SAFER POLICY AND PERFORMANCE BOARD

At a meeting of the Safer Policy and Performance Board on Tuesday, 16 January 2011 at the Council Chamber, Runcorn Town Hall

Present: Councillors Osborne (Chairman), Wallace (Vice-Chairman), M. Bradshaw, Edge, J. Gerrard, M Lloyd Jones, M. Ratcliffe, Shepherd, Thompson and Mr Hodson

Apologies for Absence: None

Absence declared on Council business: None

Officers present: M. Andrews, H. Cockcroft, H. Coen, D. Cunliffe, L. Derbyshire, L. Gifford, D. Houghton and A. Villiers.

Also in attendance: In accordance with SO33 Councillor D. Cargill, the following Members of the Health Policy and Performance Board – Councillors: Austin, E Cargill, Horabin, A Lowe, J Lowe and C Walsh (Primary Care Trust) and one Member of the Public.

ITEM DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

SAF29 MINUTES

The Minutes of the meeting held on 16 November 2010 were taken as read and signed as a correct record.

SAF30 CHAIRMAN'S ANNOUNCEMENT

The Chairman of the Board welcomed the Members of the Health Policy and Performance Board who were attending the meeting for consideration of item 5A – Presentation: North West Ambulance Service as it was within the remit of both Boards.

SAF31 PUBLIC QUESTION TIME

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

SAF32 SSP MINUTES

The draft minutes from the last Safer Halton Partnership

(SHP) Meeting held on the 7 September 20101 were presented to the Board for information.

RESOLVED: That the minutes be noted.

SAF33 PRESENTATION: NORTH WEST AMBULANCE SERVICE

The Board received a presentation from Sarah Byrom, North West Ambulance Service NHS Trust which gave an overview of the North West Ambulance Service and outlined the future plans in respect of:-

- the Strategic Vision and Values;
- the Foundation Trust Application; and
- Patient Transport Services.

The following comments arose from the discussion:-

Clarity was sought on the Foundation Trust status;

In response, it was reported that the Foundation Trust (FT) was an NHS organisation, first established in April 2004. The FT operated according to NHS principles – free care, based on need and not on the ability to pay. The difference with a FT was that it was run locally, with staff and local people as members, having a say in how they wished their services to be developed and it was regulated and monitored;

- It was noted that Members should have received electronic versions of the consultation document. However, feedback on the consultation could be given via the website;
- It was noted that the annual budget was £250m and in the current climate of budgetary cuts clarity was sought on what the future funding for the service was likely to be.

In response, it was reported that it was unclear presently how emergency services would be commissioned. However, there was a year and a half remaining of the current arrangements and wherever necessary, appropriate action would be taken:

Clarity was sought on how many volunteers there were in Halton.

In response, it was reported that this information would be circulated to Members of the Board.

- In light of the budgetary cuts, it was suggested that the demand for emergency services would increase due to the impact the cuts would have on road safety and highways. It was reported that the service had excellent information systems that looked at activities i.e. between November – January – there had been a high level of activity due to the severe weather conditions which would help to plan for increases in the service;
- Clarity was sought on the FT having financial freedoms;

In response, it was reported that financial freedoms equated to freedoms to long term planning and the ability to reinvest to support service development which was supported by legally binding contracts;

• Clarity was sought on where the ambulances were based in relation to Halton.

In response, it was reported that there were 140 stations servicing the area and a number of other small stations. However, it was highlighted that ambulance crews went with their vehicle and wait in the best place to get to their destination quicker, therefore the location of the stations were not critical.

- The proposed changes to the criteria for transport was noted;
- Clarity was sought on how many ambulances serviced Widnes and Runcorn and whether the 8 minute response was applicable to these areas;

In response, it was reported that the number of ambulances servicing Widnes and Runcorn would be emailed to Members of the Board. The 8 minute response was for a Category A patient and this target was met 98% of the time, and would remain until the end of March. On 1 April 2011 the categories would change and some Category A patients would become Category B and so on which would result in greater challenges. However, it was highlighted that the service aimed to attend most people in the shortest period of time.

 The Government proposals for the GP's commissioning consortia was noted and clarity was sought on whether the ambulance service were working closely with GP's for services in the future.

In response, it was reported that there had been no discussions with GP's currently. However, discussions were taking place in the U Care Network which was populated with GP's and the Pathfinder Consortium in order to provided the best service for patients now and in the future.

