### HEALTHY HALTON POLICY AND PERFORMANCE BOARD

At a meeting of the Healthy Halton Policy and Performance Board on Tuesday, 7 November 2006 at the Civic Suite, Town Hall, Runcorn

Present: Councillors E. Cargill (Chairman), Loftus (Vice-Chairman), Blackmore, Hodgkinson, Horabin, D Inch, Howard, Jones, Lloyd-Jones, Swift, Wallace and Mr B. Bryant

Apologies for Absence: (none)

Absence declared on Council business: (none)

Officers present: A. Villiers, A. Williamson, C. Halpin, P. St. Aubyn, J. Gibbon, M Mahmood and C. Taylor

Also in attendance: Councillor Gerrard (in accordance with Standing Order 33), M. Ogden-Meade and K. Holburn

# ITEM DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

### HEA23 MINUTES

The Minutes of the meeting held on 12 September 2006, having been printed and circulated were signed as a correct record.

### HEA24 PUBLIC QUESTION TIME

It was confirmed that one public question had been received from Halton Disability Alliance. It was agreed that the question would be dealt with under Minute Number HEA26.

### HEA25 EXECUTIVE BOARD MINUTES

The Board considered the Minutes of the meetings of the Executive Board and Executive Board Sub Committee relevant to the Healthy Halton Policy & Performance Board.

RESOLVED: That the minutes be received.

### HEA26 UPDATE ON THE RECONFIGURATION OF NORTH CHESHIRE HOSPITAL NHS TRUST

The Board received an update from Mr. M. Ogden-Meade and Ms K. Holburn on the reconfiguration of the North Cheshire Hospitals NHS Trust which outlined the phased changes, the progress made, staffing issues and how staff and the public were being kept informed.

A number of questions and concerns in relation to the transport being provided between Halton and Warrington hospitals were raised, including:

- 1) the number of seats being provided;
- 2) the provision for disabled passengers;
- 3) the cost of this service and what alternatives had been considered:
- 4) how long it would be funded for;
- 5) whether usage would be monitored and reviewed;
- 6) whether it was felt that all agencies had been involved and would the Trust would be prepared to set up a meeting with officers from the Halton's Transportation Section, Arriva North West and Halton Transport;
- 7) whether the service would predominantly be for staff; and
- 8) what the timetable would be.

In response the following answers were given:

- 1) the shuttle bus would have 17 seats;
- a specialised service would be available to disabled passengers and a ring and book system would be in operation to ensure there was adequate provision for disabled passengers;
- 3) the cost of the service was market sensitive but was less than the reported £60, 000. Alternative services had been explored but this was felt to be the most cost effective, however, it would be reviewed in six months time;
- 4) the funding was from a general fund as there was no specific funding for such a service and the present arrangements were for a six month period. After this period the service would be reviewed;
- 5) the usage would be monitored and broken down into staff, patients and visitors. This would then be used when the service was reviewed.
- 6) the Trust felt that it had tried to involve all relevant agencies and would be prepared to organise a

meeting;

- 7) although staff would be using the service, this would be at different times to the visitors, as there were set visiting hours which were different to shift start times. As with any public transport if there were more people waiting than seats available some people would have to wait for the next available shuttle; and
- 8) the first journey would leave at 6.40am and last at 8.15pm with 11 journeys, which was approximately hourly.

In addition a number of other questions and concerns were raised in relation to the reconfiguration and in relation to articles in the local newspaper, including:

- 1) how many staff had been relocated between the two sites:
- 2) whether the pathology service at Halton was closing;
- 3) whether the minor injuries unit was closing or the hours being reduced and whether any consultation of the public would take place if this was agreed;
- 4) how the deficit would be recouped and if the financial recovery plan had been agreed;
- 5) how many staff had appealed against their new placement and how many that were declined would lose their job; and

In response the following answers were given:

- 1) 120 staff had moved from Halton to Warrington and 7 staff had moved from Warrington to Halton. The low number moving to Halton was due to Halton vacancies being given preference to Halton staff;
- 2) the pathology service was not closing, however, the on call service would be operated from the Warrington site;
- 3) the possibility of reducing the hours of the minor injuries unit was being considered at present, however, no decision had been taken by the Trust's Executive Board. If a change in hours was agreed and if it was a substantial change in the provision of the service, using the Department of Health definition, public consultation would take place:
- 4) in order to recoup the deficit a whole range of options were being considered, the minor injuries hours being one example. Work was ongoing to determine the feasibility of these options. The organisation had to show a robust plan to enable it

- to be in financial balance in time for the Government's deadline. The financial recovery plan would be approved by NHS North West; and
- 5) 33 of the 850 staff had appealed, 8 of these had been displaced due to the loss of 69 jobs in the reconfiguration. All members of staff who's job no longer existed and who it had not been possible to place had been retained and would be offered other vacancies when they became available.

A public question had been received from Halton Disability Alliance (minute HEA24 refers), which was read out by the Chairman, as follows:

'What assurances can be given to Halton residents with disabilities that they will be provided with transport to and back from Warrington hospital and if the transport available is not fully accessible, what provision will be made available, all free of charge.'

