

Health PPB Thematic Performance Overview Report

Directorate: Communities Directorate

Reporting Period: Quarter 1: 1st April 2013 – 30th June 2013

1.0 Introduction

This report provides an overview of issues and progress for the Health PPB that have occurred during the first Quarter of 2013/14. It describes key developments and progress against key objectives and performance indicators for the service.

2.0 Key Developments

There have been a number of developments within the first Quarter which include:-

COMMISSIONING AND COMPLEX CARE SERVICES

Mental Health Services

Section 136 Mental Health Act is the part of the Act which allows police officers to take people they find in a public place to a place of safety for assessment, if they believe they are mentally disordered and may pose a risk to themselves or other people. This needs close co-operation between the police, the Council social services team and the 5BoroughsPartnership, and there is a requirement that a multiagency policy and procedure, with agreed places of safety, should be in place. This work continues to develop; a draft process and policy has been developed by the police and can be agreed by the Council, but the work within the 5Boroughs has yet to be completed. This will be taken forward during the next Quarter.

Assessments for admission to hospital under the Mental Health Act are undertaken under most circumstances by doctors who are approved under Section 12 Mental Health Act as having special knowledge and experience in mental health issues. There have been some difficulties with securing adequate cover for this role, but continuing work from the Clinical Commissioning Group is resolving this issue.

A Mental Health Strategy is being drafted for Halton and will be presented for comment to the Health Policy and Performance Board in September 2013.

The pilot to deliver lower level social care support from the Mental Health Outreach Team within primary care continues to be developed. All surgeries have received a letter inviting them to join the pilot and there has been an encouraging response. This will be taken forward in the next Quarter.

Healthwatch Halton

Healthwatch Halton commenced on 1st April 2013. A transition from Halton LINK to a new organisation - Healthwatch Halton took place. A formal transition period took place prior to Quarter 1 to ensure that Healthwatch Halton would be up and running from 1st April 2013. Healthwatch Halton is registered with Companies House as a Community

Interest Company (CIC). Healthwatch Halton is supported by Halton and St Helens VCA under sub-contracting arrangements, which includes the provision of three full-time staff. Activity during the first quarter has centred on establishing Governance arrangements and building relationships, including, appointing a Board, Chair and Committee, which are now formally in place. Healthwatch Halton held a formal 'launch' on 5th July which was very well attended.

Running in tandem was the procurement of an Independent NHS Complaints Advocacy Service. Halton Borough Council took part in a cross-collaboration procurement exercise and the contract covering the Cheshire and Merseyside regions was awarded to Carers Federation. The service also commenced on 1st April 2013. In the first quarter there were three new cases where Halton residents required complaints advocacy support. Information regarding cases which require advocacy support will be reported to Healthwatch Halton and to the Clinical Commissioning Group (CCG) Quality Committee on a regular basis.

Carers

Having identified a number of issues around carers assessments, a review of this process is underway. Participants include the Carers Centre, Commissioning and Carefirst 6 staff. The aim of the review is to establish a more efficient and 'carer friendly' process with a view to eventually transferring assessments from the social care teams to the Carers Centre. Carers breaks that will flow from the new assessment will be supported via a pooled budget arrangement with Halton CCG.

The Carers Strategy Group action plan is also continuing to evolve. The latest developments will involve Job Centre Plus and will concentrate on supporting carers into employment & training and providing information in order that individuals can make informed decisions with regards to the upcoming impact on the introduction of Universal Credit

PREVENTION AND ASSESSMENT SERVICES

Halton Care Homes Project

This project has now commenced work with 4 homes in the borough. Nursing and social work staff are undertaking some baseline data collection with the care homes looking at the needs of residents, staff and how the wider system of health and social care can better support this group of people. The team will be joined by a Consultant Physician and is working with existing community and mental health services that support people in care homes.

