

HEALTH POLICY AND PERFORMANCE BOARD

At a meeting of the Health Policy and Performance Board held on Tuesday, 14 September 2010 at Council Chamber, Runcorn Town Hall

Present: Councillors E. Cargill (Chairman), J. Lowe (Vice-Chairman), Austin, M. Bradshaw, Dennett, M. Fry, Gilligan, Horabin, M Lloyd Jones, E. Ratcliffe and P. Cooke

Apologies for Absence: None

Absence declared on Council business: None

Officers present: A. Williamson, L. Derbyshire, D Edwards, T. Gibbs, N. Goodwin, J. Hunt, S Kelly, P. McWade, E O'Meara, S. Wallace-Bonner and A. Villiers

Also in attendance: Councillor M Ratcliffe as Scrutiny Co-Ordinator and In accordance with Standing Order 33, Councillor Gerrard – Portfolio Holder – Health and Adults and one member of the public.

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

HEA16 MINUTES

The Minutes of the meeting held on 8 June 2010 having been printed and circulated were signed as a correct record.

HEA17 PUBLIC QUESTION TIME

The Board was advised that no public questions had been received.

HEA18 EXECUTIVE BOARD MINUTES

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

In respect of EXB25 – Safer Handling Policy and Procedures – Councillor E Ratcliffe, requested further information on this item. It was reported that further information would be sent directly to Councillor E Ratcliffe.

RESOLVED: That

- (1) the minutes be noted; and
- (2) further information on the Safer Handling Policy and Procedures be sent to Councillor E Ratcliffe.

Strategic Director
– Adults &
Community

HEA19 SSP MINUTES

The Minutes of the meeting of the Halton Health Partnership Board from 20 May 2010 were submitted for information.

RESOLVED: That the minutes be noted.

(NB: Councillor Lloyd Jones declared a Personal Interest in the following item of business as her husband is a Non Executive Director of Halton and St Helens Primary Care Trust).

HEA20 EQUITY AND EXCELLENCE: LIBERATING THE NHS (WHITE PAPER)

The Board considered a report of the Strategic Director, Adults and Community which provided a policy summary of the recent NHS White Paper published on 12th July 2010 and explored the possible implications for the Local Authority.

The Board was further advised that the Health White Paper, 'Equity and Excellence: Liberating the NHS' represented possibly the most radical restructuring of the NHS since its inception. It would transform how health care was commissioned, with around £80 billion being transferred to new GP consortia.

The key proposals were as follows:-

- extending patient choice over providers and treatment;
- establishing an independent NHS Commissioning Board;
- ensuring all health trusts are foundation trusts by 2013 and giving them greater freedoms;
- the transfer of commissioning to GPs and the

abolition of PCTs and SHAs;

- transferring the public health budget to local authorities; and
- giving councils the responsibility to promote integration and partnership working.

The following points arose from the discussion:-

- the excellent partnership arrangements that Halton had with GP's was noted. It was also noted that there could be an opportunity to further develop the partnership via the GP consortia and that each consortia would be able to decide what commissioning activities they would undertake themselves and what they would buy in;
- concern was raised that the radical changes could have an impact on the quality of care over the next few years;
- the importance of retaining integration and partnership working was noted. It was also noted that standards would need to be maintained and early advice given on resources available to maintain the quality and effectiveness of care during the changes;
- It was noted that the Government were committed to reducing the NHS's management costs by more than 45% over the next four years. It was also noted that this would cause significant disruption and loss of jobs and would incur transitional costs between now and 2013;
- It was noted that more detailed documents would be published shortly and the White Paper was the main overarching document for NHS reform;
- It was noted that comments on the White Paper had to be sent by 5 October 2010 and Members were assured that supplementary papers would be circulated to them with a briefing note for comments, when they became available;
- It was noted that the Health partnership had undertaken some work during the last six months in preparation for the changes; and

- it was noted that an audit on resources was currently being undertaken in the north west which would better inform resources at a national level in preparation for the changes proposed in the White Paper.

