

HEALTH POLICY AND PERFORMANCE BOARD

At a meeting of the Health Policy and Performance Board held on Tuesday, 11 September 2012 at Council Chamber, Runcorn Town Hall

Present: Councillors E. Cargill (Chairman), J. Lowe (Vice-Chairman), Baker, Dennett, Hodge, Horabin, C. Loftus, Sinnott, Wallace, Zygadlo and Mr J Chiochi

Apologies for Absence: Councillor V. Hill

Absence declared on Council business: None

Officers present: H. Coen, L. Derbyshire, A. McNamara, S. Wallace-Bonner and L Wilson

Also in attendance: Four Members of the Public and In Accordance with Standing Order No: 33 Councillor Wright, Portfolio Holder, Health and Adults

ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

HEA17 MINUTES

The Minutes of the meeting held on 29 May 2012 having been printed and circulated were signed as a correct record.

HEA18 PUBLIC QUESTION TIME

It was confirmed that no public questions had been received.

HEA19 SHADOW HEALTH & WELLBEING BOARD MINUTES

The Minutes of the Shadow Health and Wellbeing Board of its meeting held on 20 June 2012, were submitted to the Board for consideration.

The Board noted that in respect of the vascular services review, the Joint Health Overview and Scrutiny Committee had referred the matter to the Secretary of State. It was reported that a judicial review had been considered and rejected, due to a number of issues involved with the

process. In addition, it was reported that when the final response had been completed, it would be circulated to all Members of the Board.

The Board noted that the Community Wellbeing Model was a social enterprise that worked with GP practices in respect of health and wellbeing. The Board also noted that an update report on this matter would be presented to the January meeting.

Clarity was sought on Page 8 – Halton CCG had expected an allocation of around £2.3m for running costs, however, the NHS CBA calculation had reduced this to £2.98m. In response, it was reported that this was a typing error and the allocation should have been recorded as £3.2m.

RESOLVED: That the minutes and the comments raised be noted.

HEA20 ADULT SOCIAL CARE USER SURVEY 2011-12

The Board considered a report of the Strategic Director, Policy and Resources which informed the Members of the results of the Adult Social Care Survey for 2011/12.

The Board was advised that In line with Putting People First, the National Adult Social Care Survey had been introduced for 2010/11 with the intention of surveying a cross-section of individuals receiving adult social care services. This was the second year that the statutory survey had been undertaken and it was scheduled to take place annually between January and March each year.

The Board was further advised that there had been changes to the Statutory Procedures for the 2011/12 Survey in relation to capacity checking and the cohort used for sampling. The Members noted the implications of these changes. In addition, the Board also noted the sample size and composition of the survey, the response rate and the results.

The following comments arose from the discussion:-

- Clarity was sought on why the total direct costs of running the survey in terms of printing and postage had been £2k, exclusive of staff time in administering the survey. It was reported that the national survey had been first introduced in 2010/11 and there had been no additional funding provided

by the Government. Therefore it was the responsibility of the Local Authority to fund the statutory survey on behalf of the Department of Health;

- The Board noted that overall, from the information in the survey, people's needs had increased. It was reported that there had been a few changes to what had been statutorily prescribed in the second year and this had shown that survey users completing the survey, had a higher level of need. In addition, it was reported that paragraph 3.2.1 gave an explanation of the changes to capacity checking. However, response rates were similar to previous years;
- The Board noted the summary of results in 2011/12 and that the results were not available nationally as yet and until they were available comparisons could not be made. The Board was advised that when this information was available a report would be presented to the Board for consideration;
- The Board noted that there was a higher rate of satisfaction levels (extremely or very satisfied) with the care and support service they received and also noted the highlights of the survey set out in paragraph 3.5.2;
- It was noted that the survey was useful, and that it would be interesting to see how it progressed over time, especially with all the current changes. In addition, it was highlighted that it was difficult to identify correlation to what was happening as there was only two years of data;
- Clarity was sought on whether random checks had been undertaken on who had actually completed the forms in care homes. In response, it was reported that random checks had not been undertaken and it was not possible to know who had helped individuals complete the form. In addition, it was reported that Question 21 gave an indication of how many people had received help in completing the form and Question 22 – the type of help provided;
- It was noted that it was a statutory survey with prescribed questions and detailed guidance. The Local Authority could add additional questions, but

it was very difficult to amend delete/omit any questions and the Council would have to advise the Department of Health of this;

