

HEALTH POLICY AND PERFORMANCE BOARD

At a meeting of the Health Policy and Performance Board held on Tuesday, 3 November 2015 at Council Chamber, Runcorn Town Hall

Present: Councillors J. Lowe (Chairman), S. Hill (Vice-Chairman), C. Gerrard, Dennett, M. Lloyd Jones, C. Plumpton Walsh, Sinnott and Wallace

Apologies for Absence: Councillors S. Baker, Horabin and Osborne

Absence declared on Council business: None

Officers present: S. Wallace-Bonner, M. Holt, A. Jones, H. Moir, D. Nolan and P. Preston

Also in attendance: Councillors Thompson, R. Hignett and P. Lloyd Jones, M. Pickup and S. McGuire (WHHFT) and Professor Bhowmick

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

	<i>Action</i>
HEA18 MINUTES	
The Minutes of the meeting held on 8 September 2015 were agreed and signed as a correct record.	
HEA19 PUBLIC QUESTION TIME	
It was confirmed that no public questions had been received.	
HEA20 HEALTH AND WELLBEING MINUTES	
The minutes of the Health and Wellbeing Board from its meeting held on 8 July 2015 were submitted to the Board for information.	
HEA21 HOMELESS SERVICE UPDATE	
The Board received a report from the Strategic Director, People and Economy, which informed them of the recent developments within the homeless service. The Chairman welcomed and introduced Councillor Ron Hignett, the Portfolio holder for Housing Strategy/Homelessness.	

It was reported that in accordance with the Homelessness Act 2002, the Local Authority had conducted a full Strategic Review of Homelessness within the area and formulated a Homelessness Strategy covering the period 2013-18. It was agreed as part of the Homelessness Strategy implementation, that the Strategic Action Plan would be reviewed annually. A consultation event was held to review the Strategic Action Plan in June 2015 which involved active engagement with all partner agencies, service providers and Members.

It was noted that the review provided clear direction for preventing and addressing homelessness within Halton and reflected the relevant factors known to affect future homelessness. It also highlighted the identified actions completed in the last financial year and new tasks added to ensure the action plan remained current and reflected legislative and economic changes. The Board was advised that the amended Action Plan would be the subject of a report to Executive Board on 5 November 2015.

The report then provided Members with details of recent developments within the Housing Solutions Team; Homelessness Trends; Legislation; and Health and Homelessness. The Board was also advised of a recent Supreme Court decision that was likely to affect future demand for the homelessness service.

In response to Members' comments, the following was noted:

- Recruitment to the Housing Solutions Team was now complete and at full capacity;
- Brennan Lodge, located in Albert Road in Widnes, was accessed by clients following an electronic assessment carried out by the Housing Solutions Team;
- Halton formed part of the Merseyside and Cheshire Sub Regional groups. The London City Region (LCR) sub group developed a Pan Merseyside Bond Scheme, which provided assistance to vulnerable clients who were not able to access social housing;
- Only a small number of Armed Forces personnel had accessed the service so far; and
- The Authority had been successful in maintaining zero use of bed and breakfast accommodation for the past 4 years.

RESOLVED: That the report be noted.

Councillor Martha Lloyd Jones declared a Discloseable Other Interest in the following item as her husband was a Governor of Warrington and Halton Hospitals NHS Foundation Trust.

HEA22 RAPID CLINICAL ASSESSMENT

The Board received an update from the Strategic Director, People and Economy, on the clinical service development. The Chairman introduced Professor Bhowmick from Warrington and Halton Hospital Foundation Trust, (WHHFT) who addressed the Board and assisted in presenting the item.

It was reported that as part of the wider Health and Wellbeing agenda, the local statutory and independent sector organisations were committed to developing more services in the Borough which supported clinical diagnostics and assessment in or closer to people's homes. The development of the Urgent Care Centres was a key example of how this intention was delivered in practice bringing together a range of health and social care organisations.

The Board was advised that older people became unwell for a variety of complex reasons and sometimes required hospital attendance or admission for consultant led diagnostics and assessment. Further, moving older people out of their home environment to a hospital, particularly frail older people aged 75+ posed a number of significant issues and risks to their health and wellbeing, including disorientation, confusion, falls, functional decline and risk of hospital acquired infection. Finding clinically suitable alternatives to hospital was therefore important for this group.

Members were advised that the Rapid Access and Rehabilitation Service had operated in the Borough for over 13 years. The team comprised non-medical professionals from health and social care and worked with adults and older people who required assessment, treatment, care and support with the aim of preventing hospital admission and reducing the length of hospital stay. The service worked with people in their own homes and also within dedicated intermediate care beds located within the Borough.

