

# Public Document Pack



## Health Policy and Performance Board

Tuesday, 28 November 2023 at 6.30 p.m.  
Council Chamber, Runcorn Town Hall

S. Young

### Chief Executive

### BOARD MEMBERSHIP

Councillor Eddie Dourley (Chair)	Labour
Councillor Sandra Baker (Vice-Chair)	Labour
Councillor Victoria Begg	Labour
Councillor Sian Davidson	Conservative
Councillor Mike Fry	Labour
Councillor Emma Garner	Labour
Councillor Louise Goodall	Labour
Councillor Chris Loftus	Labour
Councillor Louise Nolan	Labour
Councillor Tom Stretch	Labour
Councillor Sharon Thornton	Labour
Mr David Wilson	Healthwatch Co-optee

*Please contact Ann Jones on 0151 511 8276 or e-mail [ann.jones@halton.gov.uk](mailto:ann.jones@halton.gov.uk) for further information.  
The next meeting of the Board is on Tuesday, 20 February 2024*

**ITEMS TO BE DEALT WITH  
IN THE PRESENCE OF THE PRESS AND PUBLIC**

**Part I**

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Members are reminded of their responsibility to declare any Disclosable Pecuniary Interest or Other Disclosable Interest which they have in any item of business on the agenda, no later than when that item is reached or as soon as the interest becomes apparent and, with Disclosable Pecuniary interests, to leave the meeting during any discussion or voting on the item.	
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*In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.*

## HEALTH POLICY AND PERFORMANCE BOARD

*At a meeting of the Health Policy and Performance Board held on Tuesday, 26 September 2023 at the Council Chamber, Runcorn Town Hall*

Present: Councillors Baker (Vice-Chair in the Chair), Begg, Fry, Garner, C. Loftus, L. Nolan, Stretch and Thornton

Apologies for Absence: Councillor Dourley

Absence declared on Council business: None

Officers present: A. Jones, D. Nolan, L Wilson, H. Moir, I. Onyia and H. Birchall

Also in attendance: T. Knight – Primary Care NHS Cheshire & Merseyside and L. Gardner – Warrington & Halton Teaching Hospitals NHS Foundation Trust

### ITEMS DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

	<i>Action</i>
HEA12 MINUTES	
<p>The Minutes of the meeting held on 27 June 2023 having been circulated were signed as a correct record.</p>	
HEA13 PUBLIC QUESTION TIME	
<p>The following public question had been received:</p> <p><i>“In 2016 (pre pandemic) HBC made the decision to reduce Carers breaks by 50%, this decision has not been reviewed, but has resulted in large underspends in carers break funding year on year, which has meant hundreds of thousands of pounds of carers funding has then been redirected to fill gaps in Adult Social Care. Is this bad management or a deliberate policy? Not to spend carers funding is inexcusable, to do so year on year is not defensible. The 6,000 registered carers in Halton deserve a response.”</i></p> <p>The following response was provided:</p> <p><i>Halton Borough Council did not reduce the Carers respite funding in 2016. Expenditure in 2015/16 was £445,206. Expenditure in 2016/17 was £394,583.</i></p>	

*The allocated budgets across these 2 years remained the same, a reduction in expenditure was seen in relation to Direct Payments, £41,000 and in voluntary sector grant application of £6,000. As can be seen within the Carers Respite Finance report, the allocated budget for Carers Respite in 2022/23 was circa. £428k and represents a 9% increase in budget from 2019/20.*

*Spend against these allocated budgets does fluctuate dependent on activity / demand, but is not as a result of a deliberate policy by Halton Borough Council.*

#### HEA14 HEALTH AND WELLBEING MINUTES

The minutes from the Health and Wellbeing Board's meeting held on 22 March 2023 were submitted to the Board for information.

#### HEA15 COMMISSIONING OF PRIMARY CARE DENTAL SERVICES

The Board welcomed Tom Knight, Head of Primary Care: NHS Cheshire and Merseyside, who provided an update on the commissioning of Primary Care Dental Services.

NHS Cheshire and Merseyside had the delegated responsibility for the commissioning of dental services, including primary, community and secondary care. It was reported that access to dental services was a local, regional and national issue impacting negatively on patients.

Post pandemic, the restoration and recovery of primary care dental provision was part of the NHS Operational Plan for 2023/24, with the expectation being that activity would return to pre pandemic levels. Practices continued to recover, supported by commissioners alongside a small number of national contract changes allowing some flexibilities focussed on improving access and increasing activity.

The report provided details of dental provision in Halton currently, through 13 practices. It also advised of the development of the *Dental Improvement Plan*, which signalled NHS Cheshire and Merseyside's commitment and ambition to ensure that access was improved for routine, urgent and dental care for the most vulnerable populations and communities impacted by the Covid-19 pandemic. The Plan was submitted to the ICB System Primary Care Board on 22 June 2023 for approval and identified the key strategic

aims; these were outlined in the report.

Following presentation of the item, the following comments were made by Members and some additional information was provided in response:

- The pandemic had made a huge impact on the oral health of the population nationally, including children. There were now more patients than ever requiring more treatment, resulting in a backlog;
- Staff retention – a workforce plan was being developed; it was important to understand what would encourage dentists to stay in the NHS and the offer required for this to be achieved;
- It was felt that the current contracts were unworkable;
- It was not just about the money – dentists had ambitions to achieve just like anyone else, these were restricted within the NHS which is why they turned to the private sector;
- Commissioners were working hard with providers to get more dentists signed up;
- It was confirmed that currently Halton's practices were not taking any more new patients – the list of the 13 practices would be sent following the meeting;
- The hard work of NHS dentists was recognised;
- Care home providers were struggling to get dentists in for residents – the requirements for care home residents had changed in recent years due to them having better teeth. Care home staff were being supported with encouraging better hygiene amongst residents – this aspect forms part of the Dental Improvement Plan;
- Halton had the lowest number of children being seen by a dentist in Cheshire and Merseyside; and
- Emergency telephone number for Halton – was discussed and requested to be an 0800 number like Manchester – Mr Knight would check if this was possible and report back.

Mr Knight was thanked for his presentation and the Chair invited him back to a future meeting when more data would be available on dental services in Halton in 5-6 months time.

RESOLVED: That the report is noted.

Executive Director  
of Adult Services

HEA16 HALTON & WARRINGTON COMMUNITY DIAGNOSTIC CENTRE

The Board received a report from Lucy Gardner, the Director of Strategy and Partnerships, Warrington and Halton Teaching Hospitals NHSFT, which provided an update on Warrington and Halton Teaching Hospitals NHS Foundation Trust's plan for the provision of a Community Diagnostic Centre (CDC) in Halton.

Further to the NHS Long Term Plan, the Department of Health and Social Care announced that it was making significant funding available for the creation of Community Diagnostic Centres and invited applications for funding from NHS Trusts. It was announced that the Trust was successful in its bid to secure an allocation of new capital and revenue funding to develop a CDC on the Halton site.

It was reported that the plan would be delivered in three phases:

- Phase 1 – Fast Track Community Diagnostic Centre (this was already fully operational since June 2023;
- Phase 2 – Community Diagnostic Centre in Halton Health Hub in Runcorn Shopping City – to be operational in November 2023; and
- Phase 3 – New Build Community Diagnostic Centre at the Trust's Halton site – to be fully operational in October 2024.

Members were advised that the CDC scheme would support improvements in population health outcomes across Halton and Warrington, through the creation of increased diagnostic capacity to support earlier diagnosis of conditions such as cardiac and respiratory disease or cancer. It would also significantly improve access to diagnostic services in one of the most deprived areas of Cheshire and Merseyside and will help address a number of stark health inequalities that were visible within the local population. The additional benefits of the CDC were discussed and the fact that the creation of the CDC was on the Halton site was welcomed.

The additional information below provided clarification following Members questions:

- The Community Diagnostic Centre in Runcorn Shopping City would include an outpatient Sleep Study Service, which patients would be referred to by their GP or other healthcare professional – it was noted that there were currently long waiting lists for

- the service;
- The outpatients appointment telephone line had been addressed in relation to frustrations with patients being on hold; and an electronic booking system was being looked at so patients would be able to book online in the future; and
- An observation was made by one Member in relation to a reduction in phlebotomy services being offered at some local GP surgeries – a response would follow after the meeting as Officers were not aware of this.

RESOLVED: That the report be noted.

Executive Director  
of Adult Services

#### HEA17 ONE HALTON HEALTH & WELLBEING STRATEGY AND UPDATE

The Board considered a report from the Director of Public Health, which provided an update on the development of the One Halton and Health and Wellbeing Board Strategy.

It was noted that Halton's previous Health and Wellbeing Board Strategy covered the period 2017 – 2022. Developments within the NHS had led to the creation of One Halton, and as a partnership approach it was agreed that a shared Strategy be adopted.

The report outlined the development of the Strategy, the consultation process, priorities identified and its four underlying themes – tackling the wider determinants of health; supporting communities in starting well; supporting communities in living well; and supporting communities in ageing well. There were two year goals and five year goals for each of the themes; details of these were outlined in the accompanying presentation.

The Strategy identified important system priorities and a strategic framework that would be used to develop a delivery plan.

The following additional information was provided in response to Members questions:

- The two Family Hubs had now been established – one in Kingsway which was already open and one in Brookvale Community Centre, which was due to open in the Autumn 2023;
- The inclusion of people with disabilities and special needs would form part of the Strategy which would support partnership work with other agencies. The

Strategy would challenge agencies to ensure that this cohort was supported with entering the jobs market for example;

- An observation was made by one Member that this type of strategy had been done before without success – and that this was the same but under another name;
- Observation made with regards to life expectancy and the disparity between Wards in Halton being a challenge; and
- At the time of starting the Strategy the health statistics of the population were not known due to Covid and the impact it had on data collection, where data was simply not collected by clinicians during 2021-22 when services were closed.