Community Multi-disciplinary Teams

Work has been on-going with Halton Clinical Commissioning Group, General Practices, Bridgewater Community Healthcare Trust in developing an integrated approach to delivering care for people with high level needs based around their GP practice. We are currently moving forward on gaining some Clinical Facilitator time to support practices in implementing their models. Social care teams are realigning their work to match against General Practices and staff will start attending the surgeries in Widnes (as they do in Runcorn) during the summer.

Care Management and Assessment Services

The Care Management Teams are participating in the development of community Multi-disciplinary Teams that will be locality based, now making steps to be aligned to GP practices across Widnes and Runcorn.

Care and Support for You Portal

There is on-going development of an online, "Care and Support for You" portal. This is a website where you can easily find lots of information about Adult Social Care Support and Services to help you get on with your life and keep your independence. 'Care and Support for You' delivers information and advice, signposting citizens to the relevant information, and towards enabling self-assessment and self-directed support. The portal has now gone LIVE with over 3,000 organisations now available in the public domain. 'Care and Support for You' is also being used by our care management teams to signpost citizens to the relevant information required. System Administration access has been given to a number of providers for them to amend and change information on their own service page; this enables the information on the website to up to date. A marketing plan is being finalised. The Marketing Report has been produced and will be presented to the Directorate for approval September 2013, once this has been done we can then deliver workshops to the public, clients and external organisations to promote the website. 'Care and Support for You'.

<http://halton.olminfoserve.co.uk/home/defaultalt2.aspx>

3.0 Emerging Issues

3.1 A number of emerging issues have been identified during the first Quarter that will impact upon the work of the Directorate including:-

COMMISSIONING AND COMPLEX CARE SERVICES

Market Position Statement

From 1st April, 2014 all Local Authorities will have a duty to shape their local Adult Social Care market to ensure that the local service mix is shaped to meet the needs of the local population. All Local Authorities in England have been provided with three day's support from the Institute of Public Care (IPC) to help develop their role in market shaping. This includes support to develop a Market Position Statement for Adult Social Care. During the first quarter work has begun on the development of a Market Position Statement for Adult Social Care, covering the Borough of Halton. The Market Position Statement is inclusive of the whole market and not just the proportion of the market that the Council commissions. The audience for the Market Position Statement is Commissioners and Providers of Adult Social Care services within the Borough of Halton. It is expected that the first Market Position Statement for Adult Social Care for Halton will come into effect on 1st April, 2014.

Joint Strategic Performance Arrangements

At the beginning of April 2013, there were a number of changes that came into effect, namely the establishment of the Halton Clinical Commissioning Group and the transfer of Public Health responsibilities to the Council. In light of this and a commitment to increasing integrated working arrangements, a mapping exercise commenced during

Quarter 1 to review statutory reporting requirements across the Adult Social Care Outcomes Framework, NHS Outcomes Framework, Public Health Outcomes Framework and NHS Constitution. The intention of this work is to identify reporting responsibilities, areas of overlap and the development of an overarching integrated strategic performance framework which brings together strategic priorities within one framework. Additionally, due to changes in governance, it is intended that this work will identify the reporting requirements to existing as well as new and emerging boards and groups. It is expected that this work will continue throughout 2013/14.

PREVENTION AND ASSESSMENT SERVICES

End of Life Care

Training was held late 2012 for staff across care management and assessment services with the aim of increasing knowledge of end of life care issues. The 2 day course was run in conjunction with Halton Haven Hospice and Halton Borough Council Learning & Development Division, The Learning outcome was to enable staff to identify and relate end of life care to client assessment. The course has started to equip staff with knowledge and confidence to use end of life care tools and advance care planning during assessment. We had a follow up event in June 2013 to develop fourteen staff as dedicated champions of end of life care.

These champions will attend a Multi Agency End of Life Champions Forum. They are also to spend dedicated time with staff at Halton Haven who will operate a buddying approach for staff, with the opportunity to shadow more experienced staff to enhance staff confidence, learning and development.

