### **HEALTH POLICY AND PERFORMANCE BOARD**

At a meeting of the Health Policy and Performance Board held on Tuesday, 11 January 2011 in the Council Chamber. Runcorn Town Hall

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

Apologies for Absence: None

Absence declared on Council business: None

Officers present: R. Mackenzie, H. Moir, A. Williamson, A. Villiers and E Sutton-Thompson

Also in attendance: In accordance with Standing Order 33, Councillor Gerrard – Portfolio Holder – Health and Adults and Eugene Lavan (Primary Care Trust).

# ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

#### HEA36 MINUTES

The Minutes of the meeting held 9 November 2010 having been printed and circulated were signed as a correct record.

### HEA37 PUBLIC QUESTION TIME

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

#### HEA38 EXECUTIVE BOARD MINUTES

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

RESOLVED: That the minutes be noted.

# HEA39 PRESENTATION: WORKING TOGETHER FOR A SUSTAINABLE FUTURE

The Board considered a report and presentation from Mr Eugene Lavan, QIPP Project Director, NHS Halton & St Helens PCT which described the background to Quality Innovation, Productivity and Prevention (QIPP) in the mid-

Mersey sub-region (referred to as Level 3 QIPP), the challenge as a health and social care economy and the progress that had been made to date and future plans (including Halton Hospital)

The presentation outlined the following:-

- The background to Working Together for a Sustainable Future WHSHK (Warrington, Halton, St Helens and Knowsley);
- The scale of the challenge;
- The vision:
- Halton Health Campus;
- The potential savings/efficiencies that could be made:
- Governance to manage (WHSHK); and
- Workstreams and progress.

At the end of the presentation, Members of the Board requested a copy of the slides.

The Board noted the following points:-

- The five levels of QIPP (more quality, innovation prevention and productivity) to help address the significant funding gap;
- The scale of the challenges in respect of the increased level of complexity with less funding and performance targets such as waiting targets being abolished. In response it was reported that patients would retain their existing rights and privileges in the new system. In addition, clear information on quality measures and provision would be available;
- The benefits and importance of organisations in respect of services collaborating rather than competing;
- The importance of communication with members of the public on the changes and how they would affect them. In response, it was highlighted that communication and patient engagement was a key principle in the proposals for the changes in order

that the delivery of services in the community would be effective;

- The importance of keeping Elected Members and the Board updated on the changes. In response it was reported that Members could, if they wished, be involved in the clinical workstreams as a representative of their community. An undertaking was also given to provide the Board with regular updates; and
- That services would be local if possible and centralised if necessary and outpatients would be accessed locally and that paediatric care would continue to be in Warrington.

### **RESOLVED: That**

- (1) the presentation be received;
- (2) the comments made be noted;
- (3) Mr Lavan be thanked for his informative presentation;
- (4) update reports be presented to the Board on a regular basis.

(Councillor Martha Lloyd-Jones declared a Personal Interest in the following three items 6A, 6B and 6C of business due to her husband being a Non Executive Director of Halton & St Helens Primary Care Trust).

### HEA40 SSP MINUTES

The Minutes of the Health Strategic Partnership Board of its meeting held on 2 September 2010 were submitted to the Board for consideration

RESOLVED: That the minutes be noted.

## HEA41 PRESENTATION: URGENT CARE CENTRE HALTON HOSPITALS

The Board was advised that consideration of this item had been deferred to a future meeting.

HEA42 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 that 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 Members of the Board were thanked for the work they had undertaken during the past year, in particular their focus on the key issues.

Members of the Board also took the opportunity to congratulate officers in achieving an excellent inspection report and thanked them for their hard work during the past year.

RESOLVED: That the report and comments made be noted.

#### HEA43 HALTON MULTI-AGENCY TRANSITION STRATEGY

The Board received a report of the Strategic Director, Adults and Community which presented the updated Halton Multi Agency Transition Strategy for Young People Aged 14 - 25 2010-2013 (Transition Strategy) which was attached to the report at Appendix 1.

The Board was advised that the Strategic Transition Group which oversees the Transition Strategy had worked to expand the Strategy from 14-19 to 14-25 refreshed the existing Strategy to ensure that this was focused and purposeful.

The Board was further advised that the Strategic Transition Group had representatives from Halton Adults Social Care, Halton Children and Young People's Directorate, NHS Halton and St Helens, Riverside College, Transport Services, Housing commissioning and Greater Merseyside Connexions Partnership. In addition, a focus group of young people had been supported by the Transition Co-ordinator to input into the Strategy. Halton Speak Out had also made a positive contribution.

Members of the Board took the opportunity to thank Officers for the excellent report. It was noted that this report

was also being presented to the Children & Young People's Policy and Performance Board. In addition, it was noted that the report contained a significant number of key targets and it was suggested that the Board monitor these on a six monthly basis.

