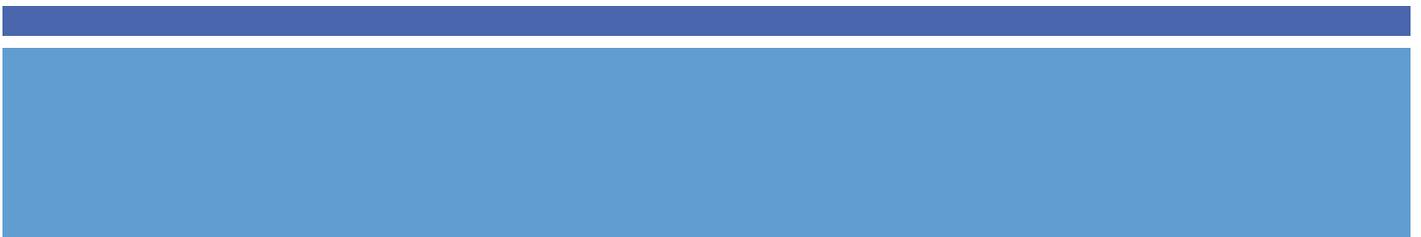




Adult Social Care Annual Report

2020 / 2021



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Introduction

The Adult Social Care annual report, sometimes known as the 'local account', is a valuable part of Halton Borough Council's quality improvement and planning cycle. It provides the chance to reflect on services delivered, progress made and needs met, and allows us to increase public understanding of the range and remit of provision across the borough.

The Council is duty-bound, as a Local Authority in receipt of public funds, to monitor and shape provision of Adult Social Care services to meet the care and support needs of its residents. Individual needs are determined through access and eligibility criteria which are governed under law - under the Care Act 2014, the Human Rights Act 1998, the Mental Capacity Act 2005 and the Mental Health Act 1983, the Equality Act 2010 and other relevant legislation.



What is adult social care?

Adult Social Care allows those with mental, physical and sensory conditions, disability or ill-health to be able to live life as independently as possible. It aims to give people equal to opportunities to reach your full potential and have positive life experiences - be it educationally, employment-wise, having a home and family life and pursuing activities of your choice. It is also intended to keep people safe from harm and safeguard their welfare and wellbeing.

Adult Social Care forms part of the Council's Strategic Priorities towards achieving:

A Healthy Halton: "To improve the health and wellbeing of Halton people so they live longer, healthier and happier lives."

Service are provided by in-house Council teams and commissioned from independent companies and agencies and third sector (charitable) organisations to meet the specific population needs of the borough. This is determined by strategic planning processes, continuous monitoring of the projected health and wellbeing requirements across Halton to determine demand for service and in consultation with the public in recognition of individual ambitions and aspirations.

The impact of the pandemic

This annual report covers the period April 2020 to March 2021, encompassing the emergence and response to the ongoing global pandemic.

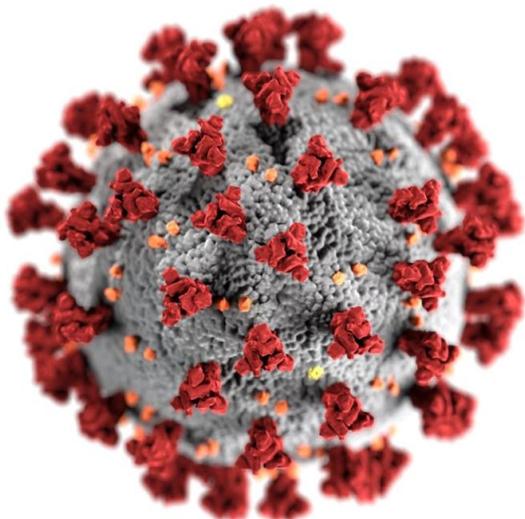
National lockdown restrictions were already in place at the start of the period being examined and Halton Borough Council took decisive, responsive and safe action in respect of its Adult Social Care provision to alleviate the impact on the most vulnerable members of the community. This involved effective risk and contingency planning and management to deploy personnel and resources to where they were needed the most.

Under the evolving government direction, services were adaptive and open to regular change. Some front-line provision, such as day services activities, were paused and new and innovative ways of working were developed.

Social work teams continued to undertake care assessments, adopting different ways of communicating with people including virtual appointments, where appropriate. It was important to us to retain face-to-face assessments for those presenting with the highest level of needs. In particular, those being assessed under the Mental Health Act needed direct contact to ensuring the right support was accessed, in a timely manner, and in-line with legislation. Infection control measures such as use of PPE and social distancing were followed.

For some this meant different sorts of social and leisure activity, for example, many of the borough's supported living settings, who were unable to undertake their normal movements across the local community, found new ways of working together to maintain social contact and pursue interests. Some held regular quizzes, parties and barbeques within their care setting and others learnt new digital skills as part of virtual contact with their families.

The picture was similar across care homes with Activity Co-ordinators taking on new skills to facilitate virtual visits and arrange enjoyable activity while maintaining social distancing and hygiene requirements.