 Clarity was sought on whether the number of ambulance stations would be reduced;

In response, it was reported that discussions had taken place and it was likely that there would be a reduction. However, a review was being undertaken to look at such things as the number, the size and location of the stations and where most emergency calls came from to ensure that they were fit for purpose in the future.

 It was reported that the information collected by the service would be useful to the Safer Halton Partnership and it was suggested that it would be beneficial if such information was shared across the partnership, particularly in relation to alcohol and drugs.

In response, it was reported that this information could be shared with the Partnership. However, it was suggested that in order to get a complete picture in relation to alcohol and drugs it would be beneficial to obtain information from Accident and Emergency Departments.

• The significant increase in the demand for the service during the severe weather in December 2010 and the actions that had been taken to address the demand was noted. It was also noted that the service had purchased a number of 4 x 4 vehicles as a result of the severe weather in Manchester in 2009, which had been used for various activities i.e. to transport staff to Alder Hey Hospital during the severe weather this year;

In conclusion, the Board was advised that information would be shared with Members at the end of the review and

any decisions made would be openly consulted upon.

RESOLVED: That

- (1) the presentation be received;
- (2) the comments made be noted; and
- (3) Sarah Byrom be thanked for her informative presentation.

SAF34 DRUG AND ALCOHOL SERVICES

The Board was advised that the presentation related to Item 7B on the agenda – Recovery Orientated, Integrated System for Substance Misuse (Drugs and Alcohol) in Halton and would be considered as part of that item.

RESOLVED: That this item be deferred to be considered as part of Item 7B on the agenda.

SAF35 SUSTAINABLE COMMUNITY STRATEGY MID YEAR PROGRESS REPORT 2010-11

The Board considered a report of the Strategic Director, Resources which provided information in achieving targets contained within the Sustainable Community Strategy (SCS) for Halton.

The report advised that attached at Appendix 1 to the report, information had been provided on progress in achieving those specific indicators and targets that fell within the remit of the Board at the 2010/11 mid year position.

The Board was advised that in considering the reports Members should be aware of the following:-

- All of the measures within the National Indicator Set (NIS) were monitored through Quarterly Departmental Service Plan monitoring reports. The purpose of the report was to consolidate information on all measures and targets relevant to the Board in order to provide a clear picture of progress; and
- In some cases outturn data could not be made available at the mid-year point. Additionally, all measures captured through the National Place Survey, which was due to be undertaken this year, had been deleted from the NIS by central government and therefore no further data would be

made available in 2010/11. The future requirement for localised perception survey under the transparency agenda is presently subject to consideration.

The following points arose from the discussion:-

 Clarity was sought on Central Government target setting being replaced by minimum standards in some areas.

In response, it was reported that details on this would be emerging over the next few months. However, the Authority were currently looking at what data was important to Government re the various consultation documents and as contained in Government Department Business Plans each Board would then receive a report seeking their views on the production of a localised performance framework for publication;

- In response to NI 5 Increase residents overall satisfaction with the area – Members requested a copy of the formulated responses from the public. After discussion, it was agreed that Members receive a link to the previous Place Survey as the National Place Survey which should have commenced in November 2010 had been deleted by Central Government;
- The importance of Members receiving formulated responses from residents of the Borough was noted. It was also noted that within each local area, priorities changed and Elected Members were best placed to offer and provide information and act as a conduit in respect of the public's needs; and
- It was suggested that, in the first instance, Ward Members should be contacted when Officers were seeking views from residents in their respective wards. In response, it was reported that this request would be passed to the Research and Intelligence Team and such information could also be put in the Members Information Bulletin.

RESOLVED: That the report and comments made be noted.

The Board considered a report of the Strategic Director – Resources which provided an update on Business Planning for the period 2011-14 and the Directorate priorities, objectives and targets for services for this period that fell within the remit of the Board.

The Board was advised that each Directorate was required to develop a medium term business plan, in parallel with the budget, that was subject to annual review and refresh. Draft Service Objectives and Performance Indicators and targets had been developed by each department and the information had been included in the Appendices to the report. These objectives and measures would form the basis of the quarterly performance monitoring received by the Board during the future year.

The Board was further advised that due to the proposed structural changes across the Council and the need to better integrate the Directorate's priorities as last year a combined plan would be published rather than individual Departmental Service Plans. The plan, however, was subject to reconfiguration of services between Directorates and subject to consultation.

It was reported that comments could also be made to the relevant Operational Director by no later than 20 January 2011 to allow inclusion in the draft business plan.