RESOLVED: That the report and presentation be received.

#### HEA18 PUBLIC HEALTH ANNUAL REPORT

The Board received an update from the Director of Public Health, on the development of the Halton Public Health Annual Report (PHAR).

It was noted that since 1988 Directors of Public Health (DPH) had been tasked with preparing annual reports – an independent assessment of the health of local populations. The annual report was the DPH's professional statement on the health of local communities, based on sound epidemiological evidence and interpreted objectively. It also allowed the DPH to identify key issues, flag problems, report progress and thereby, serve the local populations. It was also a key resource to inform local inter-agency action and remained a key means by which the DPH was accountable to the population they served.

The Board was advised that the theme for the PHAR for 2022/23 had focused on health improvement and prevention work to support the Halton community with their health in the different stages of their lives, as well as coping with pressures such as the recent pandemic and rising cost of living. To do this four key life stages were used as a guide to the issues – *Start, Strong, Live and Well*.

A summary was provided of the content of the PHAR relating to these issues and a weblink to the Report was provided, as follows:



[HBC Director of Health annual public health reports \(halton.gov.uk\)](https://www.halton.gov.uk)

Members welcomed the PHAR and agreed it was informative and interesting to read. The resources provided with regards to cost of living information and support was highlighted and it was suggested that perhaps future reports could also include DWP information on how to access work information for residents. Thanks were given to the Health Improvement Team.

RESOLVED: That the Board note the theme and recommendations within the Director of Public Health's Annual Report.

#### HEA19 SAFEGUARDING UPDATE

The Board received a report from the Executive Director, Adults, which updated them on key issues with respect to safeguarding in Halton.

The Board was advised that in April 2023 Government announced that the implementation of the Liberty Protection Safeguards (LPS) would be delayed 'beyond the life of this Parliament' so whether the LPS were introduced now depends on what the incoming Government wants to do after the Election. It was the view that the LPS would offer a streamlined alternative to the current Deprivation of Liberty Safeguards (DoLS) system.

Halton received 894 DoLS applications last year; an increase of 6%. To keep up with the increase in demand, independent Best Interests Assessors (BIAs) were used to ensure the backlog list was kept below 12 months. Members were advised that work was ongoing with regional ADASS DoLS groups to explore different strategies in order to streamline the internal DoLS process and increase the DoLS assessments that were completed by Halton's BIAs and therefore reduce the need for independent BIAs.

The report outlined some key safeguarding facts from 2022-23 (paragraph 3.3). *A typographical error was noted – second bullet point, 19% should read 9%.* The report also included information on the development of the Cheshire All Age Exploitation Strategy 2023-2025; provided details of a peer review of the Safeguarding Adults Board; and information relating to Halton's 22 care homes, two of which were currently being supported by the Council.

Members were also referred to the Safeguarding

website: [www.halton.gov.uk/adultsafeguarding](http://www.halton.gov.uk/adultsafeguarding) which had been updated and contained a range of resources and toolkits for use.

Further to one Member's question, it was confirmed that Halton's inclusion with Cheshire East, Cheshire West and Chester and Warrington Safeguarding Adults Boards, as opposed to the Liverpool City Region's (LCR) Board, was due to the fact that Halton fell within the jurisdiction of Cheshire Police, not Merseyside Police. They did however, work together on many issues and shared information. Regarding a query on the need for a modern slavery toolkit for Halton, it was commented that best practice was learned from other areas including the LCR, in order to give people the knowledge to be able to report modern slavery.

RESOLVED: That the report and comments made be noted.

#### HEA20 CARERS RESPITE FINANCE

The Board considered a report which provided an update on the key aspects of the use of the funding available for respite services for carers in the Borough.

It was reported that the Adult Social Care Carers budget for 2022/23 was £428,070, which represented a 9% increase from the 2019/20 budget.

The Board was advised that the budget was available to spend on direct respite provision of services for carers of people who were in receipt of adult social care services as part of a carers assessment; carers who applied to Halton Carers Centre for finance to support their caring role; and as small grants to voluntary and independent sector organisations who applied.

The spend of the budget varied year on year; the report provided details of the allocated budgets and spend for the past 4 years. It was noted that the decrease in spend in 2020/21 and 2021/22 was due to the pandemic.

Further to Members questions, it was confirmed that the budget variance at the end of each year was not rolled over to the next and was not protected, as it formed part of a single budget within the Directorate. Further, use of the carers respite budget was purely demand led and there was no deliberate policy on the Council's part to underspend this. Also, the carers allocated respite budget had increased year on year, as presented in the report.

It was commented that the Halton Carers Centre was located in Runcorn but did have an outreach facility in Widnes, at St Marie's Church on Lugsdale Road.

RESOLVED: That the report is noted.

HEA21 HEALTH BASED PRIORITY PERFORMANCE REPORTS  
Q1 2023/24

The Board received the Performance Management Reports for quarter one of 2023/24.

Members were advised that the report introduced, through the submission of a structured thematic performance report, the progress of key performance indicators, milestones and targets relating to Health in quarter one of 2023-24. This included a description of factors, which were affecting the service.

The Board was requested to consider the progress and performance information; raise any questions or points for clarification; and highlight any areas of interest or concern for reporting at future meetings of the Board.

No particular areas of concern were identified but one Member requested an update on the progress of the Big Conversation; this would be fed back.

RESOLVED: That the Performance Management reports for quarter one of 2023/24 be received.

Executive Director  
of Adult Services

*Meeting ended at 8.20 p.m.*

**REPORT TO:** Health Policy & Performance Board

**DATE:**

**REPORTING OFFICER:** Chief Executive

**SUBJECT:** Public Question Time

**WARD(s):** Borough-wide

### **1.0 PURPOSE OF REPORT**

1.1 To consider any questions submitted by the Public in accordance with Standing Order 34(9).

1.2 Details of any questions received will be circulated at the meeting.

**2.0 RECOMMENDED: That any questions received be dealt with.**

### **3.0 SUPPORTING INFORMATION**

3.1 Standing Order 34(9) states that Public Questions shall be dealt with as follows:-

- (i) A total of 30 minutes will be allocated for dealing with questions from members of the public who are residents of the Borough, to ask questions at meetings of the Policy and Performance Boards.
- (ii) Members of the public can ask questions on any matter relating to the agenda.
- (iii) Members of the public can ask questions. Written notice of questions must be given by 4.00 pm on the working day prior to the date of the meeting to the Committee Services Manager. At any one meeting no person/organisation may submit more than one question.
- (iv) One supplementary question (relating to the original question) may be asked by the questioner, which may or may not be answered at the meeting.
- (v) The Chair or proper officer may reject a question if it:-
  - Is not about a matter for which the local authority has a responsibility or which affects the Borough;
  - Is defamatory, frivolous, offensive, abusive or racist;
  - Is substantially the same as a question which has been put at a meeting of the Council in the past six months; or
  - Requires the disclosure of confidential or exempt information.

- (vi) In the interests of natural justice, public questions cannot relate to a planning or licensing application or to any matter which is not dealt with in the public part of a meeting.
- (vii) The Chair will ask for people to indicate that they wish to ask a question.
- (viii) **PLEASE NOTE** that the maximum amount of time each questioner will be allowed is 3 minutes.
- (ix) If you do not receive a response at the meeting, a Council Officer will ask for your name and address and make sure that you receive a written response.

Please bear in mind that public question time lasts for a maximum of 30 minutes. To help in making the most of this opportunity to speak:-

- Please keep your questions as concise as possible.
- Please do not repeat or make statements on earlier questions as this reduces the time available for other issues to be raised.
- Please note public question time is not intended for debate – issues raised will be responded to either at the meeting or in writing at a later date.

#### **4.0 POLICY IMPLICATIONS**

None.

#### **5.0 OTHER IMPLICATIONS**

None.

#### **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children and Young People in Halton** - none.

6.2 **Employment, Learning and Skills in Halton** - none.

6.3 **A Healthy Halton** – none.

6.4 **A Safer Halton** – none.

6.5 **Halton's Urban Renewal** – none.

**7.0 EQUALITY AND DIVERSITY ISSUES**

7.1 None.

**8.0 CLIMATE CHANGE IMPLICATIONS**

8.1 None identified.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

8.1 There are no background papers under the meaning of the Act.

**REPORT TO:** Health Policy and Performance Board

**DATE:** 28 November 2023

**REPORTING OFFICER:** Chief Executive

**SUBJECT:** Health and Wellbeing minutes

**WARD(s):** Boroughwide

## **1.0 PURPOSE OF REPORT**

1.1 The Minutes of the Health and Wellbeing Board from its meeting on 5 July 2023, are attached at Appendix 1 for information.

