

SHADOW HEALTH AND WELLBEING BOARD

At a meeting of the Shadow Health and Wellbeing Board on Wednesday, 13 March 2013 at Karalius Suite, Stobart Stadium, Widnes

Present: Councillors Polhill (Chairman), Wright and S. Banks, M Creed, P. Cooke, N. Darvill, D. Lyon, A. McIntyre, E. O'Meara, D. Parr, N. Rowe, N. Sharpe, J. Stephens, M. Trelorre, D. Sweeney, A. Williamson, M. Cleworth, M. Grady, A. Lewis, W. Salisbury and S. Wallace-Bonner

Apologies for Absence: Councillors Philbin, Dr M. Forrest and M. Pickup

Absence declared on Council business: None

ITEM DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

HWB58 MINUTES OF LAST MEETING

The Minutes of the meeting held on 16th January 2013 were taken as read and signed as a correct record.

HWB59 PUBLIC HEALTH ANNUAL REPORT 2012

The Board received a presentation on the Public Health Annual Report (PHAR) 2012 from the Director of Public Health, Eileen O'Meara which provided an overview of the Halton and St Helen's Public Health Annual Report 2012. With the dissolution of the PCT on 31 March 2013, it was noted that this was an opportunity to reflect on achievements in improved health outcomes whilst also looking forward recognising some of the main health challenges. Members noted that:

- key improvements included cardiovascular disease, tobacco control and child dental health;
- challenges ahead were in areas such as early years, alcohol and cancer; and
- an update on recommendations from the 2010/11 report was also provided with a compendium of data.

RESOLVED: That the presentation be noted.

HWB60 NEW HALTON LEVELS OF NEED FRAMEWORK FOR CHILDREN'S SERVICES

The Board received a presentation from Mark Grady, Principal Children's Trust Officer, on developing a new Levels of Need Framework which would meet the work of all partners from April 2013. The original Halton Children's Trust Level of Need Framework developed in 2007 was recently examined by Glyndwr University and a number of issues highlighted, these would form a basis for developing a new framework.

Following the establishment of the requirements of a new framework a multi-agency group was formed with an aim to develop and launch a new Halton Levels of Need Framework. Members were advised on the progress of the group to date which included:

- Monthly multi agency group meetings;
- Developing an action plan;
- Mapping exercise undertaken;
- Agreed proposed new framework for consultation;
- 185 attendees at consultation events.

The Board considered an overview of the design framework and the design concept chosen. It was noted that before the April 2013 launch of the framework the final wording and design needed to be finalised, marketing materials agreed and all staff and stakeholders were to be fully informed.

RESOLVED: That the presentation be noted.

HWB61 FALLS

The Board received a presentation on Falls from Sue Wallace Bonner which advised that:

- falls were a significant cause of mortality and morbidity, particularly for older people who remained the highest risk group;
- many falls go unreported;
- where injury required treatment this was often reported under an injury specific diagnostic group (e.g fracture);
- there was a variation in the definition of what constituted a fall; and
- Halton had one of the highest number of hospital admissions due to falls in the country and this had risen annually for the past three years.

It was reported that in June 2012, a review of primary and secondary prevention of fall was commenced led by the Operational Director (Prevention and Assessment); the objectives of the review were:

- the development of a Halton Falls Strategy;
- review of the current specialist and associated falls services in relation to the national guidance, capacity, demand and skill mix;
- identify gaps in provision and recommend solutions through redesign and/or further commissioning; and
- develop an implementation plan and evaluation framework.

It was noted that the review had identified that the Integrated Falls Prevention Service was available to those over 65 but only once the person had fallen. There were also capacity issues within the service with comparatively low numbers accessing the service.

The Board was advised that as part of the review an Action Plan had been developed which set out to improve pathways and services and also to set targets to reduce repeat falls. It was anticipated that the falls service would be re-launched in June 2013.

RESOLVED: That the presentation be noted.

HWB62 ENVIRONMENTAL HEALTH ANNUAL REPORT 2011-2012

The Board considered a report of the Strategic Director, Communities which outlined the key issues and activities of the Environmental Health Service in 2011-2012.

The Board was advised that the Environmental Health Service was responsible for two main areas i.e. Environmental Protection and Food & Health & Safety. The service provided a range of regulatory and advisory services to the Council, local businesses and members of the public. The work of the teams comprised both programmed planned activities and reactive work in response to service requests.

In respect of Environmental Protection, the Board received information on; local air quality management; the inspection of industrial processes; planning consultations; service requests about pollution; other statutory nuisance, housing, animal welfare, stray dogs and pest control.

In respect of Food and Health and Safety, the Board

received information on; food safety, gas and fire safety in takeaway food premises; health and safety enforcement; smoke free playgrounds; illegal cosmetic treatments; the enforcement of the Sunbed (Regulation) Act 2010; health and safety in residential care homes and retail violence.