It addition, the draft Directorate Business Plan would be revised given proposed reconfiguration of Directorates during January and would be presented to the Executive Board for approval on 12 February 2011, at the same time as the draft budget. This would ensure that decisions on Business Planning were linked to resource allocation. All Directorate plans will be considered by full Council at its 2 March 2011 meeting.

In respect of the implementation of the new National Food Hygiene Rating Scheme operated by the Food Standards Agency (FSA) – hygiene scores of all food premises in the Borough would be published - clarity was sought on what this would mean. In response, it was reported that this information would be circulated to all Members of the Board.

The Chairman took the opportunity to place on record the Board's continued support to retaining as much of the Community Safety and Safer Halton budgets during the budgetary process. The importance of retaining these budgets and the positive impact the services had on the Borough was noted.

RESOLVED: That

- (1) The report and comments made be noted; and
- (2) Members of the Board pass any detailed comments that they may have on the information in the report to the relevant Operational Director by 20 January 2011.

SAF37 PERFORMANCE MONITORING REPORTS - QUARTER 2

The Board considered a report of the Strategic Director, Resources regarding the Second Quarter Monitoring Report for:

- Environment & Regulatory Service Environmental Health (Extract); and
- Adults and Community Community Safety, Drug and Alcohol Action and Domestic Violence Teams (Extracts).

The Board was advised that the Directorate Overview reports and associated individual Departmental Quarterly Monitoring reports had already been previously circulated via a link on the Members Information Bulletin to allow Members access to the reports as soon as they became available.

RESOLVED: That the report be noted.

SAF38 SAFEGUARDING ADULTS AND SERVICE INSPECTION OF ADULT SOCIAL CARE

The Board considered a report of the Strategic Director, Adults and Community which presented details of the outcome of the Service Inspection of Adult Social Care recently carried out by the Care Quality Commission (CQC) and gave an update on the key issues.

The Board was advised of the key issues since the previous report to the Board in September 2010. In addition, it was reported that the feedback from the Service Inspection of adult social care (attached at Appendix 2) had been excellent and was one of the top in the country.

The Board was further advised that Trading Standards were holding a conference in Halton on 22

January 2011 to raise awareness of the ICAN scheme and Members were encouraged to attend the event. It was noted that anyone who had registered on the ICAN scheme would automatically receive an invite to the event. The Members were also encouraged to register themselves, their family etc on the scheme.

RESOLVED: That the report and comments made be noted.

SAF39 SAFER POLICY AND PERFORMANCE BOARD WORK PROGRAMME 2011/12

The Board considered a report of the Strategic Director, Health and Community which sought to develop a work programme of topics for the Board to examine in 2011/12.

The Chairman gave an update on the current situation in respect of Topic Groups as follows:-

- RSL Topic Group ongoing;
- The Alleygating Topic Group had been completed;
- That he wished to continue with the Alcohol Abuse Topic Group; and
- That he wished to undertake a topic group on Licensing which would include such things as looking at who receives a license etc.

It was noted that the Authority in partnership with Warrington Borough Council were currently considering establishing a minimum price for alcohol byelaw.

RESOLVED: That the Topic Groups and comments made be noted.

SAF40 ALLEYGATING

The Board considered a report of the Strategic Director – Adults and Community which reviewed the Council's policy on alleygating.

It was reported that at its meeting on 21st September 2010 the Board had resolved that a short-term working group be established to look at the procedure for Alleygates. The working group concluded that a more radical approach was required which included a review of policy as well as

procedures. It was therefore appropriate to consider a more flexible approach to establish whether the expectations of the community and members could be accommodated better than with the current system.

The Board was advised of the proposed alleygating principles and procedures as set out in the report. The proposed principles and procedures were cost neutral in terms of the physical costs of erecting and maintaining alleygates but would save money in processing gating orders which do not comply with the above principles.

The Board was further advised that at the current prices, the cost of processing gating orders (excluding costs of erecting and maintaining gates) had been assessed at to be in the order of £1,000.00 to £1,500.00 per scheme.

The Board unanimously agreed that the principles for alleygating be recommended to the Executive Board for adoption.

RESOLVED: That the Board

- (1) unanimously support the principles for alleygating as set out in the report; and
- (2) recommend that the Executive Board consider the adoption of the principles for alleygating.

