achieving a good level of development at the end of reception)	60.1% (2021/22)	N/A	62%	U	N/A
PH 03	Health Visitor new births visits (% of new births receiving a face to face visit by a Health Visitor within 14 days)	73.4% (2021/22)	90%	80.4% (2022/23)	×	1
PH 04	Prevalence of adult excess weight (% of adults estimated to be overweight or obese)	65% (2020/21)	64.7% (2021/22)	71.2% (2021/22)	×	Ļ
PH 05	Percentage of physically active adults	65.5% (2020/21)	65.5% (2021/22)	63.1% (2021/22)	✓	Î
PH 06	Uptake of NHS Health Check (% of NHS Health Checks offered which were taken up in the quarter)	104.6% (2022/23)	76.5% (2023/24)	34% (Q1-2 2023/24)	U	l
PH 07	Smoking prevalence (% of adults who currently smoke)	13.2% (2021)	13.1% (2022)	13.3% (2022)	×	⇔
PH 08	Deaths from suicide (directly standardised rate per 100,000 population)	10.1 (2019- 21)	10 (2020- 22)	9.7 (2020-22 provisional)	<ul> <li></li> </ul>	Î

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PH 09	Self-harm	282	280.6	263.6	1	Appen
	hospital admissions (Emergency admissions, all ages, directly standardised rate per 100,000 population)	(2021/22)	(2022/23)	(2022/23 provisional)		
PH 10	Emergency admissions due to injuries resulting from falls in the over 65s (Directly Standardised Rate, per 100,000 population; PHOF definition)	2,676 (2021/22)	2,663 (2022/23)	2,279 (2022/23 provisional)		1
PH 11	Social Isolation: percentage of adult social care users who have as much social contact as they would like (age 18+)	37% (2021/22)	40% (2022/23)	n/a	U	Ţ
PH 12	Fuel poverty (low income, low energy efficiency methodology)	13.8% (2020)	12.4% (2021)	n/a	U	Î
PH 13	(low income, low (2020) (2021) energy efficiency methodology)		x	Ţ		
PH 14	Long acting reversible contraception (LARC) prescribed as a proportion of all contraceptives	58% (2022/23)	58% (2023/24)	53% (Q1-2 2023- 24)	U	n/a

						Appendix
PH 15	Admission episodes for alcohol-specific conditions (Directly Standardised Rate per 100,000 population)	908 (2021/22)	900 (2022/23)	872 (2022/23 provisional)		1
PH 16	Successful completion of drug treatment (non opiate)	21.2% (2022/23)	25% (2023/24)	18.8% (Q2 2023/24)	×	ł

# Supporting Commentary

**PH 01a -** Data is published annually by OHID. 2018-20 data showed a slight improvement; however this may not continue due to the excess deaths that occurred during 2021

**PH 01b** - Data is published annually by OHID. 2018-20 data showed a slight improvement; however this may not continue due to the excess deaths that occurred during 2021.

**PH 02** - Department for Education did not publish 2019/20 or 2020/21 data due to COVID priorities. The percentage of children achieving a good level of development has reduced by 6% between 2018/19 and 2021/22 in Halton; this is similar to the decline in England overall.

**PH 03 -** The 2022/23 data saw an increase from 2021/22, but failed to meet the target of 90%. However, it did meet the performance standard of 75%.

**PH 04** - Adult excess weight improved (reduced) in 2020/21 but has increased in 2021/22 and did not meet the target. Data is published annually by OHID.

**PH 05** – Adult physical activity improved in 2020/21 and again slightly in 2021/22. Data is published annually by OHID.

**PH 06** - Please note that there was an issue with the coding of invites during Q1 and Q2 which resulted in an uptake of over 100% for 2022/23. There has been a reduction in uptake during Q2 2023/24 as there were a large number of invites sent out.

**PH 07 –** Smoking levels increased very slightly in 2022 and did not quite meet the target. Data is published annually.