The following comments arose from the discussion, what were the outcomes of the health and safety inspections of 21 residential care homes? It was agreed that the information would be circulated.

Wendy Salisbury

RESOLVED: That the report and comments raised be noted.

HWB63 MAKING EVERY CONTACT COUNT IN HALTON BUILDING CAPACITY AND CAPABILITY AT ALL LEVELS OF THE WORKFORCE

The Board received a report of the Director of Public Health which outlined recommendations to ensure that the workforce was able to contribute to health promotion activity within Halton through the “Making Every Contact Count (MECC) Skills Development Initiative. It was noted that MECC was a means of describing how to provide the workforce at all levels with the knowledge and skills to offer health chats and signpost to appropriate services. The vision being that everyone had a role to play in public health service delivery. In order to deliver the programme the following actions would need to be undertaken:

- i. public health would work with local commissioners to ensure that contracts include MECC. For example ensuring that MECC training was integrated into all staff personal development plans including review and management processes;
- ii. develop a “whole workforce” approach; (consider the work of Ashton Leigh & Wigan, Yorks & Humber)
- iii. include MECC skills development into the Halton Workforce Strategy;
- iv. making the most of existing partnerships/ training / resources e.g. corporate induction programmes, existing shared learning opportunities such as learning pool <http://enable.learningpool.com>;
- v. adopt as part of corporate strategic vision –

include in corporate communication plan;

- vi. development of a “Halton Making Every Contact Count Directory;”
- vii. ensure that there was a co-ordinated approach to locality health promotion activity and campaigns that incorporate staff development at every opportunity; and
- viii. provide opportunities for community groups, voluntary sector and the private sector in Halton to be included as part of wider workforce development.

RESOLVED: That the Board:

- 1. endorse and support an agreed local workforce development approach to roll out Making Every Contact Count across the local authority and NHS within Halton; and
- 2. agree to receive regular updates regarding “Making Every Contact Count” activity.

Eileen O’Meara

HWB64 HALTON CCG INTEGRATED COMMISSIONING STRATEGY 2013-15 AND OPERATIONAL DELIVERY PLAN 2013-14

At its January meeting the Board requested a copy of the drafts of the Clinical Commissioning Groups Integrated Commissioning Strategy for 2013-15 and the associated delivery plan. Copies of the draft strategy and delivery plan were circulated to Members for consideration. The plan was developed in engagement with local people and member practices. Additionally the CCG was required to take account of national drivers, including those set out in the Mandate, the NHS Outcomes and Framework and Everyone Counts.

RESOLVED: That

- 1. the contents of the strategy and delivery plan be noted. (These documents are both in draft form and in particular the delivery plan is at an early stage of development); and
- 2. a copy of the latest version of the strategy and delivery plan be circulated to Members.

Simon Banks

HWB65 HEALTHWATCH UPDATE

The Board considered a report which provided an overview of Healthwatch functions, an understanding of Healthwatch Halton's relationship to the Health and Wellbeing Board and an update on transition progress from Halton LINK to Healthwatch Halton.

RESOLVED: That the report be noted.

HWB66 NHS SUPPORT FOR SOCIAL CARE

The Board considered a report of the Strategic Director, Health and Adults which informed Members on the recent announcements about NHS support for Social Care. In previous years the Department of Health allocated non-recurrent budget allocations to Primary Care Trusts for transfer to Local Authorities to invest in social care services to benefit health and to improve overall health gain. The allocations for Halton were £1.709m in 2011/12 and £1.645m in 2012/13. Subsequently on 19th December 2012 the Department of Health announced revised allocations and transfer arrangements. For 2013/14 Halton would be expected to receive £2,287,560. The funding transfer would be carried out by the new NHS Commissioning Board. In addition Halton had been allocated Winter Pressures funding of £223,000 for 2012/13.

It was noted that as a Council with Adult Social Care Responsibilities, Halton faced a number of challenges over the next 2 years which included:

- efficiency savings of approximately £14m per annum;
- projected population growths of 7% and increases in the number of older people of 33%;
- third highest levels of deprivation in Merseyside;
- all age all-cause mortality rates are higher than the regional national average; and
- projected rise in people requiring community based services from 3,340 to 4,200.

In light of the current financial and other pressures within the Authority it was proposed that the majority of Halton's allocation would be utilised to support existing services. Proposed funding allocation for 2013/14 was to:

- maintain the Telecare Service – £140,000;
- provide additional support to the community care

- budget £500,000; and
- support mainstream service delivery of £1,647,560.

RESOLVED: That the revised funding allocation be endorsed.

Meeting ended at 3.45 p.m.