

# Health Policy and Performance Board

## Annual Report

April 2014 - March 2015



As Chairman of the Health Policy and Performance Board I am very pleased to report on the work of the Board for 2014/15.

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.

I am proud to announce that Councillor Mark Dennett a member of the Health Policy and Performance Board was selected by the Board to take on the responsibility of Mental Health Champion for Halton. Mark gave his first report to the Board in January 2015; we were very impressed with his report and pleased to hear that Mark chairs the Council's Mental Health Strategy Board.

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

This year we have scrutinised the services to older people who receive Care in their own home. We looked closely at those providing that care, received reports from various providers and also interviewed a number of our residents receiving Care at home, with their permission of course.

Regional Scrutiny of Health is a new responsibility for the Board and if there is a substantial change in the way in which Health Services are provided we have a right to be consulted and take part in the Joint Scrutiny of that service. Over the last twelve months we were involved in a Regional Scrutiny exercise with Liverpool, Sefton, Chester West and Chester, Wirral, Knowsley, St Helens and Warrington Council's, all looking at how our Cancer Treatment Services will be delivered in the near future.

Clatterbridge Hospital are extending the services to us all, a new build will be established in Liverpool City Centre, one of the new services will be a Critical Care Unit, which will be a big improvement.

The new Clatterbridge Hospital will be built next to the new Royal Hospital and close to the Liverpool University's which is a plus both for the students studying Cancer research, and staff and Patients at the new hospital.

Parking will also be free; I am pleased to say, for Visitors and Patients receiving Care in this new hospital.

A big thank you must be expressed to all members of the Halton Health Scrutiny Board for all the dedicated work done over the last year. Thanks 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.

We would also like to thank Simon Banks and his team at the NHS Halton Clinical Commissioning Group (CCG) and Sue Wallace Bonner for all the help and support given to the Board over the past year too.

*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 Marjorie Bradshaw  
Councillor Martha Lloyd Jones  
Councillor John Gerrard  
Councillor Pauline Sinnott  
Councillor Pamela Wallace

During 2014/15, Tom Baker was Halton Healthwatch's co-opted representation on the Board and we would like to thank Tom for his valuable contribution.

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 2014/15. Minutes of the meetings can be found on the [Halton Borough Council website](#).

This report summarises some of the key pieces of work the Board have been involved in during 2014/15.

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

### **Care Act**

In May 2014, the Care Bill received Royal Assent and became the Care Act 2014. Some elements come into effect from April 2015; others come into effect from April 2016.

The significance of the Care Act should not be underestimated as it replaces much of the legislation that has governed Adult Social Care since 1948.

To oversee the implementation of the Care Act in Halton, the Council have established an overarching Care Act Strategic Group chaired by Operational Director Prevention and Assessment. The strategic group in turn oversees six sub-groups each working to their own implementation plan that includes working towards completion of reviewing relevant documents, policies, considering training and workforce development, charging and cost implications as well as understanding and identifying potential risks.

In January and March 2015 the Board received detailed reports outlining progress towards implementation which provided the Board with the necessary assurances that Halton were on track with the required changes that were required by April 2015.

### **NHS Five Year Forward View**

Following the publication of the Five Year Forward View in October 2014, which sets out a vision for the future of the NHS, the Board received a report from Simon Banks, Chief Officer of NHS Halton Clinical Commissioning Group (CCG), outlining how health service needs to change over the next five years if it is to close the widening gaps in the health of the population, quality of care and the funding of services.

The Forward View has been developed by the partner organisations that deliver and oversee health and care services including NHS England, Public Health England, Monitor, Health Education England, the Care Quality Commission and the NHS Trust Development Authority. Patient groups, clinicians and independent experts also contributed to its development.

As part of the report presented, the Board was provided with details of Halton's response to the NHS led strategic view. This response will ensure that there is congruence with the CCG's 5 Year Commissioning Strategy, 2 Year Operational Plan, Halton's Better Care Fund and other initiatives that are shared with partners across the borough.