Across Adult Social Care services front-line staff worked tirelessly, remained motivated and determined to support the individual in their care over this period. This not only kept people out of hospital but supported timely discharge where in-patient care was needed, backing our colleagues and sustaining provision across the National Health Service.

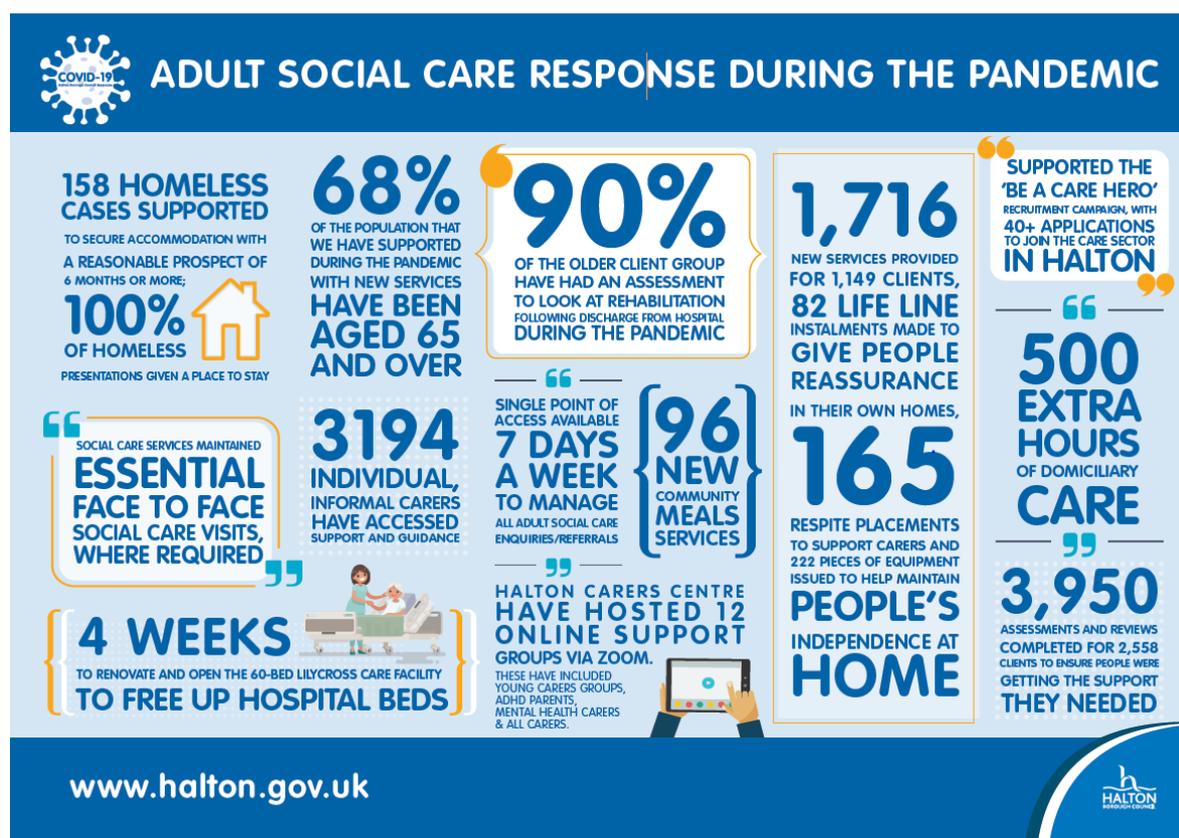
Structure of this report

The Adult Social Care annual report is usually structured around three areas of service support and delivery. This gives us the opportunity to highlight some of the key work areas which have been focussed on during the period.

This report will cover a more overarching response to the pandemic, in particular honing in how our care home provision was maintained during the period.

The Council's response to the pandemic has been co-ordinated in parallel to national measures and legislative changes, including the Care Act Easement in the Coronavirus Act 2020, which expired on 16 July 2021. The Easements allowed local authorities, if needed, to implement care and support prior to full assessment and eligibility assessment, allowing people to access the services through a streamlined process.

In July 2020 Halton Borough Council collated and made public the following figures. These support the Council's communication and transparency objectives and were aimed at offering reassurance that service provision was ongoing:



The report also looks at key facts and figures, giving an indication of our performance over the year 2020/21.

The report concludes with a section on how to get in touch with us for further information about adult social care.

Care Homes

Halton's care home market is made up of private sector providers, some of which are Council-commissioned to provide bed-based services to adults with care and support needs, and Council-owned and managed provision. The private sector includes older people's residential care as well as accommodation for adults with physical, sensory and learning disabilities who are unable to live independently. Halton Borough Council's provision includes four homes for older people, three of which offer nursing care.

In addition there is a wide range of supported living arrangements across the borough, where residents live semi-independent lives.

The majority of residents across these settings have distinct vulnerabilities which have required risk assessment and co-ordinated management over the course of the pandemic.

At the start of the pandemic measures were taken to 'lockdown' services as far as possible. This took account of the fact that little was known about transmission of the virus and testing and vaccinations were not yet available. For many this meant they were closed to admission and closed to visitors. The difficulties this posed were multiple, impacting on the availability of new residential placements across the borough, affecting people's social contact and personal interaction with loved ones, and also affecting the sustainability of provision where income was lost to vacancies. For the latter issue the Council used Government funding to block-book vacant beds where necessary.