RESOLVED: That

- (1) the contents of the report and comments made be noted; and
- (2) information on the supplementary proposals be circulated to Members with a briefing note for comments as soon as they are available.

Strategic Director
– Adults &
Community

HEA21 TELECARE

The Board received a presentation from Steven Kelly, Adults and Community which:-

- Outlined the background of Telecare and the differences between the two generations of the service;
- Set out the benefits of using the Telecare Service and the equipment available;
- Explained which service would be provided and when;
- Gave details of the response and why the response was important to the service user;
- Gave details of customer feedback on the current service and the positive impact it was having in the community;
- Detailed the Accreditation and why communication was important; and
- Highlighted case studies and the plans for the future.

The Board was advised that the investment in Telecare to support vulnerable adults had impacted positively on their health and well being, i.e the use of a falls monitor could reduce the impact of the fall on the person. A range of Telecare equipment was also available at the meeting.

It was noted that Telecare provided a valuable service in the community. However, concern was raised that it should not be used to replace traditional services and it was important to signpost people to activities in order to reduce social isolation. In response, it was reported that Telecare was not there to replace human contact and a clear strategy was in place to ensure it was linked to community services.

RESOLVED: That

- (1) the presentation be received and comments noted; and
- (2) Steven Kelly be thanked for his informative presentation.

HEA22 HALTON'S SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2009-10

The Board considered a report of the Strategic Director, Adult and Community which presented the Annual Report of Halton's Safeguarding Adults Board, for the year 2009/10, and briefed the members on the key issues and progression of the agenda for Safeguarding Vulnerable Adults.

The Board also received a presentation from Julie Hunt, Adults and Community which:-

- Set out the responsibilities of the Safeguarding Adult Board and Halton Borough Council;
- Highlighted the Board's Vision;
- Detailed the national context of the report e.g the 'No Secrets' review, the structure and reporting, the outcomes for Service Users and Carers; the key developments and local activity 2009-10 and the priorities and work plan 2010-11;
- Set out how positive outcomes were assured for service users and carers;
- Outlined what was being done to make it happen, i.e. Working together, the procedural framework, safer recruitment, training and development and publicity;
- Detailed how the quality and performance of the service was measured;

- Outlined and explained the partner agency representation on the Board; and
- Gave the website for further information www.halton.gov.uk/safeguardingadults.

RESOLVED: That

- (1) The content of the Annual Report of the Safeguarding Adults Board 2009/10 and the current key issues be supported;
- (2) the presentation be received; and
- (3) Julie Hunt be thanked for her informative presentation.

HEA23 INTERGENERATIONAL ACTIVITY

The Board considered a report of the Strategic Director, Adults and Community on the intergenerational activity during the period of 1 April 2009 and 31 March 2010. The report also presented a proposal for completion of the intergenerational strategy set out in Appendix 1 to the report.

The Board was advised that during 2008/09 thirty-two community led intergenerational events/activities had been delivered. On the 25 April 2009 Halton's first intergenerational conference had taken place coinciding with the European day of solidarity between the generations. Over 200 people, young and old, attended the event which focussed on positive activities i.e. games through the decades. Young people held workshops on e-communication demonstrating mobile phone and internet usage. Consultation for future intergenerational activity was collected and many attendees contributed to a video diary of their experiences and desires for relationships between the generations in our communities.

A DVD of the Halloween events of intergenerational activities that had taken place in the community centres throughout the Borough was shown at the meeting. It was reported that these events had been so successful that they would take place again this year in community centres throughout the Borough and areas that did not have a community centre could also be supported.

The Board congratulated the team on the success of the event and noted that it had contributed to the reduction

of anti social behaviour and the fear of crime in the community on Halloween night.

RESOLVED: That

- (1) the delivery of the intergenerational activity be noted; and
- (2) the team be congratulated on the success of the intergenerational activities throughout the Borough.