It was felt that this question had been answered as part of the discussions detailed above that the transport service would be accessible, free and have provision for disabled passengers.

The Board requested regular updates on the Financial Recovery Plan and on any future decisions that affect Halton services.

**RESOLVED: That** 

- (1) the update be received;
- (2) the comments and concerns raised be noted; and
- (3) regular updates on the Financial Recovery Plan and on any future decisions that affect Halton services be submitted to the Board.

Strategic Director, Health and Community

(NB: Councillors Horabin and Loftus both declared a personal interest in the following item due to working at the Independent Learning Centre and due to working at Riverside College who hold classes at the Independent Learning Centre respectively).

## HEA27 PROVISION OF SHORT-TERM RESIDENTIAL RESPITE CARE FOR ADULTS WITH LEARNING DISABILITIES

The Board received a presentation by the Divisional Manager - Integrated Care, on the proposal to transfer the delivery of care and support in Bredon short-term residential unit through an open tender process, to secure the best

value for money for the delivery of respite services for Adults with Learning Disabilities (ALD). The presentation outlined:

- the current provision;
- why the Council needed to modernise respite care;
- examples of benchmarking and good practice;
- research undertaken on 'innovative' respite services;
- the views of self advocates;
- vision for the new model;
- menu of short break options: the mix and match approach; and
- the way forward.

It was noted that a balance would need to be sought for the different age ranges who use the service, that a visit to Bredon would be arranged for December and the possibility of expanding Older Peoples services at the Moorfield site.

The Board discussed what could make up a typical years' worth of respite resources and how these could be used, when Moorfield would close, life skills training and what was taken into account when making assessments.

RESOLVED: That the report and proposals be noted.

### HEA28 HEALTH OF LOOKED AFTER CHILDREN SCRUTINY TOPIC

The Board received an update on the progress of the Health of Looked After Children (LAC) Action Plan.

In March 2006 the Health PPB received the findings of the Health of LAC Scrutiny Group, which had comprised of an indepth audit of 90 LAC case files resulting in the action plan. At this time the Board agreed that the action plan be adopted and its implementation be monitored.

It was noted that Halton's performance continued to be excellent in relation to the completion of health assessments of LAC; 91.2% compared to the national average of 77.3%.

The action plan was appended to the report and gave a breakdown of each recommendation, the action needed, the lead responsibility, timescale and the progress made to date.

The Board raised concerns that if the recommendation in the report was agreed it would mean that the progress of this action plan would be accountable to

the Looked After Children's Mini Trust, as this did not involve Elected Members. Therefore it was decided that monitoring should continue to be reported to the Board.

A request was made for further information in relation to health issues such as immunisations, to be included in future progress reports.

**RESOLVED: That** 

- (1) the progress of the action plan be noted;
- (2) continued progress of this action plan be monitored by the Healthy Halton PPB;
- (3) information on health issues be included in future progress reports; and
- (4) the action plan be presented to the Children and Young People Policy and Performance Board

Strategic Director, Children and Young People

### HEA29 STANDING ORDER 51

The Board was reminded that Standing Order 51 of the Council's Constitution stated that meetings should not continue beyond 9.00 pm.

RESOLVED: That Standing Order 51 be waived for 15 minutes.

HEA30 COMMENTS, COMPLAINTS AND COMPLIMENTS RELATING TO SOCIAL CARE (SERVICES FOR ADULTS OF WORKING AGE AND OLDER PEOPLE/PHYSICAL SENSORY DISABILITIES)

The Board received an update on the Health and Community Directorate's process for managing comments, complaints and compliments during 2004/05 and 2005/06.

The report detailed the number of complaints within each service area, how long it took to deal with them for 2004/05 and 2005/06 and the reasons for complaints taking longer than 28 days to resolve. In addition how and where improvements had taken place were detailed thoroughly within the report.

RESOLVED: That

- (1) the joint report for 2004 2006 be accepted, and it be noted that reports for future years would be delivered within six months of year end;
- (2) the proposals (subject to the availability of resources) for directorate/corporate action to

- promote and improve borough-wide the receipt of all complaints/compliments, their recording and analysis be noted; and
- (3) the national changes in complaints procedure, with effect from September 2006 be noted.

# HEA31 PERFORMANCE MONITORING REPORTS FOR THE 2ND QUARTER (2006/07)

The Board received a performance briefing paper which highlighted aspects contained in the full versions of the monitoring reports, which set out what the services had been planning to achieve and demonstrate how they contributed to the Council's strategic priorities.

A number of emerging issues and key developments that would impact upon the service or where any action was required to address performance were detailed within the report, for the following services:

- Older Peoples
- Adults of Working Age
- Health and Partnerships

RESOLVED: That the service performance and progress towards achieving objectives and targets be received.

### HEA32 TRAINING NEEDS AND REQUIREMENTS

This Item was deferred.

Meeting ended at 9.11 p.m.