**PH 08 -** The suicide rate decreased in 2018-20 and 2019-21. Provisional 2020-22 data indicates the rate has fallen slightly again over 2020-22.

**PH 09 -** Provisional 2022/23 data indicates the rate of self-harm admissions has reduced slightly since 2021/22, and has met the target.

(Data is provisional; published data will be released later in the year.)

**PH 10** - Provisional 2022/23 indicates the rate of falls injury admissions has reduced and has met the target.

(Data is provisional; published data will be released later in the year).

**PH 11 -** The proportion of adult social care users having as much social contact as they would like, fell in 2021/22; Covid-19 restrictions may have contributed to this. (Data is published annually)

**PH 12 –** Fuel poverty improved in Halton between 2020 and 2021. (Data is published annually. N.B. 2021 data was updated nationally in summer 2023)

**PH 13 –** New STI rates reduced in Halton between 2018 and 2021; but has increased slightly in 2022. However, rates are consistently better than the England. Data is published annually.

**PH 14 –** Data for 2022/23 covers Halton & Warrington, but has been split for Halton from 2023/24. Therefore the 2023/24 data is not directly comparable to 2022/23.

**PH 15 –** Provisional 2022/23 indicates the rate of alcohol-specific admissions has reduced and is on track to meet the target.

(Data is provisional; published data will be released later in the year).

**PH 16** - Data does fluctuate year on year but in 2022/23, the Halton proportion of successful completions was worse than the England average. The figure has continued to reduce in 2023/24.

#### **APPENDIX 1 – Financial Statements**

#### ADULT SOCIAL CARE DEPARTMENT

#### Adult Social Care

#### Revenue Operational Budget as at 31 December 2023

	Annual	Budget to	Actual	Variance	Forecast
	Budget	Date	Spend	(Overspend)	Outturn
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	15,849	11,825	12,030	(205)	(310)
Premises	575	442	451	(9)	(15)
Supplies & Services	898	750	729	21	30
Aids & Adaptations	000	0	0	0	0
Transport	228	170	262	(92)	(120)
Food Provision	201	150	149	1	5
Agency	678	507	511	(4)	(5)
Supported Accommodation and Services	1,357	1,058	1,059	(1)	0
Emergency Duty Team	110	82	83	(1)	(10)
Transfer To Reserves	357	0	0	0	0
Capital Financing	44	0	0	0	0
Contacts & SLAs	577	489	467	22	30
			-		
Housing Solutions Grant Funded Schemes					
Homelessness Prevention	357	0	0	0	0
Rough Sleepers Initiative	121	72	72	0	0
Total Expenditure	21,352	15,545	15,813	(268)	(395)
Income					
Fees & Charges	-804	-603	-568	(35)	(50)
Sales & Rents Income	-453	-368	-380	12	15
Reimbursements & Grant Income	-1,727	-1,201	-1,316	115	140
Capital Salaries	-121	-90	-90	0	0
Housing Schemes Income	-591	-422	-422	0	0
Total Income	-3,696	-2,684	-2,776	92	105
Net Operational Expenditure	17,656	12,861	13,037	(176)	(290)
Recharges					
Premises Support	583	437	437	0	0
Transport Support	575	431	550	(119)	(160)
Central Support	3,667	2,750	2,750	0	0
Asset Rental Support	13	0	0	0	0
Recharge Income	-112	-83	-83	0	0
Net Total Recharges	4,726	3,535	3,654	(119)	(160)
Net Departmental Expenditure	22,382	16,396	16,691	(295)	(450)

#### Comments on the above figures

Net Department Expenditure, excluding the Community Care and Care Homes divisions, is £0.295m above budget at the end of the third quarter of the 2023/24 financial year.

Employee costs are currently £0.205m above budget profile. This reflects the currently unbudgeted additional cost of the 2023/24 pay award (£1,925 plus on-costs per FTE, less the

budgeted 4% overall. Total unbudgeted pay award costs are £0.451m for the year, and the staff turnover saving target above target is estimated at £0.141m for the year.