**2.0 RECOMMENDATION: That the Minutes be noted.**

## **3.0 POLICY IMPLICATIONS**

3.1 None.

## **4.0 OTHER IMPLICATIONS**

4.1 None.

## **5.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **5.1 Children and Young People in Halton**

None

### **5.2 Employment, Learning and Skills in Halton**

None

### **5.3 A Healthy Halton**

None

### **5.4 A Safer Halton**

None

### **5.5 Halton's Urban Renewal**

None

## **6.0 RISK ANALYSIS**

6.1 None.

**7.0 EQUALITY AND DIVERSITY ISSUES**

7.1 None.

**8.0 CLIMATE CHANGE IMPLICATIONS**

8.1 None identified.

**9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE  
LOCAL GOVERNMENT ACT 1972**

9.1 There are no background papers under the meaning of the Act.



**HEALTH AND WELLBEING BOARD**

*At a meeting of the Health and Wellbeing Board on Wednesday, 5 July 2023 at Karalius Suite - Halton Stadium, Widnes*

Present: Councillor Wright (Chair)  
Councillor J. Lowe  
Councillor T. McInerney  
Councillor Woolfall  
I. Onyia, Public Health  
W. Longshaw, St. Helens & Knowsley Hospitals  
A. Leo, NHS ICB – Halton Place  
S. Josepil, NHS ICB – Halton Place  
J. Hogan, Bridgewater Community NHS Foundation Trust  
D. Nolan, Adult Social Care, Halton Borough Council  
S. Drennan, Halton Borough Council (Care Homes)  
L. Olsen, Halton Housing Trust  
A. Doble, Public Health  
T. McPhee, Mersey Care  
L. Gardner, Warrington & Halton Hospitals  
T. Knight, Primary Care, Cheshire & Merseyside  
S. Yeoman, Halton & St. Helens Voluntary Action

*Action*

HWB1 MINUTES OF LAST MEETING

The Minutes of the meeting held on 22 March 2023, having been circulated, were signed as a correct record.

HWB2 CARE HOMES - PRESENTATION

The Board received a report and presentation from the Clinical Development Lead for Care Homes which provided a progress update of the work to date within the Care Home Sector.

Nationally, Nursing Homes across the country required further investment to drive up the standards of care, and to ensure professionals recognised and received recognition for the work undertaken within care homes. To help do this, the Clinical Lead Development Officer was created and funded via the Cheshire and Merseyside Local Action Board. The aim of the post was to enhance quality within the Care Home Sector focussing on Nursing Care Homes

The presentation outlined:

- The role of the Clinical Development Lead Officer;
- Work undertaken to date;
- The work plan for the remainder of the 12 month project;
- Case studies to evidence the positive outcomes of the work undertaken to date; and
- Future developments.

RESOLVED: That the presentation be received.

#### HWB3 UPDATE ON ONE HALTON PLACE BASED PARTNERSHIP - PRESENTATION

The Board received a presentation from the Place Director – Halton, which provided an update on the One Halton Place Based Partnership.

The new arrangements for the Integrated Care Systems (ICS) came into effect on 1 July 2023 and the aim was to improve outcomes and reduce health inequalities. Locally, the One Halton Partnership Board was the vehicle for delivery of national priorities, local priorities and Halton's Joint Health and Wellbeing Strategy. Membership of the Board included representatives from Local Authorities, NHS/Foundation Trusts and Primary Care.

The key priorities of the Board were to:

- Improve population health and healthcare;
- Tackle unequal outcomes and access;
- Enhance productivity and value for money; and
- Support broader social and economic development.

The presentation set out the context and provided an overview of progress and the current position. It also outlined how Halton compared to the rest of the North West and how the challenges in Halton would be addressed.

RESOLVED: That the presentation be noted.

#### HWB4 GENERAL PRACTICE ACCESS - PRESENTATION

The Board received a presentation from the Place Director – Halton, which provided an overview on the current position in relation to access to General Practice (GP) Services in Halton and the National Delivery Plan for recovering access to Primary Care, NHS England.

Access to GP services is one of the key enablers in supporting residents health and wellbeing.

The presentation outlined the following key points:

- Between April 2022 and March 2023, there had been a 29% increase in GP appointments;
- In March 2023, across the 9 Cheshire and Merseyside Places, Halton had the:
  - second highest number of appointments provided face-to-face;
  - second lowest of appointments provided by telephone;
  - joint third highest % of appointments provided by a GP; and
  - third highest % of appointments provided on the same day.
- Between April 2022 and March 2023, “Did Not Attend” appointments had increased;
- The 4 key areas to alleviate pressure and address the increasing demands on Primary Care:
  - Empowering patients;
  - Implementing modern General Practice access;
  - building capacity; and
  - cutting bureaucracy.

The Board discussed the above points and shared experiences of local issues regarding difficulties that residents in Halton had received. It was suggested that Healthwatch Halton and the Voluntary Sector would be able to gather together some intelligence from local communities about access to GP appointments.

RESOLVED: that the presentation be noted.

HWB5 HALTON & WARRINGTON COMMUNITY DIAGNOSTIC CENTRE - PRESENTATION

The Board received a report and presentation from the Director of Strategy and Partnerships, Warrington and Halton Hospitals (WHH) which provided an update on the WHH Foundation Trust's Plan for the provision of a Community Diagnostic Centre (CDC) in Halton.

It was noted that the Plan would be delivered in 3 phases:

- 1) Phase 1 - Warrington and Halton Diagnostics Centre at Nightingale building, Halton Hospital site. All works

completed and services fully operational with effect from 26 June 2023;

- 2) Phase 2 – Warrington and Halton Diagnostics Centre at Halton Health Hub, Runcorn Shopping City. Planned to be operational in late November 2023; and
- 3) Phase 3 – Warrington and Halton Diagnostics Centre at Captain Sir Tom Moore building, Halton Hospital site. Planned to be fully operational in Summer 2024.

RESOLVED: that the Board:

- 1) note the report and presentation; and
- 2) support the WHH Trust's plan for the development of the CDC at the Halton site.

#### HWB6 COMMISSIONING OF PRIMARY CARE DENTAL SERVICES

The Board received an update report from the Head of Primary Care (Cheshire and Merseyside) on the Commissioning of Primary Care Dental Services.

The report outlined that currently there was 13 dental practices and 2 Urgent Care Plus providers offering urgent dental care for patients that did not have a regular dentist. Despite ongoing challenges, there was increased activity across Cheshire and Merseyside. Commissioners were keen to explore the use of Dental Care Professionals i.e. Dental Therapists and Dental Nurses as these could free up Dental Performer time and support access for new patients.

The report also described the development of a Dental Improvement Plan which was approved by ICB System Primary Care Board in June 2023. An important part of the Plan was to develop access sessions for new patients across 60 practices in the ICB.

Commissioners were seeking an additional 30,000 appointments across Cheshire and Merseyside and would link with Local Authorities to identify suitable organisations who work with vulnerable people e.g. the homeless and asylum seekers. In addition to this, a number of Foundation Dentists would work across Cheshire and Merseyside from September this year.

The Board acknowledged that the update was

encouraging and Public Health asked to be part of future conversations about how children's dental health could be improved.

The Head of Primary Care agreed to:

- Circulate a copy of the Dental Improvement Plan to the Board;
- Confirm the number of practices that carry out NHS work; and
- Provide further updates to the Board in due course.

RESOLVED: that the report be noted.

*Head of Primary  
Care*

#### HWB7 PUBLIC HEALTH ANNUAL REPORT 2022-23

The Board received a report and presentation from the Director of Public Health, which provided an update on the development of Halton's Public Health Annual Report (PHAR).

Each year a theme would be chosen for the PHAR and for this year the focus would be on health improvement and prevention work to support the Halton community with their health in the different stages of their lives, as well as coping with pressures, such as the recent pandemic and the rising cost of living.

The report would use 4 key life stages as a guide to the issues including the following sections:

- 1) Start – looking at children's health and giving children and young people the best possible start to their lives;
- 2) Strong – acknowledges busy lives and a range of pressures, needing services to be flexible and accessible;
- 3) Live – providing community and work based services that allow people with busy working lives to take action for their health as well as get help when it is needed; and
- 4) Well – living healthy and independent lives as we age, reducing impact poor health can have on our health and social care system as well as for individuals.

The Plan also contained some free local offers e.g. mental health for men, free blood pressure checks, free help to stop smoking etc. It was suggested that the offers be promoted via Halton Housing Trust (HHT) via their magazine that was sent out to tenants. HHT also agreed to promote

and signpost a range of health services, discussed at the meeting, to their tenants during home visits.

RESOLVED: That the theme and development of the PHAR be noted.

*Halton Housing Trust*

HWB8 TERMS OF REFERENCE REFRESH

The Board considered a draft version of some updated Terms of Reference which took into account several changes that had occurred since the last refresh in 2019.

In November 2022, the Department of Health and Social Care set out new guidance for all Health and Wellbeing Board in light of the changes to the NHS, in particular, the establishment of the Integrated Care Boards (ICB) and Integrated Care Systems (ICS). The guidance was to support the ICB and ICP (Integrated Care Partnership) Leaders, Local Authorities and Health and Wellbeing Boards to understand how they should work together to ensure effective system and place-based working and to determine how best to deliver holistic care and prevention activities in the communities.

The Board previously received guidance that set out the functions of the Health and Wellbeing Board in relation to the new strategic partners and the revised Terms of Reference reflected these.

Members of the Board were invited to make any comments or suggestions before the end of July 2023. A final version of the document would be presented to the Board at the next meeting.

RESOLVED: that the Board:

- 1) note the refreshed draft Terms of Reference; and
- 2) feedback any comments by the end of July 2023.

*Health & Wellbeing Board*

HWB9 BETTER CARE FUND (BCF) 2022-23 YEAR-END RETURN

The Board received a report from the Executive Director of Adult Social Services, which provided an update on the Better Care Fund 2022/23 Year-End return, following its submission on 26 May 2023. The update provided the Board with information on the four national conditions which had been met, progress on the four national metrics, income and expenditure actual, year-end feedback and adult social

care fee rates.