**RESOLVED: That** 

- (1) the report and comments made be noted; and
- in order to monitor the key targets the Board receive a six monthly update report.

Strategic Director

– Adults and
Community

# HEA44 ELECTRICALLY POWERED SCOOTERS AND WHEELCHAIRS

The Board considered a report of the Strategic Director, Adults and Community which informed the Members that Halton residents were increasingly purchasing their own electrically operated scooters or being supplied with electrically powered wheelchairs via Halton Wheelchair Service. Once they had this equipment, a request was made to their Registered Social Landlord (RSL) or Halton Borough Council (HBC), or both, to supply a permanent ramp to their property, and at times, adequate storage facilities.

The Board was advised that the report stated the position of Halton Borough Council, towards the provision of permanent ramps and storage facilities for these items.

The Board was also advised that the Department of Transport had recently held consultations on the proposed changes in the laws governing scooters. One suggestion in the consultation document included taking forward some of the recommendations contained in the DfTs 2005 review e.g.:-

- Improve advice to potential users when purchasing a vehicle and provide training on its use;
- Require users to have third party insurance;
- Devise a fitness to drive assessment; and
- That an appropriate body e.g. British Healthcare Trades Association should assist buyers in researching the best value for money.

The following points arose from the discussion:-

- Clarity was sought on who would do the fitness to drive assessment and what measures would be in place to ensure users had undertaken an assessment. In response it was reported that third party insurance would only be issued after a fitness to drive assessment had taken place. In addition, it was reported that it would be illegal to drive a scooter without an assessment or insurance;
- It was suggested that the Authority could issue a licence and insurance could be obtained on production of the licence;
- The issues related to the use of scooters in supermarkets and retailers who sold scooters without providing any guidance was noted; and
- It was agreed that there would need to be an awareness campaign on the use/purchase of scooters, the criteria for accessing ramps and a checklist to ascertain suitability for a scooter.

RESOLVED: That the contents of the report and comments made be noted.

### HEA45 A VISION FOR ADULT SOCIAL CARE

The Board considered a report of the Strategic Director, Adults and Community which highlighted the main factors of A Vision for Adult Social Care: Capable Communities and Active Citizens, published in November 2010.

The Board was advised that On Tuesday 16<sup>th</sup> November 2010, the Government had launched its *Vision for* Adult Social Care: Capable Communities and Active Citizens and the consultation, Transparency in Outcomes: A Framework for Adult Social Care. This was the first in a series of Government reforms and included a useful timeline of forthcoming documents:-

- Public Health White Paper end of 2010;
- Law Commission report on Adult Social Care Legislation – spring 2011;
- Commission on the Funding of Care and Support report – summer 2011;
- Care and Support White Paper end of 2011; and
- Social Care Reform Bill spring 2010.

It was reported that given the strategic importance of the new White Paper it was recommended that the Portfolio Holder for Adults and Social Care and the Chair of the Health Policy and Performance Board submit a letter in response to the consultation on the vision for Adult Social Care. In addition, that the Council explores the framework and potential to develop a Social Enterprise. This was unlikely to focus on adults with a disability and further reports would be submitted to the Board on this matter.

In this respect, a consultation document on Transparency in Outcomes: A Framework for Adult Social Care Consultation questions/response from Halton Borough Council was circulated at the meeting and Members were encouraged to email the committee officer with their views no later than Friday, 21 January 2011.

The following comments arose from the discussion:-

- It was noted that the Authority had been part of the pilot of independent social work practices; and
- It was noted that the transition from young people's to adult's services was crucial and the process to create a seamless transition must be maintained and improved upon by identifying relevant wider individual and family needs.

RESOLVED: That the report and comments made be noted.

# HEA46 SELF DIRECTED SUPPORT POLICY PERSONALISATION

The Board considered a report of the Strategic Director, Adults and Community which gave the Members an update on the Personalisation agenda and highlighted the current barriers and risks to full implementation on the personalisation programme.

The Board was advised that Halton Borough Council was committed to increasing the number of people who received Direct Payments and Personal Budgets. This was in line with national priorities and the shift to Self Directed Support (SDS) so that clients and carers had a greater choice and control over the support they received and how it was delivered.

The Board was further advised that SDS was a term

used to describe how people could exercise choice and control over their lives and the services they received. This required people to be aware of the financial value attributed to meeting their needs. This was known as an individual budget and allowed them to make an informed choice about how this was used.

It was reported that SDS included the use of direct payments and the delivery of individualised person centred services. Attached at Appendix 1 was a draft SDS policy which embraced these mechanisms and applied them across all client group areas.