The overspends on transport and transport recharges are currently under review, although fullyear projections are currently based on a continuation of current spend patterns.

Housing Strategy initiatives included in the report above include the Rough Sleeping Initiative and Homelessness Prevention Scheme. The Homelessness Prevention scheme is an amalgamation of the previous Flexible Homelessness Support and Homelessness Reduction schemes.

At this stage, a net overspend of £0.450m is projected for the full financial year, which relates to the projected costs of the proposed pay above above existing budget provision.

#### Approved 2023/24 Savings

Progress towards achieving budget efficiency savings agreed by Council in February 2023.

# Adult Social Care

# Progress Against Agreed Savings

	Service Area	Net	Description of Saving Proposal	Sa	vings Val	ue	Current	Comments
		Budget £'000		23/24 £'000	24/25 £'000	25/26 £'000	Progress	
ASC1	Housing Solutions	474	Remodel the current service based on good practice evidence from other areas.	0	0	125	✓	Expected to be achieved in 2025/26 budget year
ASC2	Telehealthcare	680	Explore alternative funding streams such as Health funding or Disabled Facilities Grants.	0	170	0		Expected to be achieved in 2024/25 budget year
			Increase charges / review income.	0	170	0		
			Cease the key safe installation service.	0	15	0		
ASC11	Dorset Gardens Care Services	471	Cease onsite support and transfer to the domiciliary care contract.	275	0	0	U	To be achieved in current year, but only effective from September 2023 onwards
ASC17/18	Quality Assurance Team	395	Review the activities of the Quality Assurance Team, given there are fewer providers for domiciliary care and the transfer of four care homes into the Council.	35	0	0	<ul> <li>Image: A start of the start of</li></ul>	Current year savings achieved, and 2024/25 savings on target
			Merge the service with the Safeguarding Unit.	0	50	0		

ASC12	Meals on Wheels	33	Increase charges to ensure full cost recovery. A procurement exercise will also be completed for the provision of food.	33	0	0	✓	Charge increase implemented
ASC16	Shared Lives (Adult Placement Service)	115	Engage with an external agency currently operating Shared Lives to take over the running of this service. It is anticipated that this would provide an improved service.	0	58	0		Expected to be achieved in 2024/25 budget year
ASC19	Voluntary Sector Support	N/A	Review the support provided by Adult Social Care and all other Council Departments, to voluntary sector organisations. This would include assisting them to secure alternative funding in order to reduce their dependence upon Council funding. A target saving phased over two years has been estimated.	0	200	100		Expected to be achieved in the relevant budget years
ASC4	Positive Behaviour Support Service	349	Increase income generated in order to ensure full cost recovery, through increased service contract charges to other councils.	0	100	0		Expected to be achieved in 2024/25 budget year

			Review the Integrated Care Board contribution for Adults, to ensure the full recovery of related costs.	0	150	0		
ASC6	Bridge Builders	250	Restructure and incorporate within the Care Management front door service, introducing the services currently offered by Bridge Builders to all new referrals.	120	0	0	U	To be achieved in current year, although full-year savings not realised
ASC5	Mental Health Outreach Team	376	Streamline the service and focus on higher needs requiring joint funding from the Integrated Care Board.	140	0	0	×	Currently under review, it does not seem probable that the savings will be achieved this year
ASC21	Mental Health Team Carers Officer	38	Commission the Carers Centre to complete all Carers assessments or undertake the function through the Initial Assessment Team.	38	0	0	×	Currently under review, it does not seem probable that the savings will be achieved this year
ASC15	Learning Disability Nursing Team	424	Cease provision of this service. The service is a Health related function rather than Adult Social Care, but this is a historical arrangement. The Integrated Care Board would	0	424	0		Expected to be achieved in 2024/25 budget year

			need to consider how they want to provide this function.				
ASC14	Care Management Community Care Budget	18,982	Attract £500k investment from the pooled budget (BCF) from 2024/25. Undertake work in years 1 and 2 to reduce reliance upon contracted services from 2025/26. Services are currently in the process of being redesigned on a "Strengths Based Approach" ie. focused upon prevention.	0	500	1,000	Expected to be achieved in the relevant budget years
Total Adult Social Care Department		641	1,837	1,225			