All settings worked diligently to prevent outbreaks, though some were inevitable given the extent of the spread of the virus. In particular, the toll this has taken on staff has not been overlooked and employee wellbeing programmes have been developed and promoted on a national, regional and local basis. One of the key reported factors to sustaining staff wellbeing has been the support that staff have offered to each other through this time, and their hard work and commitment is recognised and applauded.

Change has been rapid, particularly in the first six to nine months of the pandemic. Guidance and policy has undergone frequent alteration, both on a national basis and locally.

The availability and effective use of testing and Personal Protective Equipment (PPE) has become a mainstay of day-to-day working but rallying to set this up has required dedicated procurement and distribution resource, effective allocation of funding, a safe programme of training being rolled out and ongoing monitoring, recording and action to mitigate hazards.

Resident wellbeing

Adults within residential care homes were some of the hardest hit by the pandemic. They were isolated from their family and friends and from the communities in which they live. Consideration of their mental and emotional state was just one part of keeping them well over this period.

The Council recommended and supported person-centred Covid19 care plans, as separate to normal care plans. These took into account the social and emotional needs of residents alongside their care and support needs associated with health, mobility and levels of independence. These were updated on a regular basis to align to the changing restrictions across the country.

Ongoing contact with family and friends involved new and innovative ways of working and technology played a massive part in maintaining social interaction.

Backed by an NHS funding stream to provide laptops to care homes, the Council supported implementation of virtual visits across Halton. Information, advice and ideas were shared across the sector to ensure that all residents had the opportunity to see their loved ones.

As soon as it was allowable homes made provisions to welcome visitors, and over the summer of 2020 some of this was mainly managed as outdoors visits. Homes utilised the space available to them to put up gazebos and other shelters and their designated Activity Co-ordinators turned their attentions to organising safe visits on an appointment basis. Homes took a wide-ranging approach to visiting, dependent on the facilities available to them and the changing restrictions – window visits, drive-by visits, social distancing and use of barriers and pods were adopted.

Where possible, get-togethers were managed in small groups in large space to ensure that social distancing measures were in place. Across Halton we also had local schools reach out to care homes to send videos of choirs and story reading.

Technology was also used effectively to link with other professionals outside of the home, such as GPs, district nursing teams, social workers and others. Many homes adopted weekly virtual 'ward rounds' focussing in on those residents with the greatest needs and looking at care plans as part of a multi-disciplinary team.



A day in the Life – Care Worker

Halton Borough Council owns and operates four residential care homes in the borough, two of which also provide nursing care - Madeline McKenna Court Care Home, Millbrow Nursing Care Home, St Luke's Nursing Home, St Patricks Nursing Home.

Our homes provide care for older people with a range of needs, including people who may be physically frail and need support with everyday tasks or people living with complex conditions such as dementia. The role of the care worker in a care home is a diverse one – with different challenges and rewards each day. **Liz, a care worker from St Luke's Nursing Home** in Runcorn, gives an insight into her role and how the care home staff have managed through the peak COVID pandemic response.

“As a care worker we can be directly involved in all aspects of the daily life of our residents, depending on what their specific needs are. This can include waking, dressing and assisting them at meal times and with their personal care. I help residents take part in social activities and I enjoy spending time chatting with our residents as I work, to get to know them better. We all work hard to make sure that what we do is personal and specific to that person.

I work alongside nurses and a clinical lead for the home, and let them know if there have been any changes to our resident's health so that they can be investigated further. When there are meetings with health colleagues and social workers about the wellbeing of a resident the care workers are asked to contribute to make sure that as much as possible is known about the person and the best ways to help them.

A big part of our role is providing social and emotional support to our residents, particularly through the peak of the Covid pandemic, when outside social activities and family visits had to be stopped.

When Covid hit it was really hard. Everyone was fearful because there were so many unknowns. At first it was very difficult as residents didn't always understand why family could not visit and the way we did things had to change. As time went by we became more confident in our new ways of working and we settled into new routines. We became family to many of our residents and we all supported each other. Having designated 'clean units' where there were zero covid cases was hard, as it meant that not only were residents separated from each other, but also staff. The way we moved around the building changed to maintain 'clean zones' and it was hard seeing the impact on staff working in the Covid units from afar. Our nurse and clinical lead in the home were brilliant at supporting us with the ever changing guidance.

Although working through Covid is very stressful – physically and emotionally, we knew we had the support of the public. They showed us! We had bikers pull into the car park and rev their engines in support of the staff, we had local retailers drop of food and treats and members of the public made face masks for us that had adaptations to make them comfortable to wear for long spells. I feel that the way the staff supported each other, and the residents was truly amazing given what we were (and still are!) going through”.

New ways of working

Rapid change has been a key feature of working through the pandemic and at the start of the first lockdown period everyone was in unknown territory. Across Adult Social Care contingency and business continuity plans were made and pragmatic decision taken around service operational needs.

