HEALTHY HALTON POLICY AND PERFORMANCE BOARD

At a meeting of the Healthy Halton Policy and Performance Board held on Tuesday, 12 January 2010 at Council Chamber, Runcorn Town Hall

Present: Councillors E. Cargill (Chairman), J. Lowe (Vice-Chairman), Austin, Gilligan, Higginson, Lloyd Jones, Philbin, E. Ratcliffe, Swift and Mr P. Cooke

Apologies for Absence: Councillor Horabin and Wallace

Absence declared on Council business: None

Officers present: S. Wallace-Bonner, L. Derbyshire, M Holt, A. McNamara, A. Villiers and A. Williamson

Also in attendance: Councillor Gerrard, In accordance with Standing Order 33 Portfolio Holder Health and Social Care and 1 Member of the Public

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

HEA41 COUNCILLOR MRS SUE BLACKMORE

The Board stood in silence as a mark of respect for the sad passing of Councillor Mrs Sue Blackmore.

HEA42 MINUTES

The Minutes of the meeting held 10 November 2009 having been printed and circulated were signed as a correct record.

HEA43 PUBLIC QUESTION TIME

The Board was advised that no public questions had been received.

HEA44 EXECUTIVE BOARD MINUTES

The Board considered the Minutes of the meetings of the Executive Board Sub Committee relevant to the Healthy Halton Policy and Performance Board.

RESOLVED: That the minutes be noted.

HEA45 SSP MINUTES

The Minutes of the meeting of the Halton Health Partnership Board from 17 September 2009 were submitted for information.

RESOLVED: That the Halton Health Partnership Board Minutes be noted.

(NB: Councillor Lloyd Jones declared a Personal Interest in the following two items of business as her husband is a Non Executive Director of Halton and St Helens Primary Care Trust).

HEA46 JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) - HEALTH & WELLBEING

The Board considered a report of the Strategic Director, Health and Community which updated the Members on the Joint Strategic Needs Assessment (JSNA) document attached to the report at Appendix 1.

The Board was advised that the Director of Adult Social Services, Public Health and Children and Young People's (CYP) Services in every Local Authority and Primary Care Trust (PCT) had a statutory duty from April 2008 to work together to develop a JSNA for their area.

The Board was further advised that over the past few months, work had taken place with colleagues in the NHS Halton & St Helens, Commissioning Managers, colleagues within the Children & Young People's Directorate and the Resources Directorate to undertake the task.

The JSNA collated information regarding the current and future health and well being needs of the local population. It provided an opportunity to look into the future to establish plans for likely changes in needs. It represented one of the major influences in directing commissioning priorities and planning service development.

The following points arose from the discussion:-

- Members requested an update in respect of the action taken on dental health in the Borough;
 - In response, it was reported that this information would be circulated to all Members of the Board.
- In respect of Cancer screening and Widnes GP's

being given information about the number of people on their patient lists who had not benefited from cancer screening – clarity was sought on when Runcorn GP's would be sent this information; and

In response, it was reported that the timescale for the PCT to role this information out across the Borough would be circulated to Members of the Board.

 In respect of there not being an Acute Stroke Unit in Halton and the facility for scanning stroke victims in Warrington only being available from 9 am – 5 pm Monday to Friday, Members requested that Janet Dunne, Primary Care Trust (PCT) be invited to a future meeting of the Board to present an update on this matter.

Strategic Director

- Health &
Community

RESOLVED: That

- (1) the report and comments made be noted;
- Janet Dunne (PCT) be invited to a future of the Board to update the Members on the situation regarding the Acute Stroke Unit.

(NB: Councillor Higginson declared a Personal Interest in the following item of business and left the room during consideration of the item.)

HEA47 PROGRESS IN RESPONDING TO THE OMBUDSMAN REPORT

The Board considered a report of the Strategic Director, Health and Community in response to a recommendation made in the joint Health Service and Local Government Ombudsman report regarding complaints made by Mencap on behalf of families of six people with learning disabilities who died between 2003-5 whilst in NHS or local authority care.

The Board was advised that in March 2009 the Health Service Ombudsman and Local Government Ombudsman published a joint report Six Lives: the provision of public services to people with learning disabilities, based on findings from their investigations in response to complaints brought by Mencap following publication of their report Death by Indifference (2007). This report outlined case studies of six people with learning disabilities who Mencap believed died unnecessarily as a result of receiving a lower

standard of healthcare than afforded to the general public and prompted the independent inquiry, chaired by Sir Jonathon Michael, into access to healthcare for people with learning disabilities. These findings were reported in Healthcare for All (DH 2008).

The Board was further advised that the national changes had given the authority the opportunity to review procedures and build on processes to further improve people's experience of the complaints system in Halton. Initiatives developed included:

- The introduction of a triage system to assess timely and proportionate action in response to complaints;
- Early personal contact to clarify the complaint, desired outcomes and to agree timescales for the investigation;
- Cross organisational cooperation to provide a coordinated response where appropriate;
- The development of best practice for investigations and resulting reports;
- Scrutiny of responses to complaints to assure quality;
- Monitoring of any resulting actions, to ensure compliance with recommended actions;
- Feedback system to measure satisfaction with how a complaint had been handled; and
- Reporting mechanisms to ensure learning from complaints was shared and used to develop improvements in services

In addition, Halton was also involved in developing ongoing improvements in complaints handling, including:-

- The Development of National Complaint Standards by the National Complaints Managers Group, commissioned by the Association of Adult Directors of Social Services (ADSS);
- The exploration, within the North West Complaints Managers Group, of alternative methods of complaint resolution (e.g. mediation); and

 Training programmes through these groups to improve the skills of those handling and investigating complaints.