#### **Care Homes Division**

## Revenue Budget as at 31 December 2023

	Annual	Budget to	Actual	Variance	Forecast
	Budget	Date		(Overspend)	Outturn
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Madeline Mckenna					
Employees	668	468	569	(101)	(116)
Other Premises	122	81	81	Ó	(4)
Supplies & Services	16	7	9	(2)	(6)
Food Provison	43	32	32	Ó	(2)
Total Madeline Mckenna Expenditure	849	588	691	(103)	(128)
Millbrow					
Employees	2,034	1,498	1,641	(143)	(239)
Other Premises	151	104	129	(25)	(34)
Supplies & Services	43	33	38	(5)	(20)
Food Provison	75	56	57	(1)	(5)
Reimbursements & Other Grant Income	-29	-29	-29	0	0
Total Millbrow Expenditure	2,274	1,662	1,836	(174)	(298)
St Luke's					
Employees	2,725	1,966	2,083	(117)	(249)
Other Premises	208	122	127	(5)	(10)
Supplies & Services	46	28	36	(8)	(19)
Food Provison	118	48	64	(16)	(9)
Total St Luke's Expenditure	3,097	2,164	2,310	(146)	(287)
St Patrick's					
Employees	1,759	1,125	1,505	(380)	(547)
Other Premises	191	133	110	23	9
Supplies & Services	43	25	36	(11)	(23)
Food Provison	112	47	64	(17)	(26)
Total St Patrick's Expenditure	2,105	1,330	1,715	(385)	(587)
Care Homes Divison Management					
Employees	285	198	186	12	31
Supplies & Services	0	0	1	(1)	(1)
Care Home Divison Management	285	198	187	11	30
Net Operational Expenditure	8,610	5,942	6,739	(797)	(1,270)
Recharges					
Premises Support	285	143	143	0	0
Transport Support	0	0	0	0	0
Central Support	890	445	445	0	0
Asset Rental Support	0	0	0	0	0
Recharge Income	0	-	0		
Net Total Recharges	1,175	588	588	0	0
Net Departmental Expenditure	9,785	6,530	7,327	(797)	(1,270)

#### Comments on the above figures

#### **Financial Position**

The care home division is made up of the following cost centres, Divisional Management Care Homes, Madeline Mckenna, Millbrow, St Luke's and St Patrick's.

The Q3 spend across the division is over budget profile by £0.797m. The forecast for the end of 2023/24 financial year is an estimated outturn position of £1.270m over budget.

## Comparison to Previous Quarter

The outturn position for Q2 was £1.466m over budget. Based on the estimated outturn position for Q3, there is an expectation that the estimated outturn overspend will be £0.196m lower than the previous quarter.

The reduction of £0.196m largely relates to a reduction in Agency spend. Employee expenditure specifically agency spend continues to be a pressure across the care homes, Agency spend will continue to be monitored to ensure the forecast remains in line with spend.

#### Supporting Information

## Employee Related expenditure

Employee related expenditure is over budget profile at the end of Q3 by £0.729m with the expected outturn position of employee related expenditure at the end of financial year 2023/24 as £1.120m over budget.

Recruitment and retainment of staff is a continued pressure across the care homes and is therefore reliant on the use of overtime and agency staff to cover vacancies. At the end of Q3 total agency spend across the care homes reached £2.2m, the cost of this has partially been offset by staff vacancies. Progress has been made during Q3 with both St Lukes and St Patricks now using Matrix to source agency staff helping to reduce the overall cost.

A proactive rolling recruitment exercise is ongoing within the care homes and is supported by HR and the Transformation team.

## Premises Related Expenditure

Premises related expenditure is over budget profile at the end of Q3 by £0.007m and is forecast as an estimated overspend at the end of the financial year 2023/24 by £0.039m.