Winterbourne View

Winterbourne View Review Concordat: Programme of Action was published by the Department of Health in December 2013. Halton CCG and Council are in the process of developing a localised action plan – this will be monitored through the Learning Disability quality and performance then reported to the Learning Disability Partnership Board and CCG Quality and Integrated Governance Committee.

- By April 2014, each area will have a joint plan to ensure high quality care and support services for all people with learning disabilities or autism and mental health conditions or behaviour described as challenging, in line with best practice as a consequence; there will be a dramatic reduction in hospital placements for this group of people.
- The Council has continued to work with health colleagues to review all out of area placements regardless of funding arrangements.
- Halton have a strategic task group set up to ensure those placed out of area are managed and monitored appropriately with professionals tasked with reassessing those individuals to enable them return to Halton. This work has been on-going with successful placements now achieved locally with the co work of the care management teams, health colleagues and the Positive Behaviour team.
- Executive report 17th July, 2013 with Winterbourne View Update
- Winterbourne View Stock take submitted to Local Government Association (5th July)

- Joint Health and Social Care Learning Disability SAF to be submitted 30th September 2013 working group chaired by Operational director leading on LD SAF and Winterbourne.

4.0 Risk Control Measures

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements. During the development of the 2013/14 Business Plan, the service was required to undertake a risk assessment of all key service objectives with high risks included in the Directorate Risk Register.

As a result, monitoring of all relevant 'high' risks will be undertaken during Quarter 2 and Quarter 4.

5.0 Progress against high priority equality actions

There have been no high priority equality actions identified in the quarter.

6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key business areas that have been identified by the Communities Directorate. The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained at the end of this report.

Commissioning and Complex Care Services

Key Objectives / milestones

Ref	Milestones	Q1 Progress
CCC1	Continue to monitor effectiveness of changes arising from review of services and support to children and adults with Autistic Spectrum Disorder. Mar 2014. (AOF 4) KEY	
CCC1	Continue to implement the Local Dementia Strategy, to ensure effective services are in place. Mar 2014. (AOF 4) KEY	
CCC1	Continue to implement 5Boroughs NHS Foundation Trust proposals to redesign pathways for people with Acute Mental Health problems and services for older people with Mental Health problems. Mar 2014 (AOF 4) KEY	
CCC1	Develop a Homelessness strategy for 3-year period 2013-2016 in line with Homelessness Act 2002. March 2014. (AOF 4, AOF 18) KEY (NEW)	
CCC2	Update the JSNA summary of findings, following community consultation, to ensure it continues to effectively highlight the health and wellbeing needs of people of Halton. Mar 2014 (AOF 21 & AOF 22) KEY	

SUPPORTING COMMENTARY

Services for children and adults with Autistic Spectrum Disorder

Autism Strategy Group continues to monitor progress.

Implementation of Dementia Strategy

The Dementia Strategy is now already complete and scheduled for Executive Board 12 September, 2013.

Implementation of service redesign within 5Boroughs Partnership

The 5BoroughsPartnership have now fully implemented the Acute Care Pathway, with many people who were formerly managed by the 5Boroughs now being supported through primary care services. The Directorate remains fully engaged in this process. The services for older people with mental health problems continue to be progressed, with a successful pilot in Wigan being repeated in Halton. The Trust is reporting on progress to the Health PPB in September 2013.

Development of Homelessness Strategy

A draft review of homelessness services was completed February 2013 and consultation events were held with partners on 27th March 2013 and with members on 27th July 2013. The event allowed the authority to consult with both stakeholders and members which was considered a successful day and all the consultation details will be included in the final review document.

It is anticipated that the Strategy review and Action Plan will be completed and circulated by September 2013 and the relevant Homeless Forum Sub Groups and Strategic Commissioning Group will form part of the development and implementation of the strategic review process.

Update of Joint Strategic Needs Assessment

A refresh of Halton's JSNA commenced in Q1. The refresh has been undertaken by Public Health.