RESOLVED: The Better Care Fund Year-End return for 2022/23 be noted for information.

*Meeting ended at 3.50 p.m.*

<b>REPORT TO:</b>	Halton Health Policy & Performance Board
<b>DATE:</b>	28 <sup>th</sup> November 2023
<b>REPORTING OFFICER:</b>	Director of Strategy and Partnerships, Warrington and Halton Teaching Hospitals NHS Foundation Trust
<b>PORTFOLIO:</b>	Health and Wellbeing
<b>SUBJECT:</b>	Halton Health Hub
<b>WARD(S)</b>	Borough-wide

## 1.0 PURPOSE OF THE REPORT

- 1.1 Presentation to update the board on the completion of the project to develop an out-of-hospital hub to deliver clinical outpatient services from Runcorn Shopping City and outline the opportunities for future development.

## 2.0 RECOMMENDATION: That the Board:

- i) Note the content of the presentation.

## 3.0 SUPPORTING INFORMATION

- 3.1 Supporting information to be delivered via a presentation to the Board.

## 4.0 POLICY IMPLICATIONS

- 4.1 None.

## 5.0 FINANCIAL IMPLICATIONS

- 5.1 All capital funding for the project was made available via Warrington and Halton Teaching Hospitals NHS Foundation Trust and Liverpool City Region Town Centre Fund for Halton Lea.

- 5.2 Additional revenue funding has been secured from the Trust to offset ongoing revenue requirements of the scheme, and this is supplemented through partner provider contributions.

- 5.3 There are opportunities for other local services and partners to deliver complementary services from the hub, both on a sessional basis, and through capital investment into phase 3.

## 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES



**6.1 Children & Young People in Halton**

Access to health services, in particular paediatric optometry, orthoptics, and dietetic therapies for Children and Young People in Halton has been enhanced since the establishment of the Halton Health Hub, owing to improved transport links and abundant free parking close to the Hub.

**6.2 Employment, Learning & Skills in Halton**

The Hub continues to attract footfall to the Runcorn Shopping City, and has been featured in presentational material to attract retailers and businesses to locate within the venue.

**6.3 A Healthy Halton**

The project has provided improved access to clinical services, which has reduced requirements for patients to travel out of Borough for healthcare.

There is potential for additional external providers to deliver complementary health and care services from the location.

**6.4 A Safer Halton**

None.

**6.5 Halton's Urban Renewal**

Alongside the regeneration of up to 1,000m<sup>2</sup> of unutilised retail space, the project has increased footfall into a key town centre asset.

**7.0 RISK ANALYSIS**

7.1 The project is governed in line with Warrington and Halton Teaching Hospitals risk controls. A detailed risk log is available, and mitigations are in place as appropriate.

7.2 The location has been inspected by the Trust's regulator, Care Quality Commission (CQC), ahead of launch to ensure compliance with all relevant legislation.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 A detailed Equality Impact Analysis (EIA) has been produced to offset any negative impacts where identified. The EIA has been through the appropriate governance processes as per Trust policy. A version of this EIA was appended to the Consultation Outcome Report as required. This has since been updated to reflect the final design of the Halton Health Hub. The most up-to-date version of the EIA is kept on file at the Trust and is available on request.

8.2 The EIA identifies a number of positive outcomes of the development, including reduced requirements for travelling out of Borough, and improved access

including free parking.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None identified.

**10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF  
THE LOCAL GOVERNMENT ACT 1972**

'None under the meaning of the Act.'

Three overlapping, wavy, horizontal bands in shades of green, light blue, and dark blue, creating a sense of movement and depth across the top half of the slide.

# Halton Health Hub Update

Lucy Gardner, Director of Strategy and Partnerships  
November 2023

# Context

In November 2022, the Trust began seeing patients within the Halton Health Hub, a bespoke outpatient clinic facility located within Runcorn Shopping City

Phase 1 of the Hub was funded through contributions from the Trust, Liverpool City Region Town Centre Commission and supported by both Halton Borough Council and One Halton

The Hub currently houses 5 clinical examination rooms, 2 interview rooms, associated clinical support facilities, adult and paediatric waiting spaces, and modern staff amenities.

Additional clinical and support space is currently under construction as part of the Trust's Community Diagnostic Centre programme



# Phase 1

Phase 1 of the project has now been in operation for almost 12 months and occupies 500m<sup>2</sup>, roughly half of the unit's total floor space

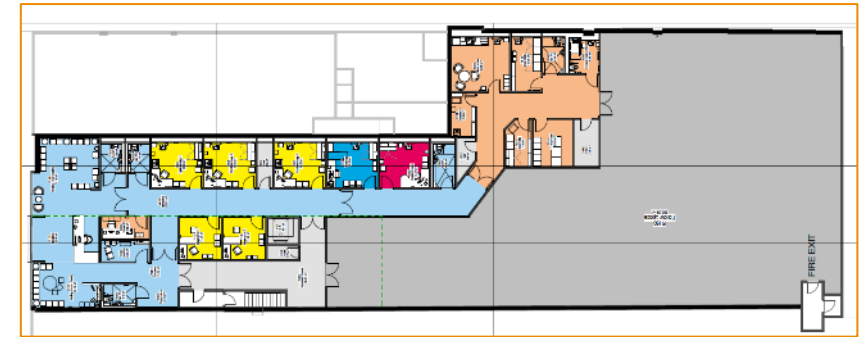
Services currently being delivered from the hub:

- Audiology (WHH)
- MSKCATS (WHH)
- Optometry (WHH)
- Orthoptics (WHH)
- Dietetics (WHH)
- GP Extended Access (Runcorn GP Federation)
- Smoking Cessation (Halton Borough Council)
- Tier 4 Weight Management (Halton Borough Council)

In addition, an Active Travel Service pilot funded through Liverpool City Region and operated by Wellbeing Enterprises will commence from October 2023

Between January 2023 and March 2023, the Hub hosted additional community health services:

- Runcorn Acute Respiratory Hub (Runcorn GP Federation)
- Covid / flu vaccination service (Halton Borough Council / NHS Cheshire & Merseyside)



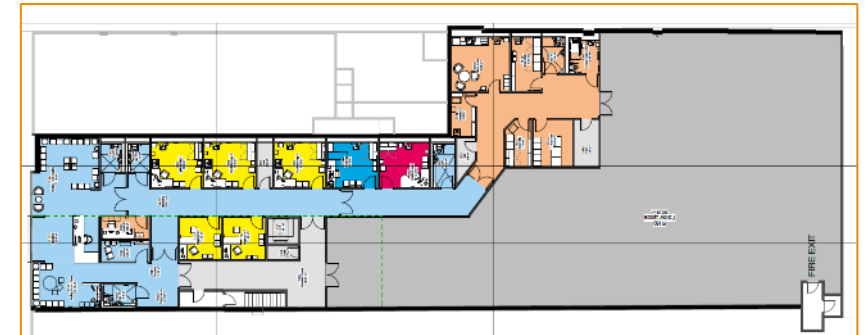
- In the first 10 months, the Hub has provided services to more than 3,000 patients across 3 providers.
- The Hub has attracted an estimated 5,000 additional visitors to Shopping City since its opening, including staff, carers and visitors, and contributing to the regeneration of Halton Lea
- £970k investment for Phase 1 design, development and equipment

# Phase 1 – Patient Feedback

Patient feedback since opening the Hub has been overwhelmingly positive, focussing on the clinical and waiting environment, and the ease of access to the Hub.

Some excerpts of feedback from patients, carers and staff are included below:

- *“The location of the centre is ideal for patients and staff, no car park costs and plenty of car park spaces. Patients feel happy and more comfortable. The environment is clinical and well maintained.”*
  
- *“The appointment was not at my normal GP practice but in Runcorn shopping city. It looked brand-new and clean and was easy to get to via bus.”*
  
- *“When we arrived there was toys and games for my little boy which kept him entertained even though we where not waiting long to be seen.”*
  
- *“The Location is handy to get to by car or on bus. When on reception a lot of people passing by come in enquiring what it is and all seem very intrigued. The staff amenities on site really make you feel comfortable.”*



# Phase 2 – Community Diagnostic Centre

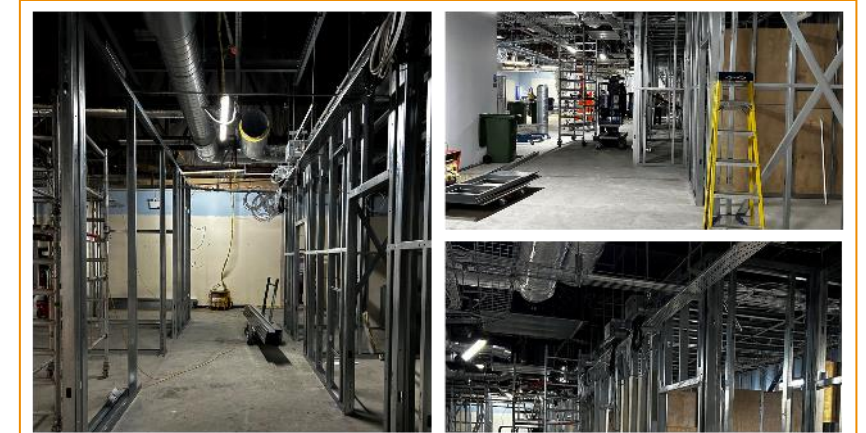
Phase 2 is planned to complete in December 2023 and will occupy 290m<sup>2</sup> of the unit, around 1/3 of the total floorspace.

