

HEALTH POLICY AND PERFORMANCE BOARD

At a meeting of the Health Policy and Performance Board held on Tuesday, 9 June 2015 at Council Chamber, Runcorn Town Hall

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

Apologies for Absence: Councillors Horabin and Osborne

Absence declared on Council business: None

Officers present: L. Derbyshire, L. Gladwyn, D. Nolan, S. Wallace-Bonner and L Wilson

Also in attendance: Ms E Alcock, Mr S Banks, Mr D Chow, Ms J Snodden and Dr D Wilson (NHS Halton CCG), Ms D Evans and Ms J Tudor (Bridgwater NHS Trust) and Ms S Doyle and Ms C McNally (UCC).

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

		<i>Action</i>
HEA1	MINUTES	
	The Minutes of the meeting held 10 March 2015 having been printed and circulated were signed as a correct record.	
HEA2	PUBLIC QUESTION TIME	
	The Board was advised that no public questions had been received.	
HEA3	HEALTH AND WELLBEING MINUTES	
	The Minutes of the Health and Wellbeing Board of its meeting held on 11 March 2015 were submitted to the Board for information.	
	HWB44 – The Board noted that Widnes Vikings had received recognition for its work with the community and had received the Super League Cup 2014 award. In this respect, clarity was sought on whether there was a cost	

incurred for working with schools. In response, it was reported that this information would be circulated to Members of the Board.

RESOLVED: That the minutes be noted.

HEA4 NHS HALTON CCG'S CONSULTATION AND STEERING STRATEGY

The Board received a report and presentation from Mr D Chow, Engagement and Involvement Manager, NHS Halton Clinical Commissioning Group (CCG) which shared the range of engagement that was being undertaken to influence commissioning decisions; highlight good practice and joint working in engagement and consultation.

The Board was advised that NHS Halton CCG had a duty to engage widely with local people to ensure that services were commissioned in line with local peoples need. Promoting opportunities, wellbeing and good health for people locally was a key target within the Joint Strategic Needs Assessment and NHS Halton CCG's 2 year plan and 5 year strategy. The report provided an overview of some of the projects and programmes that had been undertaken to continually engage people locally both in their own health and the work of NHS Halton CCG and partners over the last financial year 2014/2015. A presentation of events and projects was attached as Appendix 1 to the report.

The Board discussed the issue and challenges of legal highs and noted that the Safer Policy and Performance Board had established a Topic Group to look at ways of addressing this matter in the Borough.

The Board noted that all GP Practices had established a Patient Participation Group. However, it was also noted that some were not as effective as others as they did not meet frequently and the CCG would be meeting with the all Group Chair's in order to look at ways of addressing this issue.

Members highlighted the importance of raising young people's awareness of the seriousness of diabetes. In response, it was reported that next week a Halton Real Comic on Type 2 Diabetes would be distributed widely in the community. A Halton Real Comic - Health Checks was circulated at the meeting. It was reported that they would be available in all schools, libraries and patient groups. A link to ipads and an APP would also be available. In addition, it was anticipated that in the near future a Mental Health and

SEND comic would also be produced and distributed.

RESOLVED: That

- (1) The report, presentation and comments raised be noted; and
- (2) Mr Chow be thanked for his informative presentation.

(Note: Councillor M. Lloyd Jones declared a Disclosable Other Interest in the following items of business HEA4, HEA5, HEA8 and HEA9 as her husband is a Governor of Warrington and Halton Hospital Foundation Trust and Bridgwater Community Health Care Trust.)

HEA5 HEALTH BASED PRIORITY REPORT (Q4/END OF YEAR)

The Board considered a report of the Strategic Director, Communities, which presented the progress of key performance indicators, milestones and targets relating to Health in Quarter 4 of 2014-15.

A verbal update on the performance monitoring targets was given at the meeting, highlighting that the majority would be achieved by the end of the year. In addition, an update was given on the indicators that had not met their target; the reasons why and the actions being taken to address this matter.

Page 59 – Homelessness: Clarity was sought on who would be monitoring the Pan Merseyside Bond Scheme and more information was requested. In response, it was reported that this information would be circulated to all Members of the Board.