In addition, it was reported that the Resource Allocation System (RAS) outlined the new system for allocating resources through personal budgets and was based on a person's assessed need taking into account all their circumstances. The personal budget system was a robust system of fair funding and provided equality across all service areas. Attached at Appendix 2 was a draft RAS.

The following comments arose from the discussion:-

- Concern was raised at the possibility of fraud in the new system and how this could be monitored. In response, it was reported that there was a significant amount of auditing undertaken throughout the whole system;
- Concern was raised on how the Authority ensured that the service individuals were paying for met their needs and whether it was value for money. The Well Being Board would also need to be monitored and it was suggested that an update report be presented to the Board in six months time. It was also acknowledged that sometimes the individual concerned would not always be aware of their specific needs;
- It was suggested that personal assistant training could be mandatory rather than recommended;
- Concern was raised that the current post holder who audited the system and provided the resultant individualised budgets and adjusted the system was only funded part time until March 2011 from the Council's Transformation Grant; and
- Concern was raised at the demand on the Authority for personal assistant training and clarity was

sought on how this would continue in light of the cuts in funding. It was also noted that monitoring the increased number of personal assistants would be challenging. In response it was reported that the Authority were working towards providing an accreditation programme for personal assistants.

### **RESOLVED: That**

- (1) the report and comments made be noted; and
- that an update report be presented to the Board in six months.

Strategic Director

– Adults and
Community

## HEA47 HEALTH POLICY AND PERFORMANCE BOARD WORK PROGRAMME 2011/12

The Board considered a report of the Strategic Director, Adults and Community which sought Members consideration of developing a work programme for 2011/12.

The Board was advised that the Dignity in Care Topic Group would continue as part of the work programme for 2011/12.

After discussion, the Board agreed that a Topic Group be established on Autism. Members were encouraged to email their interest in becoming part of this group to the committee officer as soon as possible.

#### **RESOLVED: That**

- (1) an Autism Topic Group be established; and
- (2) Members indicate their interest in becoming part of this Topic Group via email to the Committee Officer.

Strategic Director

– Adults and
Community

#### HEA48 PERFORMANCE MONITORING REPORTS - QUARTER 2

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

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

### Prevention and Commissioning Services

Page 224 – Item 1 and Page 241 – Item 2 – clarity was sought on what progress had been made with the work on the PCT Partnership.

In response, it was reported that progress had been good. The transfer of Learning Disability from health to the Authority had been finalised and the Authority were now commissioning the services from funding from the PCT. The Health and Well Being Board would be established in the near future and a half day workshop had taken place to look at priorities and challenges of the transition in response to Government proposals.

Page 243/244 – clarity was sought on the £231k underspend of the community care budget;

In response, it was reported that this was on target to balance and that the community care budget crossed several service areas.

Page 293 and 301 of the report – summary of key activities – Clarity was sought on whether the planned programmes of work and the proposed stakeholders workshop would be affected by the current spending review.

In response it was reported that the programmes had already been affected by the spending review. However, front line staff would be protected for health and social care and it was suggested that a Health representative attend the next meeting.

Page 321 – Key Milestone – Consider with the PCT Partners ... - would there be a wider consultation regarding the implication of the White Paper. In response, it was reported that this matter had been addressed earlier on the agenda.

The Board requested that a short commentary on the reason for any underspend on capital projects could be added to future reports.

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

HEA49 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 was progress to the 2010 – 11 mid-year which included information for those specific indicators and targets that fall within the remit of the Board.

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

- All of the measures within the National Indictor 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 out-turn 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 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.

Concern was raised that Halton's cancer statistics for under 75's remained disappointing, despite a fall in cancer death rates from 185.98 / 100,000 in 1995/1997. Clarity was sought on whether the planned activities to address this problem were affected by the spending review. In response, it was reported that the stakeholders workshop was going ahead. However, there had been a reduction in the budget for Health checks Plus carried out by GPs on behalf of the PCT.

RESOLVED: That the report and comments made be noted.

# HEA50 DRAFT BUSINESS PLAN 2011-14 FOR THE ADULTS & COMMUNITIES DIRECTORATE

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 9 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.

A member of the Board highlighted the complexity of the data and how it was reported and felt it would be useful to understand the thinking behind the proposals, whether there was a hierarchy of indicators, whether there were any existing or new objectives and if they had been considered in the light of the spending review. He also suggested that the Board have a half day workshop to share ideas and consider these points. It was noted that some data within the plan also came within the remit of other Policy and Performance Boards. After discussion, it was agreed that officers look at arranging a half day workshop at the end of the financial year to consider the overall framework and key priorities for the coming year.

**RESOLVED: That** 

(1) The report and comments made be noted;

- (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; and
- (3) A half day workshop be arranged for Members of the Board to review the Business Plans.

Strategic Director - Resources

Meeting ended at 8.40 p.m.