- Clarity was sought on whether anything could be done to identify the individuals in Q6a where 0.3 % of people had indicated that their home was not at all clean or comfortable. Also, question 8b where 3.8% of people had indicated they had little social contact with people and felt socially isolated. In response, it was reported that this would be looked into;
- It was noted that the survey results represented an amalgamation of two surveys with slightly different questions; one for individuals living in their own home and one for people in residential care. It was reported and agreed that the individual surveys would be circulated to Members of the Board.

RESOLVED: That the report and comments raised be noted.

HEA21 PERFORMANCE MANAGEMENT REPORTS FOR QUARTER 1 OF 2012/13

The Board considered a report of the Strategic Director, Policy and Resources regarding the Quarter Monitoring Reports for the first quarter of 2012/13 to June 2012. The report detailed progress against service objectives / milestones and performance targets and described factors affecting the service for:

- Prevention and Assessment; and
- Commissioning & Complex Care.

The Board was advised that after consultation with Members, and in line with the revised Council's Performance Framework for 2012/13 (approved by the Executive Board), the reports had been simplified with an overview report provided for the Health Priority. This identified key developments, emerging issues and the key objectives / milestones and performance indicators. However, the full departmental quarterly reports were available in the Members Information Bulletin to allow Members to access the reports as soon as they were available and within six weeks of the quarter end. The Departmental quarterly monitoring reports were also available via the link in the report.

The Board congratulated Officers on the improvements that had been made to the report indicating that they were easier to read and more accessible.

RESOLVED: That the report and comment raised be noted.

HEA22 REVISED SUBJECT ACCESS REQUESTS (SOCIAL CARE RECORDS) POLICY, PROCEDURE AND PRACTICE MAY 2012

The Board considered a report of the Strategic Director, Communities which presented the revised Subject Access Requests (Social Care Records) Policy, Procedure and Practice May 2012.

The Board was advised that The Data Protection Act gave individuals rights to access their own personal information. Individuals could send a subject access request (SAR) which required the Authority to tell them about the personal information that was held on them, and the Authority would also have to provide them with a copy of that information.

The Board was further advised that the review of the Subject Access Requests Policy commenced in July 2011 and it was agreed that a working group would be established to review the process. The group's aim was to look at integrating the children's Access to Records Policy into the process that operated in adult services, and create a new, streamlined policy, procedure and practice to reflect this.

It was reported a group of representatives from across the Council had worked together to review the policy and procedures. This had involved various departments including Children and Families Service, Adult Social Care, Customer Services, Policy and Strategy and ICT. Legal Services had also been consulted and had made some minor changes in terms of legalities.

As a result of the review the following had been established:-

- one streamlined policy and procedure instead of two separate policies for Children and Enterprise and the Communities Directorates. The policy and procedure document had been written to reflect the revised process;

- a new Council SAR application form had been developed (Set out in Appendix 2 of the Policy). There was also detailed guidance on how to complete and submit the form and how the application form would be dealt with (Set out in Appendix 3 of the Policy); and
- letter templates and other additional forms that may be required as part of a SAR had been updated in accordance with the revisions within the policy. These formed the remainder of the Appendices to the policy.

In conclusion, it was reported that by having a more streamlined process in place, responses to SARs would be dealt with more efficiently, and therefore give an improved service to both children and adults who were requesting information. It was also reported that the Policy would be scheduled for review in 2014.

RESOLVED: That the report and associated Policy be noted.

Note: Councillor J Lowe declared a Disclosable Other Interest in the following item of business as a Board Director for Halton YMCA.

