# Health Policy and Performance Board Annual Report April 2013 - March 2014



As Chair of the Health Policy and Performance Board (PPB), I am conscious of the massive changes that have taken place in how we receive our Health Services over the past few years. The remit of the Board is to scrutinise the Health and Social Care Services provided to the residents of the Borough; we also have a responsibility to scrutinise Hospital Services, including Mental Health Services.

We receive reports on a regular basis from all those who provide services to our residents and as a Board we take the opportunity to scrutinise the services provided by such providers as Warrington and Halton Hospitals Foundation NHS Trust, St Helens and Knowsley Teaching Hospitals NHS Trust and the 5 Borough's Partnership.

We take our responsibilities very seriously and as such choose at least one Scrutiny Topic to focus on each Municipal year.

This year, our Scrutiny Topic was focused on Mental Health. We undertook this work with a view that the outcome would be to promote more emphasis on prevention and more importantly we were looking to help develop a policy of 'No Stigma for Mental Health Illness' within Halton.

In order to progress this work effectively, we formed a joint scrutiny group looking into Mental Health Services i.e. the Health PPB and Children, Young People and Families PPB; two Policy Boards working successfully together.

My appreciation for all the hard work done on this Topic must go to Councillors Joan Lowe, Mark Dennett, Geoff Logan, Sandra Baker, Pamela Wallace, Margaret Horabin, Pauline Sinnott, Geoff Zygadllo and Kath Loftus. My thanks also goes to Pauline Hignett, from the Children, Young People and Families PPB, who joined

myself and Margaret Horabin in visiting the schools where we provide education services for Children with Autism related problems.

A big thank you must also go to Emma Bragger, our Policy Officer on the topic group, for all the work and many extra hours spent on this project and I would also like to extend my thanks to Partners for their time and for the contributions they made to this work.

I would like to extend my thanks to NHS Halton Clinical Commissioning Group too, for their support and involvement with the Health PPB this year and to Dave Sweeney, Operational Director Integration for his support on the Mental Health Scrutiny Topic.

As usual, 2013/14 has proved to have been a very busy, challenging and interesting time for us all.

Cllr Ellen Cargill, Chair

### Health Policy and Performance Board Membership and Responsibility

### The Board:

Councillor Ellen Cargill (Chairman) Councillor Joan Lowe (Vice-Chairman) Councillor Sandra Baker Councillor Mark Dennett Councillor Margaret Horabin Councillor Chris Loftus Councillor Chris Loftus Councillor Geoff Zygadllo Councillor Valerie Hill Councillor Miriam Hodge Councillor Pauline Sinnott Councillor Pamela Wallace

During 2013/14, John Chiocchi was Halton Healthwatch's co-opted representation on the Board and we would like to thank John for his valuable contribution. John has now left the Board and has been replaced by Tom Baker.

The Lead Officer for the Board is Sue Wallace-Bonner, Operational Director, Prevention and Assessment - Communities Directorate.

### **Responsibility:**

The primary responsibility of the Board is to focus on the work of the Council and its Partners, in seeking to improve health in the Borough. This is achieved by scrutinising progress against the aims and objectives outlined in the Council's Corporate Plan in relation to the Health priority.

The Board have met five times in 2013/14. Minutes of the meetings can be found on the <u>Halton Borough Council website</u>.

This report summarises some of the key pieces of work the Board have been involved in during 2013/14.

# **GOVERNMENT POLICY- NHS AND SOCIAL CARE REFORM**

### NHS Halton Clinical Commissioning Group (CCG)

As part of NHS Halton CCG's authorisation requirements, Simon Banks, Chief Officer of the CCG, presented the Board with the CCG's Integrated Commissioning Strategy for 2013-15 and their Operational Delivery Plan for 2013-14.

Simon highlighted for the Board that the Strategy and associated Operational Plan was in line with the planning guidance published by NHS England in *Everyone Counts: Planning for Patients 2013/14* (December 2012), the *NHS Outcomes Framework* and the *NHS Mandate*, as well as the CCG's local priorities which had been developed via engagement with local people and GP member practices.

### **Francis Inquiry**

The Board were presented with details of the key findings and recommendations from the second Francis Inquiry (*Francis 2 High Level Enquiry*) following on from the first published in 2009, which detailed the appalling suffering of many patients at the Mid Staffordshire Hospital. This was caused by a serious failure on the part of the Provider Trust Board who did not listen sufficiently to its patients and staff or ensure the correction of deficiencies brought to the Trust's attention.

The Board were provided with details of the actions being delivered locally to ensure the quality and safety of health care provision for our local population as a result of Francis and the Board have been receiving subsequent update reports in relation to local activity.

### Social Care Bill

The Care Bill outlines the most significant change in Adult Social Care in decades with changes to underpinning legislation, eligibility criteria, funding, changes to the status of Adult Safeguarding and a host of other associated areas which are likely to impact across all Council Portfolios. New requirements, duties and responsibilities will be implemented from April 2015 with full implementation planned for April 2016.

The Board have been kept informed of developments so far and will continue to be kept informed of developments/implications on an on-going basis.