Services within Phase 2 of the project include:

- Audiology
- Sleep Studies
- Ultrasound
- Respiratory
- Phlebotomy

The Community Diagnostic Hub will provide additional capacity for our residents, improving access to diagnostic services within Halton, as well as providing enhanced access to patients across Cheshire and Merseyside

Phase 2 is fully funded as part of a nationwide NHS England programme of work



- £2,843k investment for Phase 2 design, development and equipment

# Phase 3 and Future Opportunities

Following completion of the Hub's Community Diagnostic Centre, the facility has potential to accommodate additional services to operate from the Hub

This could be on a sessional basis, making use of available slots in the current timetable for the bookable rooms within Phase 1 and / or Phase 2

Alternatively, there is an opportunity to develop a bespoke space within the remaining fallow space at the rear of the unit

There is 200m<sup>2</sup> available for development, at an approximate capital cost of £1,150k (based on clinical space requirements)





## Thank you and questions

For further information, please contact the Trust's Strategy Team at:  
[whh.strategyteam@nhs.net](mailto:whh.strategyteam@nhs.net)

<b>REPORT TO:</b>	Health PPB
<b>DATE:</b>	28 <sup>th</sup> November 2023
<b>REPORTING OFFICER:</b>	Corporate Director, Chief Executive's Delivery Unit
<b>PORTFOLIO:</b>	The Leader
<b>SUBJECT:</b>	The Corporate Plan - The Big Conversation Update
<b>WARD(S)</b>	Borough Wide

## 1.0 **PURPOSE OF THE REPORT**

- 1.1 To share with Health PPB an update on 'The Big Conversation', which is integral to formulating a new Council Corporate Plan, to take effect from April 2024.

## 2.0 **RECOMMENDED: That**

- 1) the report be noted; and
- 2) that Health PPB continues to endorse the approach to facilitate 'The Big Conversation'.

## 3.0 **Supporting Information**

### 3.1 Background

The Big Conversation is about engaging with the public so that they understand the challenges that the Council is facing.

It is an approach between the Council and those who live or work in Halton to work together in order to create an improved borough in all aspects of everyday life.

A Stakeholder Analysis together with a Communications Plan was developed in order to generate and establish as many opportunities as possible to involve all our stakeholders in many different and varied ways.

The Big Conversation consultation is open until November 30<sup>th</sup> 2023.

- 3.2 Breakdown of responses by source, as of October 4<sup>th</sup> 2023:

**Total Number of responses: 777**

No reply	41
Inside Halton	37
HBC Staff	220
Councillors	-
Comms Flyer	9
Comms Poster	-
Comms Desktop	-
Comms Outdoor	-
Comms Partner	-
Comms Short URL	5
Comms Media	43
Comms Banner	-
Comms School	-
Comms Staff Poster	-
Comms Bin Wagon	-
Comms Meta Advert	197
Comms Organic Facebook	94
Comms Organic X	9
Comms Organic Threads	1
Comms Organic LinkedIn	4
Comms Chamber Newsletter	-
Comms Business Improvement Growth	-
Comms Carers Centre	116
Comms Adult Social Care	-
Comms TUC	1
<b>TOTAL NUMBER OF RESPONSES</b>	<b>777</b>

**3.3 Promotion, Consultation & Engagement:**

3.3.1 Consultation opportunity has been targeted to the following places / groups as detailed below. The number indicates the potential responses available;

- Social Media Impressions: 234,487 (times the survey was delivered to feeds on Facebook, Instagram, Messenger, Threads, LinkedIn and X)
- 1<sup>st</sup> Tuesday Business Event: 60
- Active Ageing Get Together Forum: 115

- Grangeway Community Centre: 30
- Dementia Group: 15
- Halton Patient Participation Group: 24
- Heads of Primary Schools: 60
- Runcorn Shopping city (specific) Adults: 44, Under 16`s: 6
- Widnes Market (specific) Adults: 30, Under 16`s: 10
- School Circular: 100 staff (serving 18,388 pupils)
- HBC Employees: 3000

Note that it's difficult to put an exact figure on the actual footfall for Runcorn Shopping Centre and Widnes Market, but based on estimated weekly footfall a conservative best guess would be:

Runcorn Shopping Centre: 500 – 1,000

Widnes Market: 500 – 1,000

### 3.3.2 Specific Forums and Venues attended / Scheduled to attend:

- **HBC Workforce**  
Email to HBC Workforce: July 28<sup>th</sup>  
  
Stephen Young Video message: September 5<sup>th</sup>
- **General Public**  
Inside Halton Magazine: Summer edition
- **Businesses**  
Halton Chamber of Commerce Network Meeting: September 5<sup>th</sup>  
  
Halton & Warrington Business Fair: November 9<sup>th</sup>  
  
Sci-Tech Daresbury Business Breakfast: November 10<sup>th</sup>  
  
Newsletters - Halton Chamber of Commerce  
Business Improvement Growth
- **Partners**  
Halton Patient Participation Group: September 28<sup>th</sup>  
  
Halton TUC  
  
Newsletters - Bridgewater Community Healthcare NHS  
Halton Patient Participation Group
- **Adult Services**  
Healthy & Active Ageing Event (Runcorn Shopping Centre):  
September 18<sup>th</sup>  
  
Dementia Group: Widnes (September 29<sup>th</sup>) and Runcorn  
(October 11<sup>th</sup>)

Partners in Prevention Event (Widnes Market): September 21<sup>st</sup>

Healthy and Active Ageing Event Get Together: Runcorn (October 9<sup>th</sup>) / Widnes (October 17<sup>th</sup>)

Newsletters – Young Carers and Adult Carers

- **Children Services**

Primary Schools Heads Meeting: September 21<sup>st</sup>  
(with an email follow up: September 21<sup>st</sup>)

Children`s Provider Network Meeting: October 4<sup>th</sup>

Halton Youth Cabinet: October 12<sup>th</sup>

Family Hub Centres – Kingsway (October 12<sup>th</sup>) and Windmill Hill (October 24<sup>th</sup>)

Riverside College: October 17<sup>th</sup>

Newsletters – Schools e-circular: September 4<sup>th</sup>

3.4 **Emerging Themes:**

3.4.1 A reminder that the 5 suggested themes identified were:

- Tackling inequality, helping those who are most in need
- Building a strong, sustainable local economy
- Supporting children, young people and families
- Improving health, promoting wellbeing and supporting greater independence
- Working towards a greener future

3.4.2 Level of agreement to all of the 5 suggested themes is very high, with the highest level of agreement being: 'Improving health, promoting wellbeing and supporting greater independence', and the lowest being 'Working towards a greener future'.

3.4.3 In terms of how can the Council can support these themes, the top 3 identified so far are:

- 'Provide opportunities for young people to engage with their local community and do things that interest them, keep them safe and make them happy'.
- 'Create vibrant town centres for everyone to enjoy across the Borough'
- 'Continue to ensure local people are able to enjoy the Borough`s parks and green spaces'

3.4.4 In terms of the ways our stakeholders can support the identified

themes, these were as follows:

- 'Spending money with local shops and businesses'
- 'Doing their best to stay healthy and active'
- 'Look out for children and the vulnerable'

3.4.5 Identifying other potential corporate themes, the top 3 were:

- Business / Regeneration / Employment
- Environment: litter / pavements / greenery overgrowth
- Crime / Police / Antisocial behaviour

3.4.6 Given only 1% of respondents were aged between 16-24 years to-date, the current desires and commitments could change significantly when we have engaged with a greater number of young people. Nationally, younger people appear to be more concerned about the climate change agenda, and therefore the lack of support for green spaces and recycling efforts may change in December once the final sum of raw data is available.

Nevertheless, there is evident support for the provision of learning and skills services that nurture young adults and provide sustainable career opportunities for the whole borough; which is subsequently supported by the desire of a strong local economy – which residents are willing to invest in.

3.5 **Gaps and actions required:**

3.5.1 Demographic – there is a clear gap in the 16 - 24 year olds age bracket.

Actions:

- Target young adults at Riverside college/post 16 education settings
- Planned visits to Family Hubs (Kingsway and Windmill Hill)
- Sharing the Big Conversation on forms of social media which would target specifically this age group, eg Instagram and Messenger.

3.5.2 Geographical areas – analysis has shown that response has been low in 4 wards, 2 in Widnes, (Ditton, Hale Village and Halebank and Bankfield) and 2 in Runcorn, (Halton Lea and Norton South and Preston Brook)

Action:

These areas will targeted by iWalkers on Saturday, November 4<sup>th</sup>. Ward members will be advised that this will be taking place.

3.5.3 Work on-going in terms of indenting specific stakeholder groups that we haven't actively engaged with as yet, such as Faith groups and the visually impaired.

3.5.4 The introduction of iWalkers, who wear screens that can feature multiple images and videos, as well as pass out flyers and collect

information. On the day they will also add someone to a Whatsapp group and send images for social media and updates about the days progress.

**3.6 Timeline:**

- Mid-October onwards – gaps identified and addressed
- November 30<sup>th</sup> 2023: Consultation ends.
- December 2023: Analysis undertaken – key priorities identified.
- January – February 2024: Summary developed / shared with stakeholders via drop-in sessions within council buildings and open engagement at community spaces.
- March 2024: Corporate Plan finalised and approved at key forums.
- April 2024: the New Corporate Plan is launched.

**4.0 POLICY IMPLICATIONS**

4.1 There are no specific policy implications at this stage; however ultimately there will be a new contemporary and relevant Halton Borough Council Corporate Plan.