Premises related expenditure covers both repairs, maintenance and utilities. The budget was increased significantly for utilities in 2023/24 due to increases in costs in previous years. The current forecast under spend for utilities is masking overspend for repairs and maintenance significantly.

Repairs and maintenance continue to be a budget pressure across all the care homes with the forecast overspend for 2023/24 is currently £0.158m. The recruitment of a facilities manager would help to support the reduction in these costs. Budget for a facilities manager has been made available and this position has been advertised.

#### Supplies and Services Expenditure

Supplies and Services expenditure is over budget profile at the end of Q3 by £0.027m with the expected outturn position of related expenditure at the end of financial year 2023/24 as £0.069m over budget.

# Food Provision Expenditure

Food Provision expenditure is over budget profile at the end of Q3 by £0.034m with the expected outturn position of £0.042m over budget by the end of Financial Year 2023/24.

#### Approved 2023/24 Savings

There are no approved savings for the care home division in financial year 2023/24

## **Risks/Opportunities**

Recruitment and retention of care and nursing staff within care homes remains the significant risk to the budget. Work through the transformation programme, HR and the managers and staff have significantly reduced these pressures in year and continues.

## **COMMUNITY CARE**

## Revenue Budget as at 31st December 2023

	Annual	Budget to	Actual	Variance	Forecast
	Budget	Date	Spend	(Overspend)	Outturn
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Residential & Nursing	18,532	12,323	12,731	(408)	(560)
Domicilary Care & Supported living	12,119	8,790	8,420	370	511
Direct Payments	11,610	9,635	10,754	(1,119)	(1,449)
Day Care	375	206	337	(131)	(173)
Total Expenditure	42,636	30,954	32,242	(1,288)	(1,671)
Income					
Residential & Nursing Income	-12,059	-8,048	-8,032	(16)	(20)
Community Care Income	-12,035		-1,412	· · · ·	(20) 219
Direct Payments Income	-957	-569	-586		213
Market Sustainability & Improvement Grant	-1,497	-1,122	-1,122		0
Market Sustainability Workforce Grant	-972	-972	-972		0
Adult Social Care Support Grant	-4,357	-3,268	-3,268		0
War Pension Disregard Grant	-67	0	0		0
LA UEC Grant	-155	-155	-155	0	0
Other Income	-141	-78	-223	145	333
Total Income	-22,346	-15,460	-15,770	310	555
Net Operational Expenditure	20,290	15,494	16,472	(978)	(1,116)
	20,230	13,434	10,472	(370)	(1,110)
Recharges					
Premises Support	0	0	0	0	0
Transport	0	0	0	0	0
Central Support	0	0	0	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	0	0	0	0	0
Net Total Recharges	0	0	0	0	0
Net Departmental Expenditure	20,290	15,494	16,472	(978)	(1,116)

# Comments on the above figures:

At the end of the third quarter of the current financial year, expenditure on Community care services is over budget profile by £0.978m and is anticipated to be overspent by £1.116m at the end of the financial year. The recovery plan group meet on a regular basis and to date have achieved savings of approximately £2.3m. However, some of those savings have been offset by an increase in demand for service and also increases in complex care packages, an example being the use of 1 to 1 care. Further reductions are required to bring the budget back in line and the group will continue to actively look for those savings where appropriate.

Historically this budget has always been under pressure due to its volitivity; it is a demand driven budget and is intrinsically linked to the health care sector which also impacts on its performance.

Individual Services budgets are analysed in more detail below however it must be noted that expenditure can fluctuate greatly from one quarter to the next particularly throughout the latter half of the year as demand grows due to winter pressures

#### **Residential & Nursing Care**

Numbers of residential & nursing placement continued to rise during October but started to reduce in November and December. There are currently 506 placements compared to the average for the year of 497.

The average cost of a package of care has increased 10% from £864 in April to £954 in December suggesting an increase in the complexity of care packages.