For care homes in particular infection prevention and control measures were adopted as a staple requirement to day-to-day working. Making the move from pre-pandemic working practices which offered a degree of flexibility and informality to strict pandemic rules and regimes has involved an ongoing shift in mindset and routines.

Access to PPE was scarce to start with and a programme of mutual aid was supported by the Council where all homes, irrespective of ownership, lent out spare stock to have it replaced once other homes' orders came in. Staff were training in safe donning and doffing (putting on and taking off) of PPE and best practice information was regularly shared and updated on every aspect of hygiene and protection from cleaning schedules to hand washing; secure movement around buildings to management of rotas to minimised cross-contamination across the shift patterns. A whole host of policy and procedure documents were drawn up to maintain practices, as well as monitoring tools and checklists to measures effective implementation.

Once regular testing became available care homes established practices to ensure the orderly capture of records, and again, routines have become well-established.

Staff rose to unprecedented challenges while keeping in mind that their work setting is also a home to the residents who live there.



Care Home Resilience Plan

On the 14th May 2020, Local Authority Leaders received a letter from Helen Whately MP, Minister of State for Care, in which she asked that all local authorities review or put in place a care home support plan, drawing on local resilience and business continuity plans.

From the outbreak of the pandemic, extensive work had already been taking place across the health and social care sector in Halton, to ensure our response to the crisis was robust and effective. In respect to the Care Home sector, this work had already been collated into Halton's overarching Adult Care Home Resilience Plan; this plan was therefore reviewed and updated in light of the letter received.

This plan was being used in conjunction with each Care Home's individual Business Continuity Plan and the overarching Halton Adult Social Care Business Continuity Plan, to ensure that our response to the pandemic is robust and effective. It was updated on an ongoing basis to reflect when processes changed or additional support needed to be implemented.

The Resilience Plan addresses the following areas and outlines in detail the support that is in place:

- Infection Prevention and Control (in. Training in Infection Control, Personal Protection Equipment etc.)
- NHS Clinical Support
- Testing
- Oversight and Compliance
- Workforce
- Funding

The Care Home Resilience working group which took forward the plans involved representation from the Council, the health sector and other partners, such as care providers and the voluntary sector.

One practical outcomes of the Plan has been to start to develop a programme of 'lessons learned' conversations with care homes. These are to involve reflections on infection outbreaks and the learning that has taken place as a result. Anonymised case studies are being shared back across the sector so that further considerations can be adopted into different settings.

The Care Home Resilience Group met monthly (up to the April 2021) after which elements of the Plan were adopted under other areas of activity. An overview is being maintained to monitor further pandemic developments and local outbreaks.

Maintaining Service Quality

The Council's Quality Assurance team work with commissioned provider of adult social care services to monitor standards and ensure adherence to contractual arrangements. Maintaining good practice standards, centred on the individual needs of the people who use services, has remained central to provision across Halton while contending with the pandemic.

At the start of the first lockdown services, and care homes in particular, told us they were overwhelmed with information and contact from different authorities across the health and social care system. Quality Assurance contacted different teams and pulled all communication into one daily email. This has been maintained throughout the year so that all key messages are co-ordinated from one source.

In addition, the Quality Assurance team set up daily 'welfare' calls with care homes, to check everyone remained well, whether they had any issues with staffing levels, their PPE stocks, any queries they had around current guidance and much more. These calls were stepped down at the end of the first lockdown and stepped up again as further restrictions came into play or where homes had an outbreak of Covid19.

Other expertise across the system were called into support as help was needed, including collaboration with Infection Prevention and Control (IPC), Public Health, District Nursing, GPs aligned to individual homes and other as required.



Additional financial support

As part of Government measures to support the communities across the country, Halton Borough Council distributed targeted funds that fall outside of the annual Adult Social Care budget. This included allocation of an Infection Control Fund, a Rapid Testing Fund, a Workforce Capacity Grant and a Covid Winter Grant Fund. The first three were primarily pushed towards sustaining the provision of direct care services while the latter provided support specific to those families and individual impacted by food and energy poverty.

Infection Control Fund (ICF)

The ICF was announced in May 2020, with two rounds of funding being made available through to March 2021. The purpose of this fund was to support the implementation of infection control measures advised in the Care Home Support Package, particularly the restriction of movement of workers between different care settings and full payment for staff who are required to self-isolate. The grant was allocated to Local Authorities based on the number of Care Quality Commission (CQC) registered beds there are within the locality, and payment of the grant was subject to certain conditions and assurances.

In line with Government guidance, the majority of the overall grant allocation for Halton was paid directly to care homes in the borough (75% in Round 1 and 80% in Round 2). The Local Authority had discretion to determine use of the remaining proportion and for this wider workforce support measures were funded, particularly within the Domiciliary Care and Supporting Living sector.

Reports back from care homes indicated that they used the funds to:

- Introduce measures to isolate residents within their own care homes
- Undertake actions to restrict staff movement within care homes e.g. paying for additional staff
- Paying staff full wages while isolating following a positive test
- Increased infection control training
- Additional cleaning (staff costs)
- Costs of alternative transport to minimise social contact
- Increased Covid testing
- Cover recruitment and induction costs
- On-site accommodation for staff

Additional equipment; such as uniforms, laptops/tablets.