### Sector Led Improvement

As the Government have decided to reduce the burden of nationally imposed inspection and assessment regimes, such as the Care Quality Commission's inspection of Adult Social Care and the Comprehensive Area Assessment, a new approach to improvement, being overseen by the Local Government Association and with the support of Government, has been developed; details of which were presented to the Board in September - Sector Led Improvement (SLI).

Details were also provided about how SLI was being specifically developed in the Northwest (NW) region. The approach being adopted in the NW celebrates success and excellence, sharing best practice and provides support and / or intervention from within the sector where needed.

An SLI Local Authority Analysis has recently been undertaken across the North West region and it was reported to the Board that in Halton's Local Authority report, no risks were identified. The Board were pleased to hear that areas of good practice had been noted which includes a good service balance with low reliance on residential care. Halton were also found to have made good progress on personalisation and has a comprehensive approach to early response for service users.

#### Care Quality Commission (CQC) – Inspection Processes

Over the past twelve months, the Board have received updates in relation to the changes undertaken by CQC in how they inspect acute trusts, mental health hospitals and community services.

The new inspection regime involves significantly larger inspection teams which will include clinical and other experts, and trained members of the public.

The teams will spend longer inspecting hospitals and community locations.

In November 2013, the Care Quality Commission (CQC) paid an announced visit to the 5Boroughs Partnership NHS Foundation Trust, to examine the operation and use of the Mental Health Act 1983.

There were some positive overall findings from the inspection which included Community support being described as very good and the ward environments having improved considerably.

There were some issues highlighted for consideration and action and these are being progressed and the Board will be kept informed of how these develop.

# SERVICES

### **Urgent Care**

As part of an extensive consultation exercise, in June 2013 Members were presented with details of the options being considered to develop a local response to Urgent Care with Halton. Three options were presented to the Board, with the option of the creation of an additional Walk in Centre plus a Clinical Decision Unit at Halton Hospital Site and the maintenance and expansion of services at the Walk in Centre at Widnes being supported.

It is anticipated that the development of Urgent Care facilities in Halton will provide the following benefits:-

- Equity of access across Runcorn and Widnes;
- More clinically appropriate services available within the community; and
- A reduction in the overall admission rates through the development of alternative local provision.

It is anticipated that the new facility will be open from September 2014 and the Board is watching this development with keen interest.

### 5Boroughs Partnership NHS Foundation Trust – Service Redesign

In September 2013, the Board received a presentation from the 5 Boroughs Partnership updating the Board with regards to the local progress being made in implementing two service developments within the Trust: the Later Life and Memory Service (LLAMS) and the Acute Care Pathway (ACP), since initial details of the developments were presented to the Board back in January 2012.

The ACP was developed specifically for people with significant mental illnesses, and arose because of concerns expressed by patients and carers about the transfers of care between the complex range of community services (inc. GPs) and the hospital. As a result of these concerns, the 5Boroughs took the opportunity to fully review, with their partners, the structure and type of service they deliver, with the ACP as the final outcome.

The LLAMS service is for all older people with memory problems, and provides specialist assessments, treatment and support. This, too, has followed from an internal review of services and subsequent redesign, in full partnership with key stakeholders, including Halton Borough Council (HBC).

### **Complex Care**

On the 1st April 2013, HBC and NHS Halton CCG commenced a Joint Working Agreement for the management of a Pooled Budget between the two organisations

covering spend on service packages in areas such as Adult Social Care, Equipment Services, Intermediate Care and Continuing Healthcare.

The Board were provided with details outlining how the pooling of these funds will ensure high quality, safe, efficient and effective health and social care services which will be commissioned and provided in the most appropriate and timely way, in order to meet the health and social care needs of people in the Borough.

The pooled budget for 2013/14 is approximately £32million and the Board will continue to receive updates in relation to the effects the pooling of resources are having on the outcomes for Service Users.

# POLICY

### Falls Strategy 2013 - 2018

Following on from the extensive work undertaken by the Falls Scrutiny topic group in 2012/13, in September 2013 HBC's and NHS Halton's CCG joint Falls Strategy was presented to the Board.

Falls continues to be a particular risk in Halton (1 of the 5 priorities identified with Halton's Health and Wellbeing Strategy) due to higher levels of falls in older people, as well as higher levels of hospital admissions due to falls.

The Strategy aims to identify the areas that need to improve in Halton to reduce the number of falls and as such contains a comprehensive action plan to ensure that the Strategy is appropriately implemented.

### Safer Halton Partnership Drug Strategy 2014 – 2018

The National Drug Strategy 2010 changed the focus of drug service delivery from maintenance of individual's dependent misusing drugs to enabling and promoting recovery.

Following extensive consultation with a range of partner agencies, service users, carer groups and voluntary agencies, the Board were presented with Halton's Drug Strategy which provides a focus on Halton's strategic objectives and priorities linking them to a drugs service action plan that will become the focus of the work of the Substance Misuse task group with Halton.