Key Performance Indicators

Ref	Measure	12/13 Actual	13/14 Target	Q1	Current Progress	Direction of travel
CCC 5	Total number of clients with dementia receiving services during the year provided or commissioned by the Council as a percentage of the total number of clients receiving services during the year, by age group. (Previously CCC 8)	4.0%	5%	3.55 %		

CCC 6	The proportion of households who were accepted as statutorily homeless, who were accepted by the same LA within the last 2 years (Previously CCC 8).	0	[1.2]	0		
CCC 7	Number of households living in Temporary Accommodation (Previously NI 156, CCC 10).	6	[12]	6		
CCC 8	Households who considered themselves as homeless, who approached the LA housing advice service, and for whom housing advice casework intervention resolved their situation (the number divided by the number of thousand households in the Borough) (Previously CCC 11).	5.42	[4.4]	7.76		
CCC 11	Carers receiving Assessment or Review and a specific Carer's Service, or advice and information (Previously NI 135, CCC 14).	18.87 %	25%	4.90 %		

Supporting Commentary

CCC5

It is clear that there are issues on how dementia is recorded within CareFirst. This is particularly challenging as people diagnosed with dementia may well have dual diagnosis and this would be how they are categorised on CareFirst.

In addition, there has been a significant increase in the number of people supported by both the 5Boroughs Partnership and the Alzheimer's Society, but neither cohort is currently recorded on CareFirst. A solution to this is being sought.

CCC6

The Authority signed up to the Merseyside Sub Regional, No Second Night Out scheme in 2012. The service provides an outreach service for rough sleepers and has a close working partnership with Halton to identify and assist this vulnerable client group. The Authority will continue to strive to sustain excellent performance towards repeat homelessness within the district.

CCC7

Established prevention measures are in place and the Housing Solutions team will continue to promote the services and options available to clients.

There has also been a change in the TA process and accommodation provider contracts. The emphasis is now focused on independence, which has developed stronger partnership working and contributed towards an effective move on process for clients. The Authority will strive to sustain the reduced TA provision.

CCC8

The Housing Solutions Team promotes a community focused service. During the last 2 years there has been an increase in prevention activity, as officers now have a range of resources and options to offer clients threatened with homelessness. Due to the proactive approach, the officers have continued to successfully reduce homelessness within the district.

CCC11

This indicator is slightly improved on the position at the same time last year. A project is currently taking place to improve the processes for assessment and review of carers and this will lead to longer term improvements.

II Prevention and Assessment Services

Key Objectives / milestones

Ref	Milestones	Q 1 Progress
PA1	Implement and monitor the pooled budget with NHS partners for complex care services for adults (community care, continuing health care, mental health services, intermediate care and joint equipment services). Apr 2014. (AOF 21 & 25) KEY (NEW)	
PA1	Engage with new partners e.g. CCG, Health LINks, through the Health and Wellbeing Partnership to ensure key priorities, objectives and targets are shared, implementing early intervention and prevention services. Mar 2014. (AOF1, 3 & 21) KEY (NEW)	
PA1	Review the integration and operation of Community Multidisciplinary Teams. Mar 2014. (AOF 2, 4, & 21). (NEW) KEY	
PA1	Develop working practice in Care Management teams as advised by the Integrated Safeguarding Unit. Mar 2014 (AOF 10) (NEW) KEY	
PA1	Embed and review practice in care management teams following the reconfiguration of services in 2012/13 to ensure the objectives of the review have been achieved. Mar 2014 (AOF 2, 4). (NEW) KEY	
PA1	Continue to establish effective arrangements across the whole of adult social care to deliver personalised quality services through self-directed support and personal budgets. Mar 2014 (AOF 2, AOF 3 & AOF 4) KEY	

SUPPORTING COMMENTARY

Implementation of pooled budget

The pooled budget has been fully implemented, with regular monitoring reports to the partnership board. Further work on pathways and processes will be progressed.