**5.0 FINANCIAL IMPLICATIONS**

5.1 There will be a potential financial implication around the engagement of 2 iWalkers, at a cost of £1,200 per day for 8 hours.

**6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 The Corporate Plan is Halton Borough Council's key strategic document. This plan sets out the main vision, themes and values of the Council.

'The Big Conversation' will help to determine the Council's new set of priorities, which will be translated into the plan.

**7.0 RISK ANALYSIS**

7.1 The major risk is that we do nothing and roll out the same priorities as we have done in previous years. To this end the current Corporate Plan is a losing relevance and doesn't fully engage with either the workforce or the people of Halton in the contemporary environment.

7.2 The Council is serious about 'Reimagining Halton', aligned with that

commitment, this is a perfect opportunity to undertake a meaningful piece of work which will engage the people of Halton and together with our workforce determine a set of new priorities, which will make a difference and take Halton forward over the next 3 – 5 years.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 Equality and Diversity may well be a specific Corporate Plan priority, but if not then it will certainly underpin the Plan. An Equality Impact Assessment will be undertaken as part of the policy development process.

The consultation process has been designed to be inclusive.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 At this stage there is nothing specific to highlight within the context of this report; however there is a distinct possibility that as a result of 'The Big Conversation' climate implications will form one, or a key part of on, of the Council's key priorities.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None under the meaning of the Act.



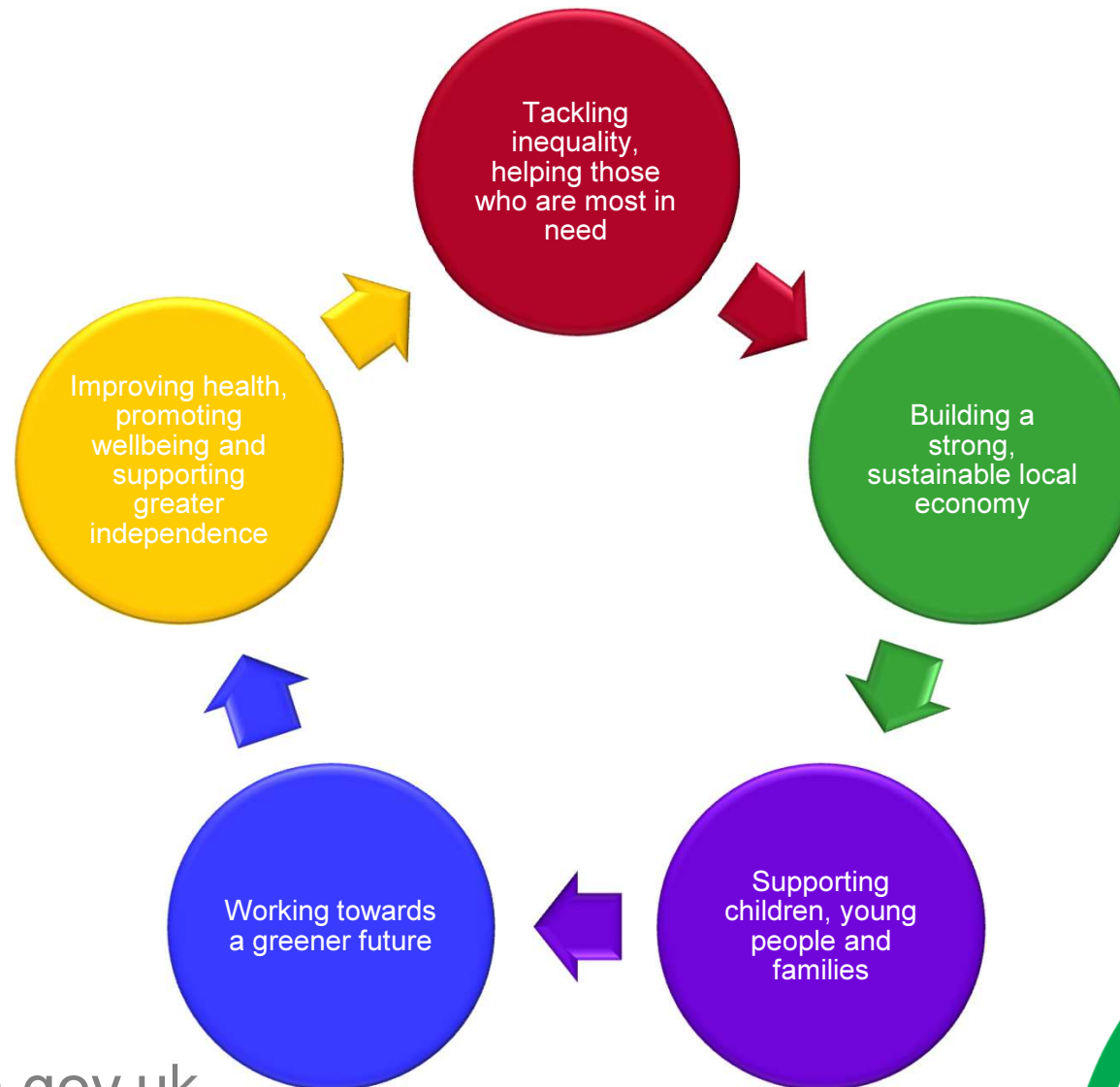
# The Corporate Plan & the Big Conversation Update



# Headlines

- 835 responses (October 16<sup>th</sup> 2023)
- Level of agreement to all of the 5 suggested themes is very high, with the **highest** level of agreement being: 'Improving health, promoting wellbeing and supporting greater independence', and the **lowest** being 'Working towards a greener future'.

# 'Corporate Plan' Survey Themes reminder



[www.halton.gov.uk](http://www.halton.gov.uk)



# Headlines cont....

## How can the Council support these themes?

The top 3 identified **so far** are:

- ‘Provide opportunities for young people to engage with their local community and do things that interest them, keep them safe and make them happy’.
- ‘Create vibrant town centres for everyone to enjoy across the Borough’
- ‘Continue to ensure local people are able to enjoy the Borough`s parks and green spaces’

# Headlines cont....

**What ways can our stakeholders support the identified themes?**

These were as follows:

- ‘Spending money with local shops and businesses’
- ‘Doing their best to stay healthy and active’
- ‘Look out for children and the vulnerable’

# Headlines cont.....

**Identifying other potential corporate themes, the top 3 were:**

- Business / Regeneration / Employment
- Environment: litter / pavements / greenery overgrowth
- Crime / Police / Antisocial behaviour

# Gaps & Actions required

1. Demographic – there is a clear gap in the 16 - 24 year olds age bracket.
2. Geographical areas – analysis has shown that response has been low in 4 wards, 2 in Widnes, (Ditton, Hale Village and Halebank and Bankfield) and 2 in Runcorn, (Halton Lea and Norton South and Preston Brook)
3. Identifying specific stakeholder groups that we haven't actively engaged with as yet, eg Faith groups and the visually impaired.

# Timeline:

- Mid-October onwards – gaps identified and addressed
- November 30<sup>th</sup> 2023: Consultation ends
- December 2023: Analysis undertaken – key priorities identified
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<b>REPORT TO:</b>	Health Policy & Performance Board
<b>DATE:</b>	28 November 2023
<b>REPORTING OFFICER:</b>	NHS Director – Halton Place
<b>PORTFOLIO:</b>	Health & Wellbeing
<b>SUBJECT:</b>	Primary Care Access - Update
<b>WARD(S):</b>	Borough-wide

## 1.0 PURPOSE OF THE REPORT

1.1 To present the Board with an update on Primary Care Access in Halton.

## 2.0 RECOMMENDATION: That the Board:

*i) That a presentation is received and noted.*

## 3.0 SUPPORTING INFORMATION

3.1 The presentation sets out the current position within Halton and also highlights the Primary Care Access Recovery Programme (PCARP) across Cheshire and Merseyside including Halton.

Primary care is one of the most dynamic and innovative parts of the health service. This was evidenced in the rapid and comprehensive rollout of the NHS COVID-19 vaccination programme.

Nationally, general practice is delivering more than a million appointments every day and half a million more every week than pre-pandemic. For the period April 2022 to March 2023, general practices delivered almost 705,000 appointments in Halton. This has been possible because of the hard work of staff and through a range of developments, which has grown the general practice workforce to meet rising demand and the needs of an ageing population.

However, the pandemic has changed the landscape, and the increase in practice capacity needs to keep pace with growing demand. Primary care, like many parts of the NHS and health systems globally, is under tremendous pressure – one in five people report they did not get through or get a reply when they last attempted to contact their practice. The Fuller Stocktake stated, “there are real signs of growing discontent with primary care – both from the public who use it and the professionals who work within it”.

The [Fuller Stocktake](#) built a broad consensus on the vision for integrating primary care with three essential elements: streamlining access to care and advice; providing more proactive, personalised care from a multidisciplinary

team of professionals; and helping people stay well for longer. That remains the intent and is part of the strategic objectives set out for integrated neighbourhood delivery and multi-disciplinary team working within Halton.

But before we can fully implement the wider reforms necessary to achieve this vision, we need to take the pressure off general practice and tackle the 8am rush. Although this plan supports all three elements of the Fuller Stocktake vision, it makes no excuses for focusing on the first.

This plan has two central ambitions:

1. **To tackle the 8am rush and reduce the number of people struggling to contact their practice.** Patients should no longer be asked to call back another day to book an appointment, and we will invest in general practice to enable this.
2. **For patients to know on the day they contact their practice how their request will be managed.**
  - a) If their need is clinically urgent it should be assessed on the same day by a telephone or face-to-face appointment. If the patient contacts their practice in the afternoon they may be assessed on the next day, where clinically appropriate.
  - b) If their need is not urgent, but it requires a telephone or face-to-face appointment, this should be scheduled within two weeks.
  - c) Where appropriate, patients will be signposted to self-care or other local services (eg community pharmacy or self-referral services).