Halton's total allocation for Round 1 of the ICF was **£1,008,396** and for Round 2 was **£957,055**.

Rapid Testing Fund (RTF)

This grant was only published on 15th January 2021, the main purpose of which was to support additional rapid testing of staff in care homes, and to support visiting professionals and enable indoors, close contact visiting where possible.

This grant had separate conditions to the original ICF and extension to the ICF outlined above and was specifically intended to support additional rapid (Lateral Flow Device) testing.

Against the grant conditions, 80% of the grant was provided directly to care homes, including residential drug and alcohol services (allocation has been based on the number of CQC registered beds). The Local Authorities deployed the remaining 20% to support the wider care sector to implement increased LFD testing. Providers are able to use the funding to:

- Pay for staff costs associated with training and carrying out LFD testing
- Costs associated with recruiting staff to facilitate increased testing
- Costs associated with the creation of a separate testing area where staff and visitors can be tested and wait for their result. This includes the cost of reduced occupancy where this is required to convert a bedroom into a testing area, but only if this is the only option available to the care home
- Costs associated with disposal of LFD tests and testing equipment

Halton's total allocation for the RTF up to 31 March 2021 was **£278,455**.

Workforce Capacity Grant (WCG)

This was made available from 16th January 2020 to enable providers to meet the workforce challenges associated with the pandemic.

The funding was distributed to enable measures to supplement and strengthen the staffing capacity within Adult Social Care to ensure that safe and continuous care was achieved to the following outcomes:

- maintain care provision and continuity of care for recipients where pressing workforce shortages may put this at risk
- support providers to restrict staff movement between care homes and other care settings in all but exceptional circumstances, which is critical for managing the risk of outbreaks and infection in care homes
- support safe and timely hospital discharges to a range of care environments including domiciliary care, to prevent or address delays as a result of workforce shortages
- enable care providers to care for new service users where need arises

Halton's allocation was **£319,566** up to 31 March 2002, and has been based on the standard Adult Social Care Relative Needs Formula (RNF).

Covid Winter Grant Fund

£700,000 was distributed to those with assessed need across Halton, including those known to Adult Social Care Services, those known to Children and Family Services and those who had not previously accessed social care support. Aid took the form of the individual requirements of those accessing the fund and ranged from payment of fuel bills to purchase of warm clothing and bedding and food vouchers.



Alleviating pressure on the health system:

Transitional support beds

Early in 2020, Halton Borough Council identified the need for an urgent increase in residential care home bed capacity across the Cheshire and Merseyside region in order to meet the anticipated demand and expected peak of the COVID 19 pandemic outbreak.

In order to be able to respond and alleviate potential bed capacity issues created by Covid 19, it was agreed to refurbish and bring into operation a dis-used 60-bedroom care home, located in the North of Widnes (Lilycross Care Centre). This would provide additional short term residential care capacity and support local acute systems to manage bed flow and discharges from hospital to ensure optimal clinical care capacity during the crisis.

Many partner organisations helped in the various elements of the setup of Lilycross from project management support from LLC (Capacity Lab), Eric Wright Construction Ltd for refurbishment works, Catalyst Choices for Care Support, NHS Halton Clinical Commissioning Group (HCCG) for GP practice support, Bridgewater NHS Foundation Trust with nursing support and all local Hospital Trusts for support with adjusted discharge pathways.

The care home was leased by Halton Borough Council on an initial 6-month basis (May to October 2020), and later extended for a further 6 months, to support the local system. Care and support is provided by Catalyst Choices, a registered CQC care provider and contracted directly with Halton Borough Council.

Lilycross began admissions in May 2020 through a revised hospital discharge process and also from the community for people who required supported daily living where it could not be provided in their own home and for those who required a further period of support following being unwell due to Covid-19.

Its introduction helped ensure there was enough bed capacity in areas across the Cheshire and Merseyside region throughout 2020-21 and to mitigate the impact of Covid 19 on the hospital discharge and residential systems across the region.



Lilycross has remained open throughout 2021 with NHS Halton CCG taking over the commissioning of the contract from HBC in May 2021 for a further temporary period to last in to spring 2022. The facility is therefore currently still being used to support the Cheshire & Merseyside region in terms of any peaks in demand until the contract ends.

Domiciliary Care

One of the main drivers over the past 10-15 years, both locally and nationally, has been to offer support to people's independence in their own home for as long a period as is possible. One of the most effective ways to do this is through a domiciliary care agency.

In 2017, Halton Council re-commissioned its domiciliary care provision for the borough, which led to there being one main provider - Premier Care Limited.

At the start of the pandemic, and as time moved on, demand for domiciliary care increased. This was partially to facilitate timely hospital discharge, as well as reducing the use of short-term rehabilitation bed facilities, but also as a result of informal care interruptions (for example, where carers themselves had to isolate or where they were under restrictions around households mixing or travel beyond their immediate area). Coupled with this is an ongoing increase in demand for social care as a result of an ageing population.