Engagement with partners to ensure delivery of early intervention and prevention services

The Health and Well-Being partnership approach is being successfully implemented, focussed work on the prevention of falls is underway.

Community Multidisciplinary Teams

We are currently moving forward on gaining some Clinical Facilitator time to support practices in implementing their models using risk stratification. Social care teams are realigning their work to match against General Practices and staff will start attending the surgeries in Widnes (as they do in Runcorn) during the summer.

Develop working practice within care management teams which is advised by the Integrated Safeguarding Unit

Working practices are being progressed within the new structure including a focus on prevention and quality.

Continue to embed and review practice within care management teams

Work is progressing well, with the recent establishment of a practitioner group to ensure ownership of the recent changes.

Continue to ensure the delivery of personalised quality services through self directed support and personal budgets

Review of systems to ensure effectiveness is underway.

Key Performance Indicators

Ref	Measure	11/12 Actual	12/13 Target	Q4	Current Progress	Direction of travel
PA 2	Numbers of people receiving Intermediate Care per 1,000 population (65+) (Previously EN 1)	84.35	99	Actual Number is: 327		
PA 3	Percentage of VAA Assessments completed within 28 days (Previously PCS15) (Previously PA5 [12/13], PA8 [11/12])	86.73%	82%	88.15%		

PA 7	Percentage of items of equipment and adaptations delivered within 7 working days (Previously PA11 [12/13], PA14 [11/12], CCS 5)	94%	97%	95.77%		
PA 1 (AQuA 8) ¹	Proportion of local authority ASC spend on aged 65+ on res/nursing care	44.7%	45%	Not yet available	To be included	To be included
PA 9	Percentage of people receiving a statement of their needs and how they will be met (Previously PA 13 [12/13], PA 15, PCS 5, PAF D39)	96.53%	99%	76.82%		
PA 10	Proportion of People using Social Care who receive self-directed support and those receiving Direct Payments (ASCOF 1C(1), Previously PA 14 [12/13], NI 130, PA 29)	75.6%	78%	74.5%		
PA 11	Permanent Admissions to residential and nursing care homes per 100,000 population, 65+ (ASCOF 2A(1))	439.67	589.87	236.0		N/A
PA 12	Permanent Admissions to residential and nursing care homes per 100,000 population, 18-64 (ASCOF 2A(2))	11.4	15.2	3.8		N/A
PA 14 (SCS HH10)	Proportion of Older People Supported to live at Home through provision of a social care package as a % of Older People	14.2%	15%	14.24%		

¹ ADASS AQuA Benchmarking suite. Figure reported represents 2011-12 data which was reported at 2012-13 year end.

	population for Halton (Previously PA17 [12/13])					
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SUPPORTING COMMENTARY

PA2

On track to achieve target by the end of the year.

PA3

On track to achieve target by the end of the year.

PA7

Improved performance on last year Q1.

PA1

This information is not currently available and will be supplied from Quarter 2

PA9

Q1 performance is lower than expected at Q1- work is on-going to ensure we achieve the target by end of year.

PA10

There has been a slight dip in performance in Quarter 1, as compared with last year's overall performance, but there is a significant improvement on the same time last year, and work is continuing to maintain this same high standard.

PA11

On target to achieve by the end of the year. Target readjusted in line with increasing population of older people.

PA12

On target to achieve by the end of the year. Target readjusted in line with increasing population of older people.

PA14

In line with target. The indicator is affected by 7% population increase.

APPENDIX

Symbols are used in the following manner:

Progress	Objective	Performance Indicator
Green 	Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber 	Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage</u> whether the annual target is on course to be achieved.</i>
Red 	Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved</u> unless there is an intervention or remedial action taken.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green 	Indicates that performance is better as compared to the same period last year.
Amber 	Indicates that performance is the same as compared to the same period last year.
Red 	Indicates that performance is worse as compared to the same period last year.
N/A	Indicates that the measure cannot be compared to the same period last year.