This plan seeks to support recovery by focusing this year on four areas:

1. **Empower patients** to manage their own health including using the NHS App, self-referral pathways and through more services offered from community pharmacy. This will relieve pressure on general practice.
2. **Implement Modern General Practice Access** to tackle the 8am rush, provide rapid assessment and response, and avoid asking patients to ring back another day to book an appointment.
3. **Build capacity** to deliver more appointments from more staff than ever before and add flexibility to the types of staff recruited and how they are deployed.
4. **Cut bureaucracy** and reduce the workload across the interface between primary and secondary care, and the burden of medical evidence requests so practices have more time to meet the clinical needs of their patients.

3.2 NHS Cheshire and Merseyside is developing a Primary Care Access Recovery Plan to address the two central ambitions and four areas of focus identified above. This will be supported by detailed plans within each of the nine Places within the ICB area.

3.3 Progress will be monitored and reported over the next 12 months and beyond to ensure that the improvements outlined are effective as possible. It should be noted that improvement will take place over a period of time as many of the initiatives seek to retain and recruit primary care staff, implement new technology, embrace new ways of working and build capacity against a backdrop of significantly rising demand within general practice.

The presentation sets out the context and provides the latest overview of progress.

#### 4.0 **POLICY IMPLICATIONS**

4.1 Although the Primary Care Access Recovery Programme is set out within a national policy framework, its aims fit One Halton Partnership Board's ambitions to deliver timely, high quality and safe care within Halton's local communities.

#### 5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 PCARP is supported by a suite of national resources and toolkits to support implementation.

#### 6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

PCARP supports the Council's and the Health and Wellbeing Board's priorities for a Healthy Halton.

##### 6.1 **Children & Young People in Halton**

PCARP supports the Council's and the Health and Wellbeing Board's priorities for a Healthy Halton including for Children and Young People.

##### 6.2 **Employment, Learning & Skills in Halton**

Implementation of PCARP supports the NHS and Council's priorities for employment, learning and skills in Halton particularly in relation to building capacity and enlarging the workforce.

##### 6.3 **A Healthy Halton**

One Halton is a key stakeholder locally supporting the Council & Health and Wellbeing Board's priorities for supporting improved health outcomes and reducing health inequalities for Halton's population.

##### 6.4 **A Safer Halton**

Not applicable.

## 6.5 Halton's Urban Renewal

The NHS reforms to Integrated Care Systems and Place Based Partnerships seek to engender a whole place collaborative approach.

There will be a One Halton work stream around assets to understand the public estate that supports delivery (in the widest sense) in Halton and work towards collaborative planning of the public estate.

It is also imperative to plan appropriately for healthy communities utilising Public Health ensuring an evidence-led approach to meeting the future needs of Halton's population. One Halton will link into future regeneration schemes and developments in the Borough to ensure appropriate planning and system partner involvement. There are recent examples of joint working with the delivery of a Hospital Hub in Shopping City and the development of the Town Deal for Runcorn Old Town.

## 7.0 RISK ANALYSIS

7.1 PCARP is an ambitious plan to recover primary care services and Halton Place is progressing a series of key actions. Inevitably, improvements will take time to deliver as many of the initiatives seek to retain and recruit primary care staff, implement new technology, embrace new ways of working and build capacity against a back drop of significantly rising demand within general practice.

## 8.0 EQUALITY AND DIVERSITY ISSUES

8.1 In developing One Halton and health delivery moving over to NHS Cheshire & Merseyside, all services will continue to require equality impact assessments for any fundamental changes to service delivery to ensure equality and access to services is considered.

8.2 The One Halton Partnership Board and its sub-committees also has membership of Halton's Third Sector organisations and will actively work alongside them to consider equality and diversity issues. Many of Halton's voluntary sector organisations exist to support vulnerable, disadvantaged or disenfranchised cohorts of the community and have a reach often beyond public service delivery

## 9.0 CLIMATE CHANGE IMPLICATIONS

9.1 This report is for information only, therefore there are no environmental or climate implications as a result of this report.

## 10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None under the meaning of the Act.

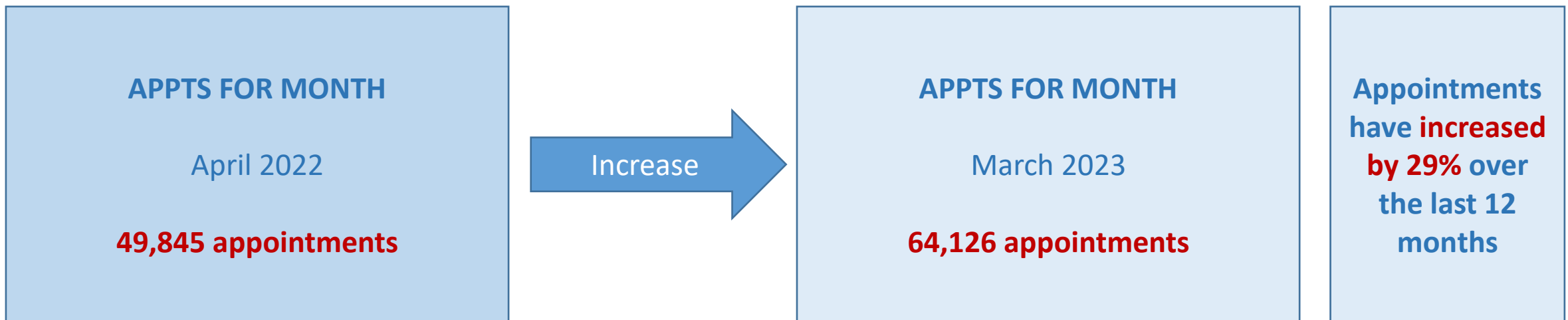
# Improving Access to General Practice

Halton

*28 September 2023*

# Halton – Access to Primary Care Overview

Period	Total Number of Appointments	Number	Percentage	Description
<b>YEAR</b> April 2022 to March 2023	<b>704,787</b>	514,229	73%	Face to Face
		361,230	51%	Provided by a GP
		378,707	54%	Provided on the day



# Halton – Access to Primary Care Overview

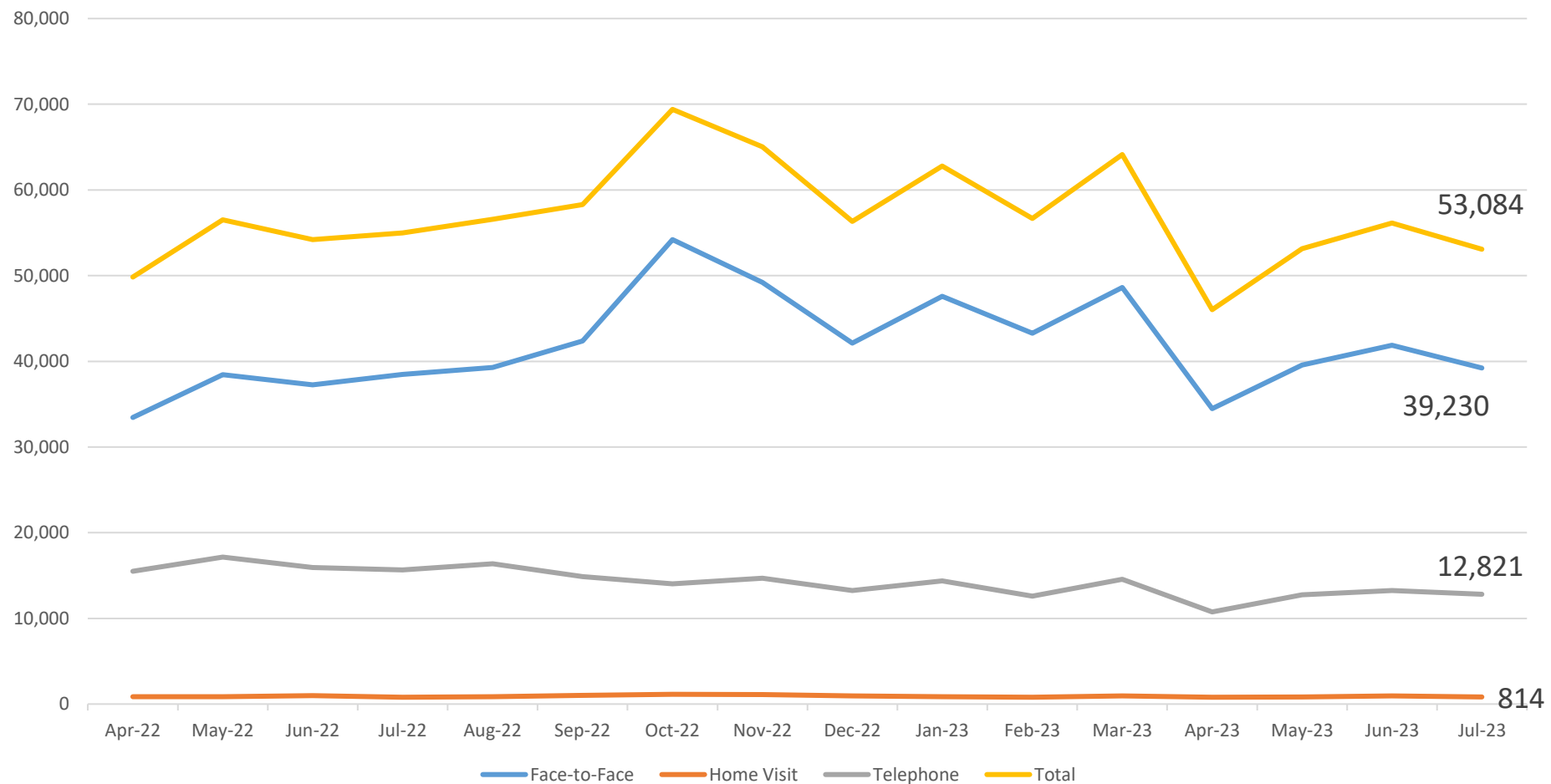
Period	Total Number of Appointments	Number	Percentage	Description
MONTH July 2023	53,084	39,230	<b>74%</b> C&M: 66.7% National 68.3%	Face to Face
		25,558	<b>48%</b> C&M: 49.8% National 45.9%	Provided by a GP
		25,520	<b>48%</b> C&M 46.9% National 43.6%	Provided on the day
		37,268	<b>70.2%</b> C&M 73.7% National 70.4%	Provided in 7 days
		43,410	<b>81.7%</b> C&M 86.2% National 83.5%	Provided in 14 days