HEA23 SCRUTINY REVIEW OF HOMELESSNESS SERVICES 2011-2012

The Board considered a report of the Strategic Director, Communities which presented the Members with Scrutiny Review of Homelessness Services 2011-2012.

The Board was advised that the scrutiny group had specifically requested that the report be considered by the Executive Board, without first having been reviewed by the Health PPB, in order to accompany another related report outlining plans for the reconfiguration of supported housing provision for the single homeless.

The Scrutiny Working Group had recommended the following:-

- Deliver on the actions arising from the visits to temporary accommodation schemes;
- Secure efficiency savings through new contracts with Halton YMCA for the YMCA hostel and Nightstop and de-commissioning of Y's Up advice

and guidance;

- Secure efficiency savings through new contract with Plus Dane for floating support services;
- Achieve efficiencies through the reconfiguration of remaining hostel provision for single people in order to improve the distribution of services across the Borough, prioritise access to services for individuals to whom the Council has a statutory duty, increase focus on homelessness prevention to assist individuals to resolve housing issues;
- Consider moving to a crisis intervention model for young homeless people in order to maximise the potential for young people to return home to their family; and
- Consider benefits of alternative models of provision for those escaping domestic violence.

The Chairman reported that Members of the Board wished to re-visit the domestic violence part of the review and it was agreed that this be deferred for further consideration and consultation. It was also agreed that when this part of the review had been completed, an action plan would be formulated and be presented to a future meeting of the Board.

The following comments arose from the discussion:-

- It was noted that the physical attributes of the refuge building was in need of refurbishment;
- The Board noted the excellent work that had been undertaken by Officers and Members of the Working Group on the Homelessness Review;
- It was suggested that the recommendations from the review could be more robust and an action plan formulated that would also allow the Board to monitor the actions. In response, it was reported that part of the recommendations required approval by the Executive Board in the first instance so that the review could proceed. Other recommendations in the review needed further consideration and options established as it was unclear in some areas

what could be taken forward;

- Clarity was sought on when the criteria would be known for direct landlord payments. In response, it was reported that this information would be circulated to Members of the Board;
- It was noted that all dispersed housing would not suit all victims of violence and it was requested that the working group report back to the Board before any decisions were taken on this matter. In response, it was reported that the Council were looking at piloting dispersed accommodation, working with the current provider. It was also reported that before a pilot could be established, consideration would have to be given to whether it was a feasible option and this would result in Officers undertaking a significant amount of preparation work over a period of time. It would also not be a short term pilot. In respect of the issues relating to the physical aspects of the refuge, discussions were also taking place with the current provider and work being undertaken to identify the options; and
- It was reported that the majority of the time the Authority were able to meet the needs of most people who suffered domestic violence. However, there were gaps in the provision i.e. families with boys 14 years or over and male victims of domestic violence, as the current refuge provision does not accommodate them.

RESOLVED: That

- (1) the contents of the report attached at Appendix 1 and comments raised be noted; and
- (2) the domestic violence part of the review be deferred for further consideration.

HEA24 CARING FOR OUR FUTURE : REFORMING CARE AND SUPPORT

The Board considered a report of the Strategic Director, Communities which gave the Members a summary of the White Paper 'Caring for our Future: Reforming Care and Support' which had been published on 11 July 2012. The report detailed the impact this would have on Local Authorities (LAs) and partner agencies.

The Board was advised of action from the White Paper in relation to the following categories:-

- Maintaining Independence;
- A Better Understanding;
- Quality;
- Social Care Workforce; and
- Control.

Appendix 1 to the report gave further details of the actions outlined within the White Paper along with details of the expectations/impact on Local Authorities. In addition, Members were given a brief overview of the draft Care and Support the Bill.

The Board was advised that people had the opportunity to comment on the Bill by 19 October 2012 either on line via the DH website <http://careandsupportbill.dh.gov.uk/home/> or in writing to the Draft Care and Support Bill Team at the DH. Halton would be preparing a response to the consultation and this would be presented to the Executive Board on 18 October 2012.