### **Primary Care Co-Commissioning**

In January 2015, the Board received a report outlining NHS England's 'Next Steps towards primary care co-commissioning'. The document presented to the Board outlines how NHS England aims to provide clarity and transparency around co-commissioning options, providing CCGs and area teams with the information and tools they need to choose and implement the right form of co-commissioning for their local health economy. The Board were provided with details as to the level of primary care co-commissioning NHS Halton CCG wished to undertake with NHS England.

## **SERVICES**

### **Community Wellbeing Practices**

The Board received an interesting update in relation to the Community Wellbeing Practices (CWP) initiative which provides a wraparound service for all 17 GP practices in the borough to ensure patients whose needs are predominantly psychosocial in origin are identified and provided with effective community based interventions.

The Board were interested to hear how the CWP initiative has continued to provide three core services for patients and the public over the last 12 months, as follows:-

- *The provision of psychosocial support* - such as life skills training, community events and a comprehensive, fully integrated social prescribing programme;
- *A community navigation service* - a holistic wellbeing assessment in conjunction with a community brokerage service to link patients to support provided by the wider voluntary, community and social enterprise sector (VCSE); and
- *Asset based community projects* - empowering patients and the public to play a lead role in designing and delivering community based activities that improve wellbeing. Working with VCSE partners the CWP initiative have empowered young people to run their own wellbeing projects linked to GP

practices, enabled patients to run their own hobby and interest groups and encouraged volunteers to play an active role in the CWP initiative as community champions.

### **Improving Access to Psychological Therapies (IAPT)**

In November 2014, the Board received a presentation from Mr Paul Campbell, Clinical Psychologist from the IAPT Service, regarding the main principles behind the service, how the service operates and current performance.

The Halton model developed, implemented and presented to the Board had been based on the Award winning Wigan service provided by the 5 Borough's Partnership. This service was recently identified as being in the top ten services in the country with regard to quality. The model used a self-referral system that improved access to talking therapies for clients and had the highest recovery rates in the North West. The Board is hopeful that this success will be replicated within Halton.

## **POLICY**

### **A strategy for General Practice services in Halton**

During 2014/15, the Board received regular reports/information regarding the development of Halton's GP Strategy, with the final Strategy being presented to the Board in March 2015.

General Practice is often described as the cornerstone of the NHS. The basic delivery model of General Practice has evolved over time but not radically changed. There have been seismic shifts and environmental pressures in health and social care in recent years that have challenged the sustainability of General Practice.

The Strategy presented to the Board recognises the challenges General Practice services face but also seeks to address them within Halton by building upon the foundations of the good work that are already in place.

The Strategy looks at how we can continue to improve the quality, capability and productivity of our General Practice services through a collaborative approach with key stakeholders and, most importantly, with our wider population.

The principle approach throughout the development of the Strategy has been about engagement with local practices, NHS England, providers and partners and the public and a range of patient groups. Initially NHS CCG worked to develop a shared understanding of the problem that needed to be solved and then worked on co-designing and co-producing what a sustainable model of General Practice should look like for Halton.

## **Commissioning Strategy for Adult of Working Age Living with Physical Disability in Halton**

In Halton the number of working age adults reporting that their activity is limited by illness or health problems is significantly higher than nationally. Projections show that numbers of people living with more than one long term condition will increase and potentially this will limit the activity of more people.

As such in September 2014, the Board received 'Choice, Control and Inclusion' the Commissioning Strategy for Adult of Working Age Living with Physical Disability in Halton. The integrated strategy brings together the commissioning intentions of Public Health, the Clinical Commissioning Group, and Adult Social Care. The Board were pleased to see how this holistic approach will strengthen informal support and through effective prevention and early intervention minimise the need for more formal care.

## **Commissioning Strategy for those living with Sensory Impairment in Halton**

Halton's ageing population means by 2020 there will be more than a 20% increase in numbers over age 65 living with hearing impairment and a similar increase for those living with visual impairment. Both are contributing factors to falls in older people and many over 65's will experience loss in both senses. 50-70% of sight loss in the older population is avoidable or treatable.