Care at home delivered by Premier Care

4,700 hours per week
(3,800 pre-COVID)

10,300 calls per week

To alleviate the pressures the Council worked with Premier Care to commission an **additional 500 hours** of domiciliary care per week. The number of people waiting for a domiciliary care package went into single figures with people waiting a few days at most. This was significant achievement in comparison to some neighbouring authorities.

Premier Care recruited additional staff from the local area and supported all staff by introducing mileage payments, providing full pay when staff were unable to work due to COVID and offering additional paid COVID training.

The joint work between the Council and Premier Care during the pandemic led to the creation of a Rapid Response Team, which facilitated:

- Regular meetings;
- Speedy discharges from hospital;
- The ability to react to the changing needs of local people in receipt of care;
- The ability to pick up 15-20 new packages of care per week;
- The elimination of a waiting list for community support within Halton.

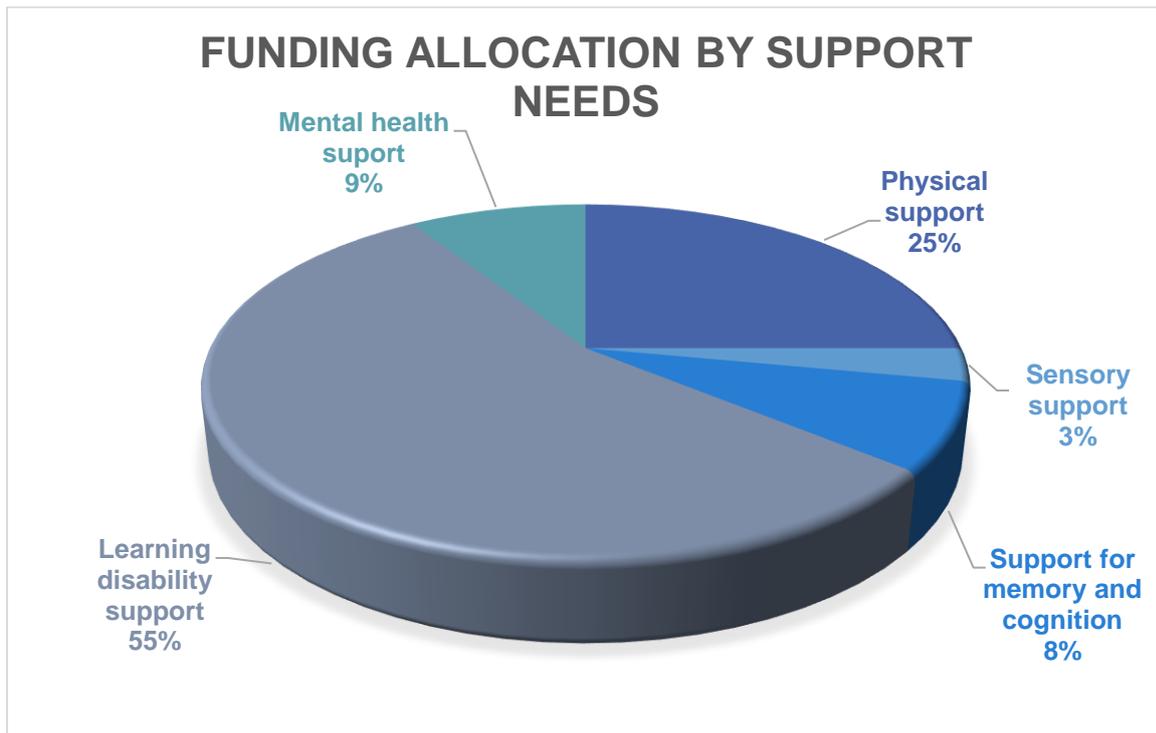
As we move forward, the focus will continue to be on a 'Home First' approach, enabling people to leave hospital (when safe and appropriate) and continue their care and assessment at home. This is in-line with the aims of the ongoing local Transforming Domiciliary Care Programme and the national agenda.

Facts & Figures

Adult social care spend

The total expenditure allocated against Adult Social Care during 2020-21 was £48.4 million, which was split across different service user group needs as illustrated below:

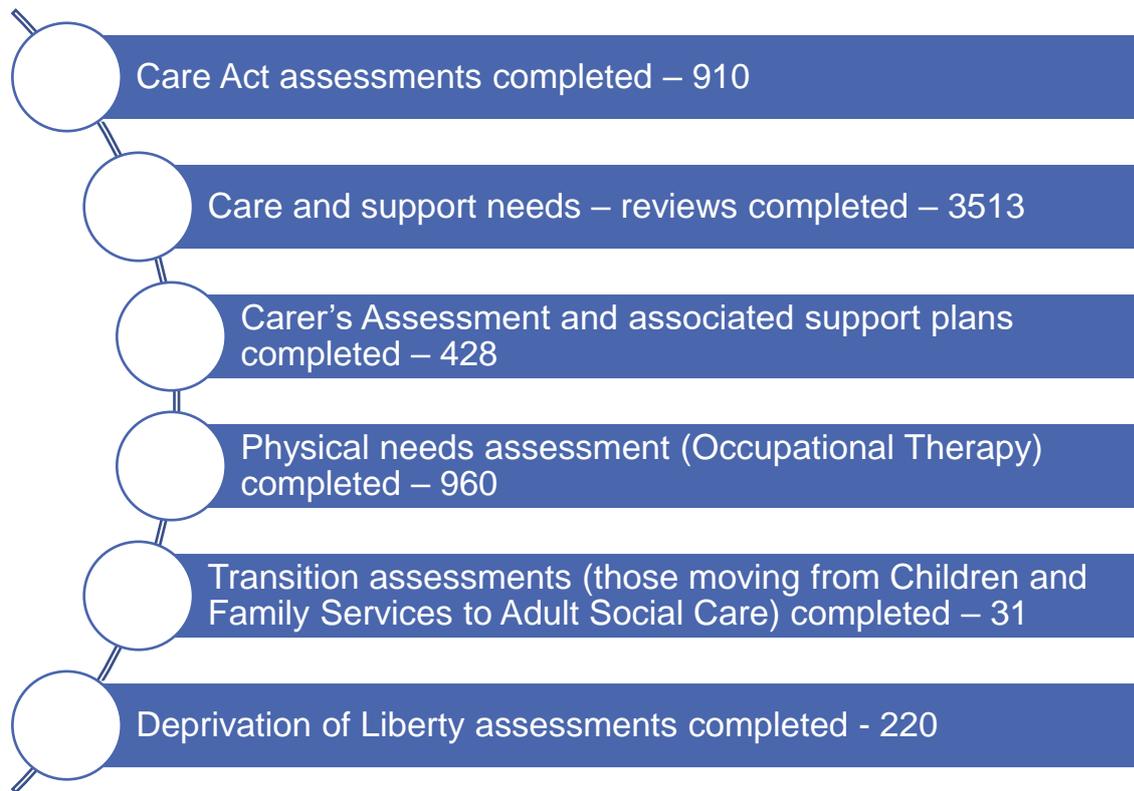
A total of 4,119 people were supported in 2020/21



As part of a national data requirement Halton Borough Council usually undertakes an annual survey across Adult Social Care to capture feedback from services users in receipt of long-term services. The survey looks at people's experiences of care and the impact on their quality of life. This was cancelled on a national level for 2020/21 for Local Authorities to focus on the immediate needs of the pandemic.

This report usually contains feedback from the Adult Social Care Survey. This year, instead, we would like to highlight the level of support that we have maintained and stepped up to meet the emerging needs of the pandemic.

Assessment of needs 2020-21:



Service delivery data

Supported Living:

As at March 2021 – 381 people with learning disabilities out of 424 known to Adult Social Care were accommodated in supported living. Supported living provides these service users with the opportunity to live as part of their immediate community and to have or retain some level of independence.

Equipment and minor adaptation delivered within 7-days

Quarter 1 – April to June 2020	78%
Quarter 2 – July to September 2020	70%
Quarter 3 – October to December 2020	76%
Quarter 4 – January to March 2021	72%

Over 140,000 telecare activations
(telecare incorporates the Life Line
personal alarm service as well as
other remote response equipment)

Number of Direct Payments

– 592 a month

Direct Payments allow people the
flexibility to purchase their own care and
support services



Capacity and demand – Number of people referred to intermediate care:

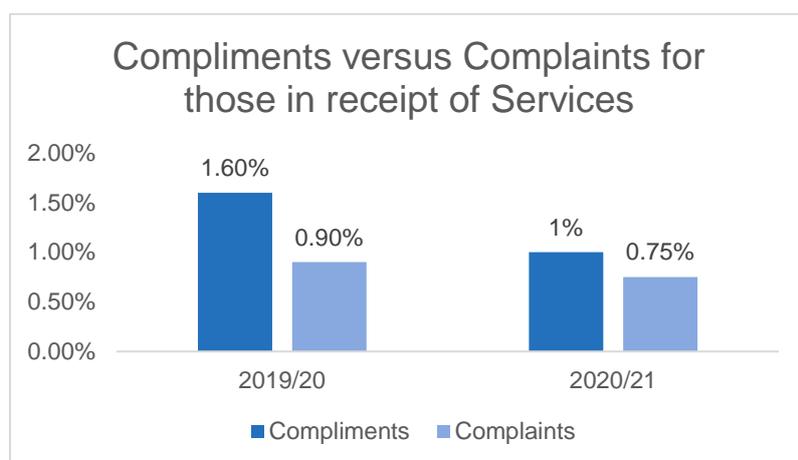
Period	2019/20	2020/21
Quarter 1 – April to June 2020	262	449
Quarter 2 – July to September 2020	262	358
Quarter 3 – October to December 2020	196	360
Quarter 4 – January to March 2021	292	355

Intermediate care services support timely hospital discharge ensuring that people can either return home with the right short-term or ongoing support, can move into short-term transitional and rehabilitation care before returning home or are moved into an appropriate residential placement.

Complaints and compliments

One of the measures we use to consider quality across Adult Social Care is the feedback we receive from the public.