It was noted that in collaboration with Warrington and Halton Hospitals NHS Foundation Trust the service was enhancing its model of care with the addition of a Care of the Elderly consultant. This model would be designed to deliver rapid, higher level diagnostics and assessment for referrals from the primary care team.

In response to Members' queries it was noted that the development of the service was well advanced and staff were being trained on actual patients in their homes. It was planned that referrals would be accepted from end of November / beginning of December.

RESOLVED: That the contents of the report be noted.

Councillor Martha Lloyd Jones declared a Discloseable Other Interest in the following item as her husband was a Governor of Warrington and Halton Hospitals NHS Foundation Trust.

HEA23 WARRINGTON & HALTON HOSPITALS NHS FOUNDATION TRUST - CAR PARKING PENALTY NOTICES - UPDATE

The Board received an update from Mel Pickup and Steve McGuire from Warrington and Halton Hospitals NHS Foundation Trust (WHHFT) following the Health Policy and Performance Board (HPPB) meeting held on 28 July 2015, which considered the current parking penalty charges and process in place at the Halton and Warrington Hospital sites.

The Board was advised that the responses to the questions posed at the meeting and submitted to the Trust in July 2015 were attached to the report in Appendix 1. These questions related to:

- The Tender Process;
- Patient Confidentiality;
- The Equality Act;
- The British Parking Association and Signage at the Trust; and
- Refunds

The Chairman introduced Councillor Thompson who presented WHHFT with 5 further questions and tabled information relating to car park usage, charges and penalties of 24 Acute NHS Trusts in the North West of England, which highlighted the comparisons between them and the car park usage, charges and penalties issued at Halton Hospital.

Following discussions it was agreed that Officers would provide WHHFT with information on who to discuss the options with regarding the adopted highway.

RESOLVED: That the Board notes the contents of the report and associated appendix.

HEA24 CLOSURE OF THE INDEPENDENT LIVING FUND

The Board received a report from the Strategic Director, People and Economy, which updated them on the closure of the Independent Living Fund (ILF) and the progress of the project group established to undertake a reassessment of all ILF recipients prior to 30 June 2015.

Members were advised that after an independent review in 2007, the Government acknowledged that the ILF system was inequitable for people and operated outside of care systems operated by the Local Authorities. Subsequently it was decided to close the ILF on 30 June 2015 with the ILF users being transferred to the management of the Local Authority. It was noted that an attrition rate of 5% was applied to the overall costs that the Council would receive.

To assist this process, a project team was established to review the 51 ILF recipients which was completed before the transfer date. Based on the reviews, statistical information had been calculated and was provided under paragraph 3.6 of the report.

The report also went on to advise that there were no indications from Government regarding the ongoing funding of these packages for 2016-17 and beyond or whether further attrition rates would be applied. If further funding was not received, the cost to Halton Council to continue to support people at the current levels of care was a concern for Members, as was the impact that this would have on the Complex Care pooled budget.

RESOLVED: That the Policy and Performance Board receives the ILF update report and the contents be noted.

HEA25 DEPRIVATION OF LIBERTY SAFEGUARDS

The Board received a report which provided an update and highlighted key issues with respect to Deprivation of Liberty Safeguards (DoLS).

Members were reminded that DoLS were one aspect of the Mental Capacity Act (2005). The Safeguards were to ensure that people in care homes and hospitals were cared for in a way that did not inappropriately restrict their freedom, and if necessary restrictions were only applied in a safe and correct way and that this was only done when it was in the best interests of the person and there was no other way to provide appropriate care.

The key issues in relation to DoLS was discussed in the report and noted by Members. The Chairman requested that a further update be presented to the Board at a future meeting.

RESOLVED: That the report be noted.

HEA26 CARE ACT IMPLEMENTATION - CURRENT POSITION

The Board received an update on progress and the impact of implementation on Phase 1 of the Care Act and was informed of the postponement and consequences of Phase 2 of the Care Act to 2020.

It was noted that on 1 April 2015 the Care Act came into force and Halton now had certain duties placed upon them (discussed in paragraph 3.1 of the report). It was reported that progress had been made on the implementation of this and all aspects of the Care Act and that Halton could now demonstrate full compliance with all areas (detailed in paragraph 3.2).

Members discussed the expected impact of Phase 1 in Halton and the postponement of Phase 2 until April 2020, as decided by the Department of Health (DH).

RESOLVED: That the Board notes the contents of the report and the impact and risks associated with the implementation of the Care Act 2015.

Meeting ended at 7.55 p.m.