### Halton – A Place without Loneliness

HBC, for many years, has been at the forefront of initiatives to prevent and alleviate social isolation. However, it was clear that a focus on social isolation alone may not combat the pain of loneliness felt by so many older citizens.

As a result, extensive work has taken place to develop the strategic approach to the prevention of loneliness in Halton; the results of such being presented to the Board in November 2013.

The Board was very pleased to be able to endorse this approach and it was noted that HBC would be one of the first Local Authorities to adopt a strategic approach to combating loneliness.

### Halton Dementia Strategy

There can be no doubt about the current and the future challenge posed by dementia.

The revised local dementia strategy, 'Living well with dementia in Halton' looks at the progress that has been made since the original strategy was published in 2010, as well as identifying some key actions that need to be completed over the next 5 years.

The Board endorsed the implementation plan contained within the Strategy which outlines the key actions for future development in improving the outcomes for people with a dementia diagnosis, their families and carers.

### Mental Health and Wellbeing Commissioning Strategy for Halton

Mental health problems are the single largest cause of ill health and disability in the Borough. Halton's Health and Wellbeing Board has recognised this by including "Prevention and early detection of mental health conditions" as one of its 5 priorities.

The strategy, Halton's first integrated strategy for Mental Health and Wellbeing in the Borough bringing together commissioning intentions of Public Health, the CCG, Children's Services and Adult Social Care, presented to the Board adopts a life course approach which recognises that the foundations for lifelong wellbeing are already being laid down before birth, and that there is much that can be done to protect and promote wellbeing and resilience through early years, into adulthood and then on into a healthy old age.

The Board recognised that only a sustained approach across the life course will equip Halton to meet the social economic and environmental challenges it faces and deliver the short and long term benefits needed.

### Housing Adaptation Policy

As a result of an increase in ramp requests raised with the Contact Centre by residents who had independently purchased mobility scooters, where an Initial Assessment Team assessment of access to the residential property had not been undertaken, in November the Board received a report and associated proposed amendments to the ramps section of the Housing Adaptation Policy.

The revisions now provide clarification on eligibility for ramp installation and make it easier for the Contact Centre to make initial decisions on people's potential eligibility.

### **SCRUTINY REVIEWS**

### Mental Health

Halton identifies good mental health as a priority and as such sought to examine the breadth and quality of mental health promotion and prevention services and resources available locally, with a view to developing a joint intergenerational prevention and promotion campaign to tackle mental health stigma locally. The scrutiny topic was commissioned by the Health Policy and Performance Board and representatives from the Children, Young People and Families PPB. Mental health promotion was a specific area selected as there were already significant pieces of work being undertaken, in relation to mental health treatment services. These included a full review of Child and Adolescent Mental Health Services (CAMHS) provision, development of an Acute Care Pathway for adults and development of Later Life and Memory Services (LLAMS) as part of the Dementia Strategy.

National and local evidence demonstrates that failure to ensure that appropriate services to support emotional and mental health and wellbeing is likely to impact negatively on outcomes and life chances. Failure to provide effective mental health prevention and promotion services across the life course could result in an increase in the need for specialist services thus leading to potentially increased costs to the Council.

The Topic Group were instrumental in the development of a local anti-stigma campaign, Like Minds (<u>http://www.haltonlikeminds.co.uk/</u>) which takes the stories of local people's journey through mental health, providing links to a range of local support services. The campaign was launched in October 2013 and the campaign resources are now available for use by any organisation to use at events or meetings, to facilitate debate around mental health.

# PERFORMANCE

During the course of the year the Board received priority based quarterly monitoring reports and was provided with information on progress in achieving targets contained within the Sustainable Community Strategy for Halton.

Other examples of Performance related information reported to the Board included:

- Provider Quality Accounts;
- Adult Social Care Annual Report 2012/13;
- Adult Social Care Customer Care Annual Report 2012/13; and
- Public Health Annual Report 2012.

# WORK TOPICS FOR 2014/15:

### Care at Home Provision in Halton

As people get older, they are increasingly likely to need care at home.

In 2010/11, nationally an estimated 543,000 service users received home care of which 81 percent were aged 65 and over,<sup>1</sup> and as our population ages, more people will inevitably need care at home in the future.

This topic will focus on the quality of Services provided to those who are supported to live at home within Halton. It will examine the services that are already in place with a view to evaluating their effectiveness in meeting the needs of the local population. In addition, the topic group will examine the access to other services e.g. Health Services that individuals supported to live at home have.

### **Cancer Services**

It is anticipated that the Board will become involved in joint scrutiny arrangements with other Local Authorities across the North West during 2014/15, regarding proposed changes in respect of Cancer Service provision across the Region.

At the time of writing this report, the Board are still waiting for further details from the Clatterbridge Cancer Centre NHS Foundation Trusts regarding the proposals.

Report prepared by Louise Wilson, Development Manager – Urgent and Integrated Care, Communities Directorate

Email: louise.wilson@halton.gov.uk Tel: 0151 511 8861

<sup>&</sup>lt;sup>1</sup> Health and Social Care Information Centre - Community Care Statistics 2010-11: Social Services Activity Report, England (2012)