# **Domiciliary Care & Supported Living**

There are currently 698 service users receiving a package of care at home compared to 705 in April, a small reduction of 0.9%.

The average cost of a package of care has increased from £417 in April to £472 in December, an increase of 12.9%.

There are currently 147 service users with double handling. This equates to approximately £2.5m per annum.

# **Direct Payments**

There has been a slight reduction in the demand for Direct Payments from 610 at September to 607 currently. However, this service continues to be a pressure as it is often used as a default position due to the current domiciliary provider being unable to pick up additional care packages.

The Community Care budget is very unpredictable by nature as it is demand driven, with many influential factors such as the ageing population, deprivation within the borough and its links to the health care sector. It will continue to be closely monitored and scrutinised to quantify pressures and, in conjunction with the budget recovery group, we will continue to identify savings in order to achieve a balanced budget at the end of the financial year.

## COMPLEX CARE POOL BUDGET

#### Revenue Budget as at 31st December 2023

	Annual	Budget to	Actual	Variance	Forecast
	Budget	Date	Spend	(Overspend)	Outturn
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Intermediate Care Services	5,096	3,700	3,582	118	170
Oakmeadow	1,715	1,253	1,294	(41)	(50)
Community Home Care First	1,530	426	822	(396)	(569)
Joint Equipment Store	829	622	622	0	0
Development Fund	622	0	0	0	622
HICafs	3,258	2,274	2,155	119	141
Contracts & SLA's	3,320	746	693	53	92
Carers Breaks	450	314	245	69	91
Carers Centre	354	177	177	0	0
LilyCross	193	144	9	135	184
Residential Care	1,874	1,369	1,369	0	0
Domiciliary Care & Supported Living	3,335	2,460	2,460	0	0
Total Expenditure	22,576	13,485	13,428	57	681
Income					
BCF	-12,762	-9,572	-9,572	0	0
CCG Contribution to Pool	-2,864	-2,149	-2,149	0	0
ASC Discharge Grant	-1,921	-1,676	-1,676	0	0
Transfer from reserve	-193	-193	-193	0	0
LA UEC Grant	-144	-144	-144	0	0
Oakmeadow Income	-6	-4	-1	(3)	(4)
Other Income	-25	-25	-27	2	2
Cfwd from 2022/23	0	-148	-148	0	0
Total Income	-17,915	-13,911	-13,910	(1)	(2)
Net Operational Expenditure	4,661	-426	-482	56	679
•					
Recharges					
Premises Support	0	0	0	0	0
Transport	0	0	0	0	0
Central Support	0	0	0	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	0		0	0	C
Net Total Recharges	0	0	0	0	0
ICB Contribution Share of Surplus			28	(28)	(340)
	4 004	400	45.4		
Net Departmental Expenditure	4,661	-426	-454	28	339

# Comments on the above figures:

The financial performance as at 31st December 2023 shows the Complex Care Pool Budget is  $\pounds 0.056$ m under budget profile as this point of the financial year. The forecast outturn for the year end is  $\pounds 0.679$ m under approved budget (including  $\pounds 0.62$ m development fund) which is split evenly with Health in accordance with the terms of the pool budget. Therefore, the year-end position for the Council is anticipated to be approximately  $\pounds 0.339$ m. However, as is usually the case, this position may change over the coming months, particularly regarding Winter pressures.

The underspend on Intermediate Care Services and HICafs is due to staff vacancies.

Contracts & SLA's include Inglenook which currently has a void, hence the underspend against budget of £0.053m.

Expenditure on Carer's Breaks is £0.069m less than anticipated for the year to date, as demand for services is still lower than pre-pandemic levels.

Although Community Homefirst is showing a large overspend, the Operational Director for Adult Social Care is to take a paper to ICB explaining the overspend position and seeking to cover this with other underspend budgets within the Pool.