As with the above Strategy, 'SeeHear', the Commissioning Strategy for those living with Sensory Impairment takes an integrated approach to improve the quality of life for Halton residents living with sensory impairment and brings together the commissioning intentions of Public Health, the Clinical Commissioning Group, and Adult Social Care.

The holistic approach undertaken will again strengthen prevention and early intervention and help minimise the impact that people living with sensory impairment has on daily living.

## **SCRUTINY REVIEWS**

### **Care at Home Provision in Halton**

The Care at Home Provision scrutiny review focused on the quality of services provided to those who are supported to live at home within Halton. The review examined the effectiveness of a selection of social care and health services in meeting the needs of the local population.

The scrutiny group sought evidence via presentations from a number of sources that enable people to remain living well within the community and provide care at home, in addition to undertaking visits to services. Contributors to the review included those

from Sure Start to Later Life, Community Nursing, Halton Borough Council Quality Assurance Team, Lifeline/Community Warden Service, Enablement Team and Extra Care Housing.

As a result of the review the Board has made a number of recommendations, including that:-

- Adult Social Care to be consulted on/contribute to any developments in the provision of telehealth to help people maintain independence.
- The Sure Start to Later Life Service should continue to have an important role in delivering personalised wellbeing outcomes.
- The Council's Quality Assurance Team to have an increased role in market oversight, supporting quality improvements and preventing provider failure as a result of the Care Act.
- The role of staff in supporting tenants within extra care schemes to be made explicit in the contract between the provider and the prospective tenant.

### **Cancer Services**

The Transforming Cancer Care Project was established by the Clatterbridge Cancer Centre. The aim of the review was to ensure that services were delivered in the best way to improve outcomes for patients. A key issue addressed as part of the review was consideration of the geographical location of the specialist Cancer Centre on the Clatterbridge hospital site.

As outlined earlier on in this annual report a Joint Health Scrutiny Committee was established across Merseyside and Cheshire to consider the proposals. The Committee reviewed all the materials presentation and considered a number of factors including:-

- Case for change;
- Patient perspectives;
- Frontline staff perspectives;
- Financial Issues;
- Project Management; and
- Clinical Case for Change.

An analysis of responses to the formal public consultation conducted was also considered by the Committee.

As a result of the review the Committee agreed the proposals to develop a new Cancer Centre in Liverpool adjacent to the redeveloped Royal Liverpool University Hospital. The Committee also agreed that they would set up a further Joint Scrutiny Committee for Cheshire and Merseyside in order to monitor the project over the next few years.

## **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.

## **INFORMATION BRIEFING**

During 2014/15 the Board introduced an information briefing bulletin that is sent out to all Board members in advance of each of the Board meetings.

The introduction of the Information Briefing is a way of trying to manage the size of the agendas of the Board meetings better, as the Board found that many reports going to Board were only being presented for information. As such, including these reports/information now into the Information Briefing it allows the Board to focus more on areas where decisions etc. are needed.

Members have the opportunity to review the information in the briefing and return any questions, comments or concerns they wish to discuss further to Committee Services who in turn collate and forward through to the Chair of the Board for consideration and response.

Areas that have been included in the Information Briefing over the last 12 months have included:-

- Provider Quality Accounts 2013/14;
- Social Care Bill – Progress towards implementation;
- NorthWest Ambulance Service (NWAS) - 5 year plan;
- Customer Care Annual Report 2013/14; and
- Healthwatch Annual Report 2013/14.

## **WORK TOPICS FOR 2015/16:**

### **Discharge from Hospital**

Discharge planning is a routine feature of the Health and Social Care system and consists of the development of an individualised discharge plan for the patient prior to leaving hospital, with the main aim of improving a patient's outcome.

Planning for discharge helps reduce hospital length of stay and unplanned/emergency readmissions to hospital, relieves pressure on hospital beds and improves the co-ordination of services following discharge from hospital.

This topic will focus on the quality of the Discharge planning process and associated pathways to those Halton residents who have been admitted to the local Acute



Trusts for both elective and emergency care. 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.

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