Copies of the Ombudsman report were circulated at the meeting.

RESOLVED: That the report be noted.

HEA48 HEALTHY HALTON POLICY AND PERFORMANCE BOARD WORK PROGRAMME 2010/11

The Board considered a report of the Strategic Director, Health and Community which sought to develop a work programme of topics for the Board to examine in 2010/11.

The Board was advised that the Aids and Adaptations topic group was due to be completed in March 2010. The Employment and Disabled People Topic Group was currently ongoing and it was suggested and agreed that the Board establish a further topic group for 2010/11 – Dignity in Care. It was agreed that the Terms of Reference would identify specific areas to be reviewed.

The Board noted the possible implications of people opting out of care packages and discussed how this could be monitored in the future.

RESOLVED: That a Dignity in Care topic group be established as part of the 2010/11 work plan.

(NB: Councillor Lloyd Jones declared a Personal Interest in the following item of business as her husband is a Non Executive Director of Halton and St Helens Primary Care Trust).

HEA49 LOCAL DEMENTIA STRATEGY & DEMENTIA BUSINESS CASE

The Board considered a report of the Strategic Director, Health and Community which presented the local dementia strategy and business case, and clearly defined the key priorities within the local dementia strategy.

The Board was advised that the National Dementia Strategy – Living Well with dementia had been published in February 2009 and outlined 17 objectives designed to deliver on the three overarching aims:

Improved public and professional awareness of

dementia;

- Early diagnosis and intervention; and
- High quality care and support.

The Board was further advised that the Joint Commissioning Strategy for dementia had been developed across Halton & St Helens to outline the current service position and identify gaps in provision that would be central to commissioning plans in the future.

In addition, it was reported that by improving the efficiency as described in the business case the authority would have a more planned approach to service delivery, which should result in a reduction in the financial resources required. This would be further enhanced by the completion of a service review and the redesign of the current Community Mental Health Team.

The Board noted the current level of people who had been diagnosed with dementia in Halton (1075) and the projected number for 2030 (1957). However, it was also noted that the Government had suggested that 35% of people with dementia had not been diagnosed, therefore the figure could be much higher.

The following points arose from the discussion:-

- The relationship between alcohol abuse and dementia was noted. It was suggested that the relationship between drug abuse and dementia be included in the strategy;
- The importance of early diagnosis was noted; and
- The challenges in respect of resources and training requirements to implement the strategy was noted. It was reported that joint funding had been identified and some of the services would be re-designed and funding re-invested to ensure a more effective and efficient service was delivered in the community.

RESOLVED: That the report and comments made be noted.

HEA50 LOCAL AREA AGREEMENT

The Board considered a report of the Strategic Director, Corporate and Policy which provided information

on the progress towards meeting Halton's Local Area Agreements (LAA's) targets to September 2009.

The Board was advised that Appendix 1 to the report outlined the progress to the 2009-10 mid-year which included those indicators and targets that fell within the remit of the Board.

The Board was further advised that in considering the report Members needed to be aware that:-

- All of the measures within the National Indicator Set were monitored through Quarterly Departmental Service Plan Monitoring Reports. The purpose of the report was to consolidate information on all measures and targets relevant to the PPB in order to provide a clear picture of progress; and
- In some cases outturn data could not be made available at the mid-year point and there were also some Place Survey based indicators for which information would not become available until 2010 i.e. the next date the survey was due to be undertaken

In respect of NI 120 – All age all cause mortality – The Board agreed that Fiona Johnstone, Director of Public Health be invited to a future meeting of the Board to give the Board an update on this matter.

RESOLVED: That

- (1) the report and comments made be noted; and
- (2) the Director of Public Health be invited to a future meeting to give an update on NI 120 - mortality rates in the Borough.

HEA51 PERFORMANCE MONITORING REPORTS

The Board considered a report of the Strategic Director, Corporate and Policy regarding the Second Quarter Monitoring Reports for:

- Older People and Physical and Sensory Impairment Services;
- Adults of a working age; and

Strategic Director - Health & Community

Health and Partnerships.

The following points/comments arose from the discussion:-

- NI 133 Timeless of Social Care packages the reasons for this target not expected to be achieved was noted. However, the overall target for the Directorate would be met;
- Page 198 The Capital Budget as at 30
 September 2009, it was suggested that an additional column be added outlining what funding had been committed;

In response, it was reported that consideration would be given to the suggestion.

Page 217 – NI 39 – The PCT had secured the support of the Regional Alcohol Improvement Programme who have now re-branded as 'Drink Wise North West' and who are funded by the Department of Health, They have agreed to
 the sentence needed to be completed; and

- Health Community

Strategic Director

In response, it was reported that this information would be circulated to all Members of the Board.

 The success of the intergenerational events were noted.

RESOLVED: That the report and comments made be noted.

Meeting ended at 7.45 p.m.