Although the pool budget does experience a favourable financial performance at this time of year, funding is usually redirected to those services under extreme pressure such as the Health & Community Care budget. This is a volatile budget as demand

fluctuates particularly during winter months. The Health & Community Care budget historically has always overspent due to limited resources and reliance on the pool budget underspend to offset pressures has become the norm since the pandemic. Although budgets have managed to be balanced over recent years this strategy is unsustainable long term.

	2023-24	Allocation	Actual	Total
	Capital	To Date	Spend	Allocation
	Allocation			Remaining
	£'000	£'000	£'000	£'000
Disabled Facilities Grant	650	500	493	157
Stair lifts (Adaptations Initiative)	300	200	190	110
RSL Adaptations (Joint Funding)	200	120	101	99
Telehealthcare Digital Switchover	300	80	80	220
Millbrow Refurbishment	200	40	40	160
Madeline Mckenna Refurb.	1,000	20	17	983
St Luke's Care Home	100	25	45	55
St Patrick's Care Home	100	50	47	53
Total	2,850	1,035	1,013	1,837

#### Pooled Budget Capital Projects as at 31 December 2023

#### Comments on the above figures:

Allocations for Disabled Facilities Grants/Stair Lifts and RSL adaptations are consistent with 2022/23 spend and budget, and expenditure across the 3 headings is projected to be within budget overall for the financial year.

The £0.400m Telehealthcare Digital Switchover scheme was approved by Executive Board on 15 July 2021. Significant capital investment is required to ensure a functional Telehealthcare IT system is in place prior to the switch off of existing copper cable based systems in 2025. Procurement commenced in 2022/23 with an initial purchase to the value of £0.100m. It is anticipated that the scheme will be completed early in the 2024/25 financial year, fully funded from the residual capital allocation of £300,000.

On 16<sup>th</sup> June 2022 Executive Board approved a £4.2M refurbishment programme in respect of the four Council owned care homes, to be completed withing a three year timescale. Halton purchased the homes, with the exception of Madeline McKenna, when it was evident that the buildings had been neglected. £0.419m was spent on refurbishment across the 4 homes in the previous financial year, and £1.4M has been allocated for current year refurbishment costs. Unspent funding at year-end will be carried forward to the 2024/25 financial year to enable the scheme's completion.

# **PUBLIC HEALTH & PUBLIC PROTECTION DEPARTMENT**

# Revenue Budget as at 31 December 2023

	Annual	Budget to Actual		Variance	Forecast
	Budget	Date	Spend	(Overspend)	Outturn
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	4,629	3,287	3,251	36	48
Premises	6	0	0	0	0
Supplies & Services	255	192	189	3	5
Contracts & SLA's	7,006	5,064	5,048	16	10
Transport	4	3	1	2	2
Other Agency	23	23	23	0	0
Total Expenditure	11,923	8,569	8,512	57	65
Income					
Fees & Charges	-71	-155	-147	(8)	0
Reimbursements & Grant Income	-44	-219	-220	1	1
Transfer from Reserves	-1,242	0	0	0	0
Government Grant Income	-11,117	-8,581	-8,581	0	0
Total Income	-12,474	-8,955	-8,948	(7)	1
			(0.0		
Net Operational Expenditure	-551	-386	-436	50	66
Recharges					
Premises Support	156	117	117	0	0
Transport	20		1,747	0	0
Central Support	2,330		<sup>′</sup> 15	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	-482	-376	-376	0	0
Net Total Recharges	2,024	1,503	1,503	0	0
Net Departmental Expenditure	1,473	1,117	1,067	50	66

# Comments on the above figures

# **Financial Position**

At the end of Quarter 3 net spend for the department is £0.050m under budget profile. The estimated outturn position for 23/24 is £0.066m net spend under available budget.

Employee costs for the year are expected to be marginally under the approved budget due to vacancies the department is holding. Although this is now forecast to be less than in Quarter 2 due to there being less vacancies within the department.

Expenditure on supplies and services will be kept to essential items only throughout the year and is currently running in line with the budget profile.

Savings targets for 23/24 are expected to be achieved.

# **APPENDIX 2 – Explanation of Symbols**