HEA24 SUSTAINABLE COMMUNITY STRATEGY 2011 – 2026

The Board considered a report of the Strategic Director, Resources which gave members an update on the progress of the new Sustainable Community Strategy (SCS) 2011-2026 and presented the emerging vision, key objectives and long term priorities that the plan sought to deliver upon.

The Board was advised that the SCS would not be delivered in isolation but was part of the wide framework of statutory plans the Council and partners produced to steer corporate direction and inform the community i.e. The Children and Young People's Plan, the Local Development Framework and the Local Transport Plan. The new SCS would cover the period from 2011 to 2026.

The Board was further advised that the five year delivery plan would contain the detail of the planned intervention and prevention activities that would be undertaken to bring about positive change upon Halton's priority areas. The inclusion of a five year delivery plan would allow for a regular review of the selected intervention and prevention measures on a shorter timescale to enable changing circumstances throughout the lifetime of the full SCS to be reflected.

The Board raised concern that the White Paper considered earlier on the agenda which proposed the formation of a GP Consortia would have an impact on the delivery plan. It was also noted that improving health in the Borough was an important priority for the Council.

RESOLVED: That the five overarching priorities for the emerging Sustainable Community Strategy 2011-2026 and comments made be noted.

HEA25 1ST QUARTER MONITORING REPORT

The Board considered a report of the Strategic Director, Corporate and Policy regarding the First Quarter Monitoring Report for:

- Prevention and Commissioning Services;
- Complex Needs; and
- Enablement Services.

Prevention and Commissioning Services

Page 109 – An update on the implementation of the Single Assessment Programme (SAP) within Halton as a result of the meetings in July was requested.

In response it was reported that the implementation of SAP had been audited and an initial report would be presented to Management Team. The outcome of the audit would be presented to key partners and a final report would be available next month.

Page 110 – NI 136 – clarity was sought on whether an indicator had been set for this target.

In response it was reported that there had been a typing error and the target was set out in column two – 3350 and that this was an achievable target.

Page 111 – PCS 4 – clarity was sought on whether the problem was because of a training need.

In response it was reported that it was due to a slight delay in the inputting of the data and this would be rectified in the near future.

Page 114 – Clarity was sought on why the expenditure relating to community care had been less than expected.

In response, it was reported that it was not expected that the under spend would continue and it was as a result of some invoices that were for block contracts being late and had subsequently not been included. It had also been as a result of continuing health care.

Page 114 – clarity was sought on why on the capital projects there was an unallocated carry forward of £1,366.

In response it was reported that this related to the programme of extra care housing. The Executive Board had agreed the carry forward and two sites were currently being explored to establish 30/40 units for extra care housing. It was suggested that this information be incorporated in future reports.

The Board congratulated the Housing Solutions team on their work in respect of preventing homelessness in the Borough.

Complex Services

Page 124 – CSS7 – Clarity was sought on why performance was lower in terms of the number helped to live at home?

In response, it was reported that this was a result of continuing after care and the number of deaths over recent months.

Page 124 – Fair Access - CSS2 – Clarity was sought on why there had been a downtrend on this target.

In response it was reported that the Authority were confident that this target would be achieved and the downtrend had been as a result of an additional member of staff being employed via a grant in 2009/10 for the Bridge Build project which had led to a significant increase in performance.

Page 124 – Service Delivery – CSS6 & CSS7 - Clarity was sought on why there had been a downtrend on this target.

In response it was reported that this target was still in the top quartile. The decrease in numbers was due to a number of deaths of people with physical and sensory disabilities over recent months. In addition service users who were funded by the Primary Care Trust under Continuing Health Care were not included in the Council's figures. A number of people with learning disabilities and or physical and sensory disabilities fell into this category accounting for the decline in figures.

RESOLVED: That the quarterly monitoring reports and comments made be noted.

Meeting ended at 8.20 p.m.