Page 65 – CCC6 – The number of households living in temporary accommodation – The Board agreed to monitor this target in light of the introduction of Universal Credit and the impact it would have on residents in the Borough.

RESOLVED: That the report and comments raised be noted.

HEA6 HPPB ANNUAL REPORT 14/15

The Board considered a report of the Strategic Director, Communities, which presented the Annual Report for the Health Policy and Performance Board for April 2014-March 2015 attached as Appendix 1 to the report.

It was reported that during 2012 -13 the Board had looked in detail at many of Halton's Health and Social Care priorities. Further details of these were outlined within the Annual Report and were set out in Appendix 1.

The Chairman, on behalf of Councillor E Cargill, took the opportunity to thank Officers and Members for their contribution to the Board and Working Groups during the last municipal year.

RESOLVED: That the report be noted.

HEA7 COMMUNITY NURSING - UPDATE ON STAFFING LEVELS

The Board considered a report of the Strategic Director, Communities, which provided feedback on issues discussed at the last meeting in respect of the presentation of the Care at Home Scrutiny Review 2014/15.

The Board was advised that the Care and Home Scrutiny Review 2014/15 report that had been presented to last meeting of the Board had taken account of the current Community Nursing Services. As part of the review, Members received a presentation of the service that was currently delivered in Halton. The presentation focussed on such areas as current staffing levels, referrals, quality and safety aspects and patient feedback. Members had previously expressed concerns about the perceived lack of capacity within the Community Nursing Service.

The Board was further advised that in order to provide Members with appropriate assurances, the following information represented an update on the posts affected and the actions that had been taken to ensure a safe workforce was in place:-

- A Band 7 evening service District Nurse sister had returned from long term sick leave week commencing 12th April 2015 on a 4 week phased rehabilitation return to work programme;
- A vacant 0.4 FTE Band 5 Community Nurse post had been recruited to and a start date was expected to be confirmed imminently following the completion of recruitment checks;
- 2 x 0.4 Band 5 post interviews had taken place on 28th April 2015 and recruitment checks for the

successful candidates had commenced;

- A Band 7 District Nurse sister had left the Trust on the 26th April 2015; however, she would be remaining on the nurse bank for night duties. The post was being advertised and, until it had been recruited to, the Trust had taken on a very experienced agency nurse working 2 to 3 nights per week who was also interested in applying for the post; and
- There were no capacity issues in the District Nursing Out of Hours Service. Staff within the service occasionally reported issues when the evening staff had handed over patients if they had been delayed with an end of life patient which impacted on their workload. This was because the community nursing service prioritised end of life patients and this had been discussed and agreed with staff.

The Board noted that the service was currently fully staffed.

RESOLVED: That

- (1) the report be noted; and
- (2) the steps taken to ensure the community nursing service has capacity to provide a safe and efficient Community nursing service be noted.

HEA8 IM&T STRATEGY

The Board considered a report of the Strategic Director, Communities, which provided Members with the 2015-2018 IM&T strategy for Halton.

The Board was advised that document had been carried out in collaboration with a number of key stakeholders. Following engagement with stakeholders the strategy aimed to identify what both local priorities were in relation to IM&T and also the wider healthcare economy priorities which spanned a number of organisations and which were likely to span the life of the strategy.

The Board was further advised that the workstreams had been identified by first specifying the need that was not currently being met and then identifying the possible solutions that could meet this need. Their potential impact

on outcomes and also their ease of implementation was also mapped.

It was reported that the strategy had been presented to the CCG Service Development Committee in February 2015 and had been approved via the Governing Body in March 2015. The work streams were now being developed into a number of detailed project plans to be progressed over the coming months.

Furthermore, it was reported that the identified work streams within the IM&T strategy were now being planned in collaboration with the relevant stakeholders and detailed project plans being developed. These would form a monitoring dashboard that would be discussed monthly at the IM&T working group and form the basis for the quarterly IG Committee report.

The Board noted the current position and next steps of the IM&T Strategy, set out in the report.

The Board noted the significant challenge and opportunities of the IM&T Strategy and the excellent work that had been undertaken to date.

RESOLVED: That the Strategy and the Year 1 priorities within the Strategy be noted.