It was reported that Members had received a briefing on the White Paper and Bill and the comments received on the Bill had been collated and would form part of the consultation response. The draft response had also been circulated to Members of the Board and further comments were sought. It was also reported that amendments to the response would be made after the meeting and a further draft would be circulated to Members of the Board on Wednesday 12 September 2012 for comments. It was highlighted that it was a very tight timescale as the report was to be considered by the Executive Board on 18 October 2012. A further report in terms of the White Paper would also be presented to the Health PPB at its meeting on 8 January 2013.

The following comments arose from the discussion:-

- Page 100 – Paragraph 5.1 – bullet points – clarity was sought on the £100m and whether this was additional money or whether this would result in a loss of funding elsewhere. Members raised concern that if it was not additional funding, but from reductions elsewhere, with the current budgetary cuts from the Government, this would have a severe impact on front line services. In response, it was reported that it was unclear

whether it was additional funding and how it would be distributed etc. In addition, it was reported that the response could ask for further clarity on this matter;

- Page 100 – choice about whether to have financial protection through voluntary opt-in or opt-out schemes to give protection in return for specified payments – It was suggested that finance and insurance groups would need to be considered as people would not be able to afford insurance;
- It was noted that the Bill made assumptions on existing community facilities and with the current cuts, it was likely that many of these would cease to exist. In addition, some community support was specific to a particular area and could not be rolled out across the Borough; and
- It was suggested that the level of financial implications on Page 2 of the draft paper be emphasised more.

RESOLVED: That the contents of the report and comments raised be noted.

HEA25 HEALTH & WELLBEING SERVICE

The Board considered a report of the Strategic Director, Communities which gave details of the work being undertaken to establish a Health and Wellbeing Service via Partnership working arrangements between the Local Authority, Halton Clinical Commissioning Group and Bridgewater Community NHS Trust.

The Board was advised that Healthy Lives Healthy People: the strategy for public health in England, set out the Government's vision for a new, integrated and professional public health system, designed to be more effective and to give clear accountability for the improvement and protection of the public's health. The new system would embody localism, with new responsibilities and resources for local Government to improve the health and wellbeing of their population, within a broad policy framework set by the Government. Local authorities would be expected to use their new responsibilities and resources to put health and wellbeing at the heart of everything they do, thereby helping people to lead healthier lives.

The Board was further advised that as a response to

these Government plans the Health & Wellbeing Service was being developed via Partnership working arrangements and associated Agreement, a copy of which was attached at Appendix 1 to the report.

It was reported that the Partnership Agreement set out a phased approach to implementation. Phase 1 would include the development of older people's services and pathways as well as dementia services. It would also see a review of falls prevention services which was clearly one of the highest priorities in Halton due to the current poor performance against National indicators. Finally it would consider the emotional and wellbeing services for Adults that were already being delivered and how these would be developed in the future. This particular development would see the alignment of these services with the development of the Community Wellbeing Practice model.

It was also reported that Phase 2 would include the wider determinants of public health and influences on health inequalities. This development would take a 'Life Course' approach and would therefore work across adult social care, health, children and young people's services and the voluntary sector to establish the need and where the specific work stream sits. This work would include areas such as:

- Alcohol and promoting sensible drinking;
- Early detection of cancer;
- Stop smoking and tobacco control;
- Healthy weight;
- Expert patient programme; and
- Breastfeeding.

In conclusion, it was reported that the implementation of the proposals/service would be monitored via the Health & Wellbeing Service (HWBS) Steering Board which membership consisted of representatives from Partner Agencies, voluntary sector and Halton LiNK. The Executive Board Portfolio Holder for Health & Adults was also a member of the Board.

The Board noted that an Expert Patient Programme was an individual with a long term condition who had been supported to take control of their own illness.

A Member of the Board suggested that in respect of Troubled Families, there was a possibility of linking up with the Children, Young People and Families Policy and Performance Board. In response, it was reported that this had been considered and a working group would be

established.

RESOLVED: That the report and comments raised be noted.

Meeting ended at 8.25 p.m.