SAF41 SCHEDULE 12A OF THE LOCAL GOVERNMENT ACT 1972 AND THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

The Board considered:

- (1) whether Members of the press and public should be excluded from the meeting of the Board during consideration of the following items of business in accordance with Sub-Section 4 of Section 100A of the Local Government Act 1972 because it was likely that, in view of the nature of the business to be considered, exempt information would be disclosed, being information defined in Section 100 (1) and paragraph 3 of Schedule 12A of the Local Government Act 1972; and
- (2) whether the disclosure of information was in the public interest, whether any relevant

exemptions were applicable and whether, when applying the public interest test and exemptions, the public interest in maintaining the exemption outweighed that in disclosing the information.

RESOLVED: That as, in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information, members of the press and public be excluded from the meeting during consideration of the following items of business in accordance with Sub-Section 4 of Section 100A of the Local Government Act 1972 because it is likely that, in view of the nature of the business, exempt information will be disclosed, being information defined in Section 100 (1) and paragraph 3 of Schedule 12A of the Local Government Act 1972.

SAF42 SAFER HALTON FUNDING

The Board considered a report of the Strategic Director – Adults and Community which gave the Members an update on funding issues for community safety within Halton

The Board was advised that the Working Neighbourhoods Fund along with a number of other time limited funding sources, was due to end in March 2011. The October Spending Review had not announced any alternative funding for community safety. The Safer Halton Partnership had utilised this funding to support a significant number of projects and staff. Safer Halton had relied heavily on this funding for both staffing costs and to deliver projects. For this reason the ending of this funding presented significant problems for the continuity of this work.

The Board noted the importance of the projects and the positive impact they had in the Borough. The Board also noted the impact that the loss of the funding would have in the community and the challenges that the Authority faced with the budgetary cuts.

The Board took the opportunity to thank the Safer Halton Partnership for the excellent work they had undertaken to date.

RESOLVED: That the report and comments made be noted.

(Note: Councillor M 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.)

SAF43 RECOVERY ORIENTATED, INTEGRATED SYSTEM FOR SUBSTANCE MISUSE (DRUGS AND ALCOHOL) IN HALTON

The Board considered a report of the Strategic Director – Adults and Community which gave details on the initiation of an innovative project in which both Primary Care Trust and Local Authority Commissioners would explore the feasibility of a fully integrated, recovery orientated, substance misuse treatment system in Halton. The system would integrate both alcohol and drugs services for adults (19 years and over) and would bring numerous benefits to some of the most vulnerable members of our communities.

In this respect, the Board also received a presentation from Collette Walsh, the Head of Alcohol Harm Reduction (PCT) relating to developing a vision for future substance misuse services in Halton. The presentation:-

- Outlined the purpose of the project to commission a fully integrated recovery orientated, substance misuse treatment system in Halton. The system would integrate both alcohol and drugs services for adults (19 years and over);
- Set out the numerous benefits of the integrated system to some of the most vulnerable members of the communities;
- Explained the following project phases:-
 - Defined the 'As is' utilise all existing knowledge regarding the effectiveness of existing services;
 - to vision a future 'To Be' state and make recommendations for improvements as part of an options appraisal. One of the options that would be explored was a single entry point into services;
 - procurement; and
 - 4. implementation;
- highlighted the scope of the new service and the outcomes based commissioning;

- listed the harms substance misuse could be linked to and the extent of the problem locally, regionally and nationally;
- set out the 2009/10 data in respect of alcohol related harm;
- outlined the key findings from the review;
- detailed statistics on community safety issues in Halton in respect of drugs and alcohol misuse;
- highlighted that there was an opportunity to modernise and put the service user at the centre of what is done and change relationships for providers and commissioners which would encourage accountability and innovation; and
- set out the next steps as follows:-
 - to collate the results of all consultation to date.
 - present a business case for a future ROIS;
 - compile the service specification;
 - competitive tendering process; and
 - implement the new system.

The following comments arose from the discussion:-

- Clarity was sought on why the new integrated service for alcohol and drugs was only for people of 19 years and over and it was highlighted that drinking alcohol was legal at the age of 18 years of age. It was suggested that it be reduced to 18 years of age to avoid young people developing problems. In response, it was reported that this suggestion would be forwarded to the Children's Commissioners for consideration;
- The negative impact alcohol abuse on anti social behaviour, domestic violence, petty crime etc had in the community was noted;
- the proposals for GP commissioning Consortia's and the importance of them working in partnership rather than isolation was noted; and
- the importance and challenges of recruiting professional champions in the community was

noted.

RESOLVED: That

- (1) the presentation be received;
- (2) the report and comments made be noted; and
- (3) Collette Walsh be thanked for her informative presentation.

Meeting ended at 9.00 p.m.