HEA9 URGENT CARE - PROGRESS REPORT

The Board considered a report of the Strategic Director, Communities, which gave Members an update in relation to the Urgent Care/System Resilience agenda within Halton, including an update on the Urgent Care Centre (UCC) developments. Appendix 1, to the report, gave information on Halton's System Resilience Group Membership and the System Resilience Performance Dashboard for February 2015.

The Board was advised that System Resilience Group (SRG) had been designed to be reflective of the whole system of health and social non-elective and elective care within Halton.

Ms C McNally (Runcorn UCC) and Ms S Doyle (Widnes UCC) attended the meeting to give Members an update on the two Urgent Care Centres.

It was reported that Runcorn UCC had been operational since 9 February 2015 and was operating from 7

am – 10.30 pm (accepting patients up until 10 pm). Doctors were currently present from Monday – Friday, 9 am – 5 pm. However, from 1 July 2015 a doctor would be on duty from 8 am – 10 pm seven days a week. In addition, it was reported that the UCC had already started to complete more episodes of care than when it was the Minor Injuries Unit, which had resulted in reducing the instances where patients have had to be referred onto A&E.

In respect of Widnes UCC, it was reported that work had commenced on site on 4 February 2015 and there were two phases. Phase 1 would be completed by the end of this week and it was anticipated that Phase 2 would be completed by the end of June 2015. Once work had been completed, it would operate under the agreed Service Delivery Model as Runcorn UCC. It was also reported, that staffing levels at the site were also improving and would continue to do so over the next few weeks.

Furthermore, it was reported that there had been very positive feedback on the service delivered to date at the Runcorn UCC and there would be a launch of the service to the public in July 2015.

Members raised concern that Runcorn UCC was currently operating reduced hours in terms of doctor provision and was not available seven days a week. In response, it was reported that there had been recruitment problems and therefore it had not been possible to extend the medic provision. However, there had been extensive staff training; clinicians with extended nursing and assessment skills, including the prescription of drugs were available, and nurse practitioners to complement the doctors.

The Board noted the challenges in respect of recruitment nationally. The Board discussed the Dashboard information and it was agreed that it be circulated with the Health PPB Briefing, prior to the agenda despatch. It was also agreed that feedback on the impact that the UCC's were having on A&E attendance be reported back to the meeting on 8 November 2015.

RESOLVED: That the report and comments raised be noted.

HEA10 CARE MANAGEMENT STRATEGY

The Board considered a report of the Strategic Director, Communities, which presented Members with

information on Making a Difference: A Strategy for Transforming Care Management in Halton 2015-2020.

The Board was advised that Making a difference: A Strategy for Transforming Care Management in Halton 2015-2020 had been developed within a range of national and local policies and themes including the Care Act 2014. The Act placed additional responsibilities on the Council through the 'wellbeing principle' and the wider focus on the whole population in need of care rather than just those with eligible needs or who were funded by the state.

The Board was further advised that implementation of the Care Act had significant implications for the roles of the Adult Social Care workforce as the way people accessed the care and support system changes and demand increased for assessments and support plans from self-funders and carers.

It was reported that the strategy set out a framework to build on the existing care management model and construct a professional, skilled care management service that was fit for purpose and responsive to the future demand.

Furthermore, it was reported that implementation of the strategy action plan required Workforce Capacity Planning and this was underway and was supported by Skills for Care as one of their pilots. The project would explore how social workers were deployed, how many would be needed (for the expected increase in assessments) and how assessments were undertaken. This would then inform the right mix and numbers of social workers and community care workers with the right skills and knowledge to implement care and support reform.

In conclusion, it was reported that the action plan would be delivered through the newly established Professional Capabilities Forum, chaired by the Principal Social Worker (Divisional Manager Care Management and Assessment). The Strategic Director and Operational Director, Prevention and Assessment, would form the "Professional Leadership" and have an overview of progress in implementing the strategy.

The Board had a discussion on the model of brokerage and consultation that had taken place. It was noted that this was not the final document, and further

consultation would take place with service users and staff.

RESOLVED: That the Care Management Strategy for Halton 2015-20 supporting evidence be noted.

Meeting ended at 8.00 p.m.