Proportionately the Council receives limited feedback from this mechanism, as seen in the table below which compares last year's figures to this year's. It does however allow us to understand, in detail, some of the areas we need to improve and some of the procedures and arrangements which are working well.



Compliments, and in particular praise for the way team members have supported an individual, are always passed on to those involved in delivering services.

Complaints are recorded systematically so that we can further examine where learning might take place or where working practices might need to be altered.

This involves looking at the service area under which the complaint comes:

Category of complaint by service area	2019-20	2020-21
Care Management	5	2
HBC Services	2	0
Home Care (Domiciliary Care)	12	13
Hospital	0	1
Other provision	4	1
Residential/nursing care	10	12
Supported Living (where people live in self-contained accommodation with support provided where needed, e.g. Independent Living)	6	2
Total	39	31

As well as what type of issue is being encountered:

Category of complaint by service type	2019-20	2020-21
Assessment and Care Planning	10	15
Assessment and Care Planning: awaiting POC	2	0
Charging	7	3
Direct Payments	0	1
Disabled Facilities Grant	1	0
Inconsistency of call times	4	1
Inconsistency of care staff	3	1
Late calls	1	0
Other	9	10
Safeguarding	1	0
Transition from Children's to Adult services	0	0
Transport (including Blue Badge)	1	0
Total	39	31

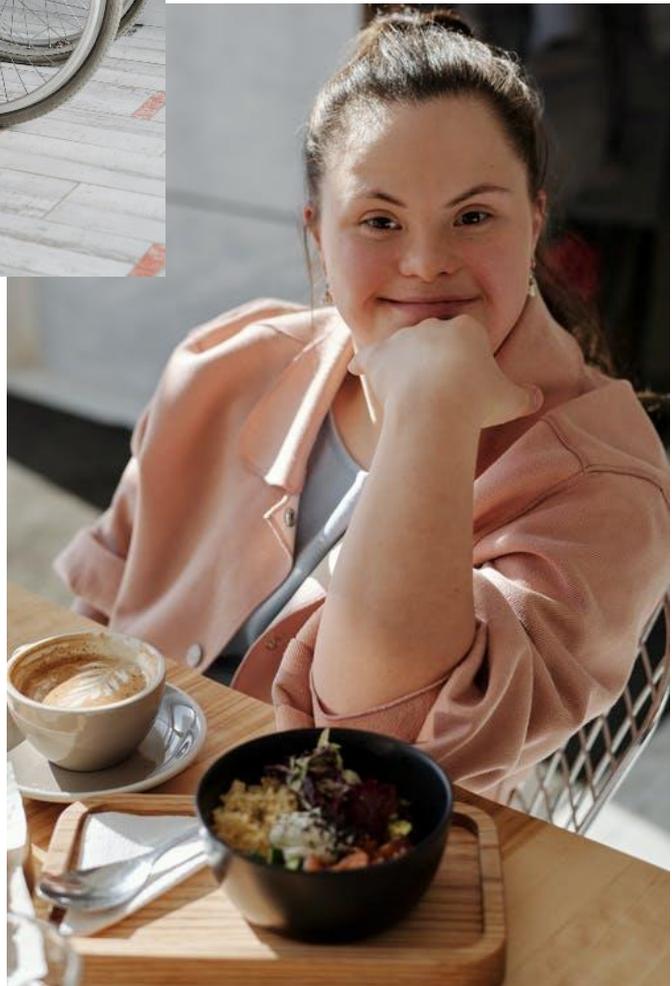
Extracts from compliments received

Thanks to the social care team for all of their help in dealing with her mum. She said that following her call this morning to Complex Care Runcorn a lovely gentleman has been out to visit her mum today and has sorted things out for her.

Following my call today praise was given to the lifeline wardens, who he believes saved his life. He fell and went into a diabetic coma, and our response team arranged for an ambulance. He is extremely grateful for all our help and feels very safe having the service in place.

I would like to offer my thanks to K at Halton Direct Link. She dealt with my initial query regarding the most recent invoice I had received for G's Care Package, in a very professional and caring way, swiftly linking me in with the key personnel who could progress the query for me. She also assisted me in making the amended payment at the end of the process. She is a credit to your organisation.

Mrs M has called to pass on her thanks to the two wardens who came out to assist her a few weeks ago when she fell and broke her wrist. She is really grateful for their help and would appreciate if you could let them know please.



Contact us

We welcome your feedback on this report. You can let us know what you think by emailing ssdcustomercare@halton.gov.uk or writing to:

Policy, Performance & Customer Care
Runcorn Town Hall
Heath Road
Runcorn
WA7 5TD

If you require assistance in relation to adult social care, please call 0151 907 8306.

There is also a range of information available on our website:

<https://www3.halton.gov.uk/Pages/adultsocialcare/AdultSocialCare.aspx>

For general Council enquiries, please call the contact centre on 0303 333 4300 or call into one of the Halton Direct Links (HDL – one-stop-shops):

Halton Lea HDL
Rutland House
Runcorn
WA7 2ES

Widnes HDL
Brook Street
Widnes
WA8 6NB