In **July 2023**, across the nine Cheshire & Merseyside Places, Halton has:

1. Second highest % of appointments provided face to face (74%. Range 61% - 81%)
2. Third lowest % of appointments provided by telephone (24%. Range 16% - 37%)
3. Joint fourth highest % of appointments provided by a GP (48%. Range 46% - 56%)
4. Third highest % of appointments provided on the same day (48%. Range 43% – 54%)

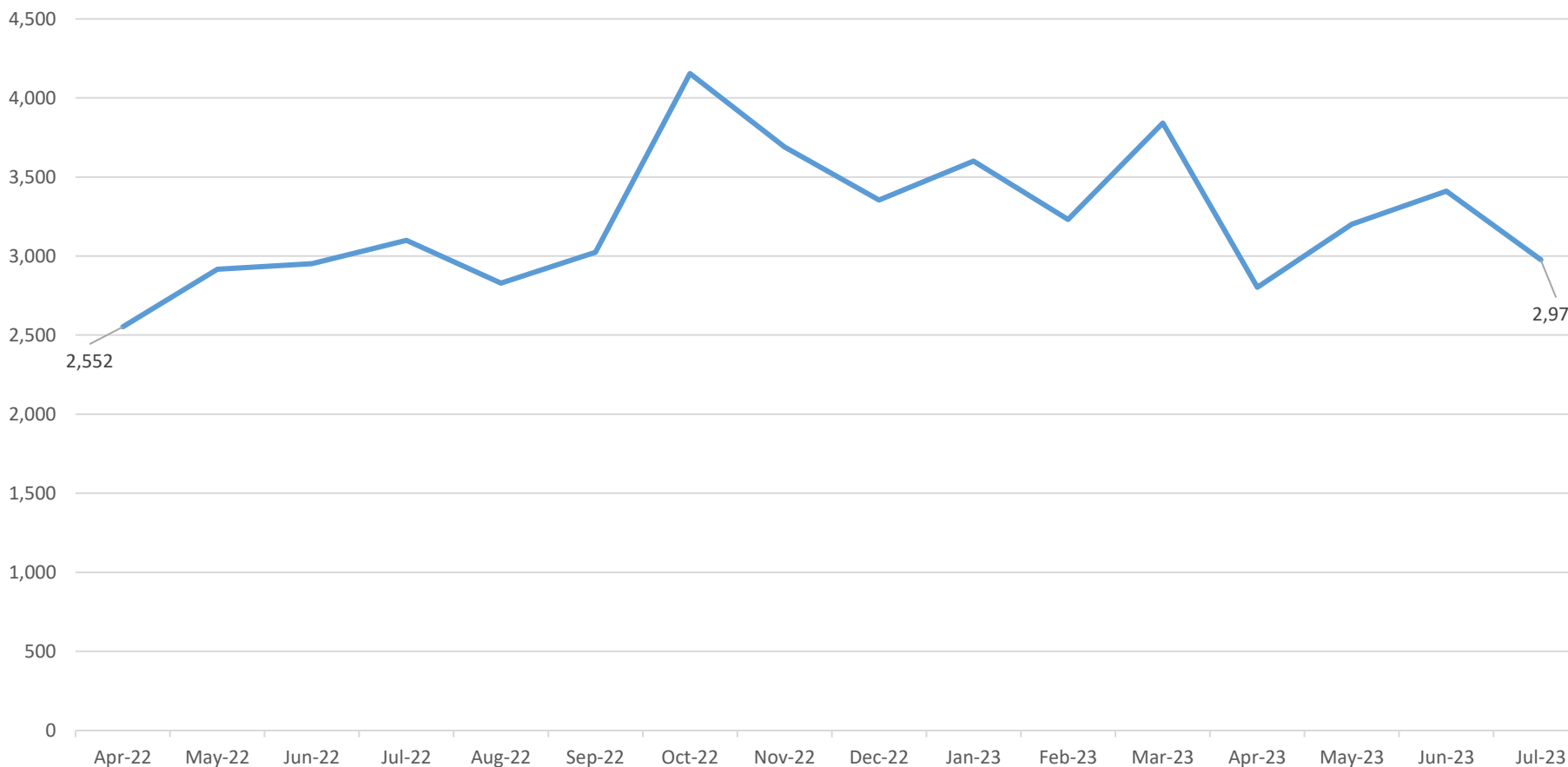


**Total Number of Appointments & Mode  
April 2022 - July 2023**



**Average number of Appointments per month = 57,076**

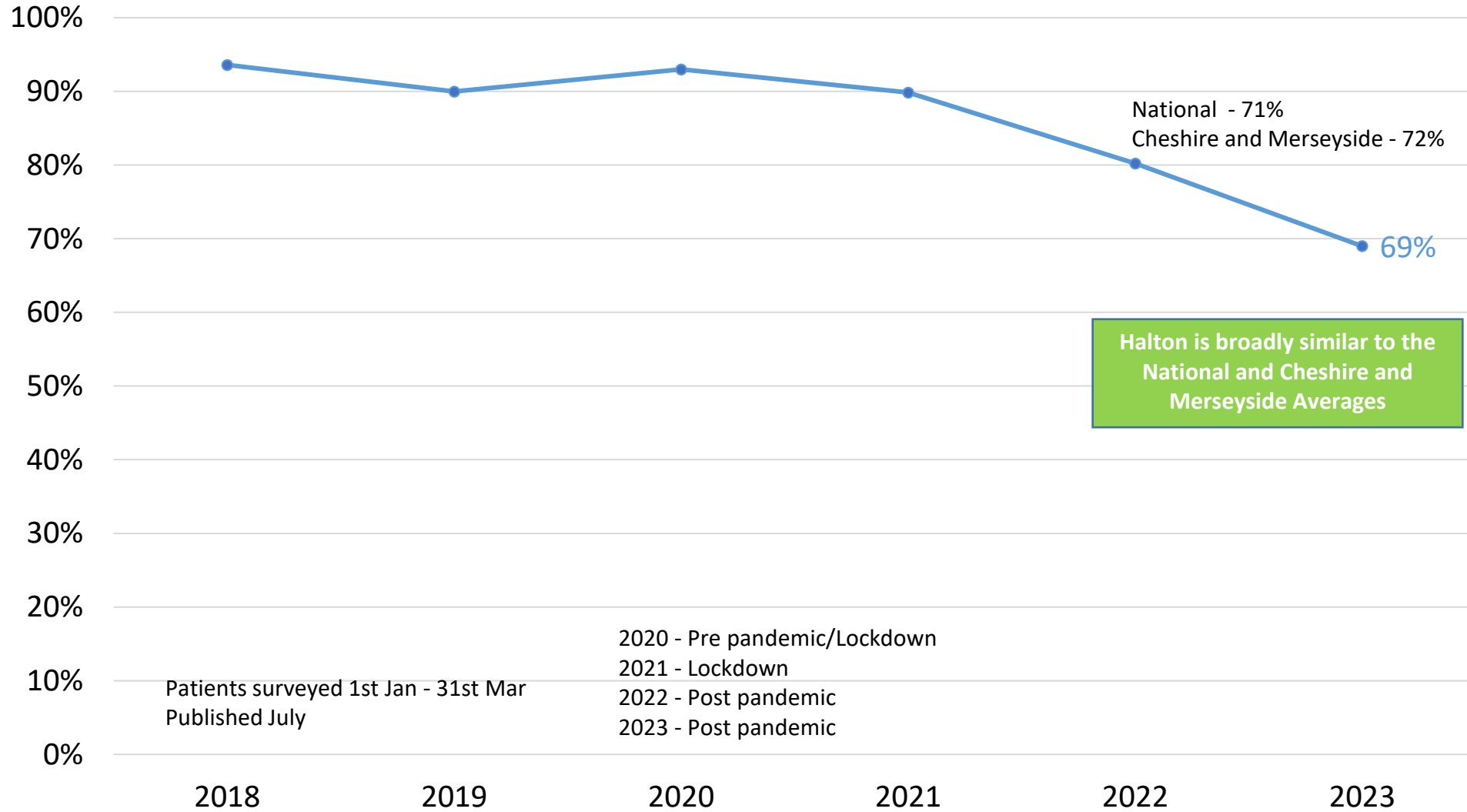
### Number of Did Not Attends April 2022 - July 2023



The number of DNAs has reduced

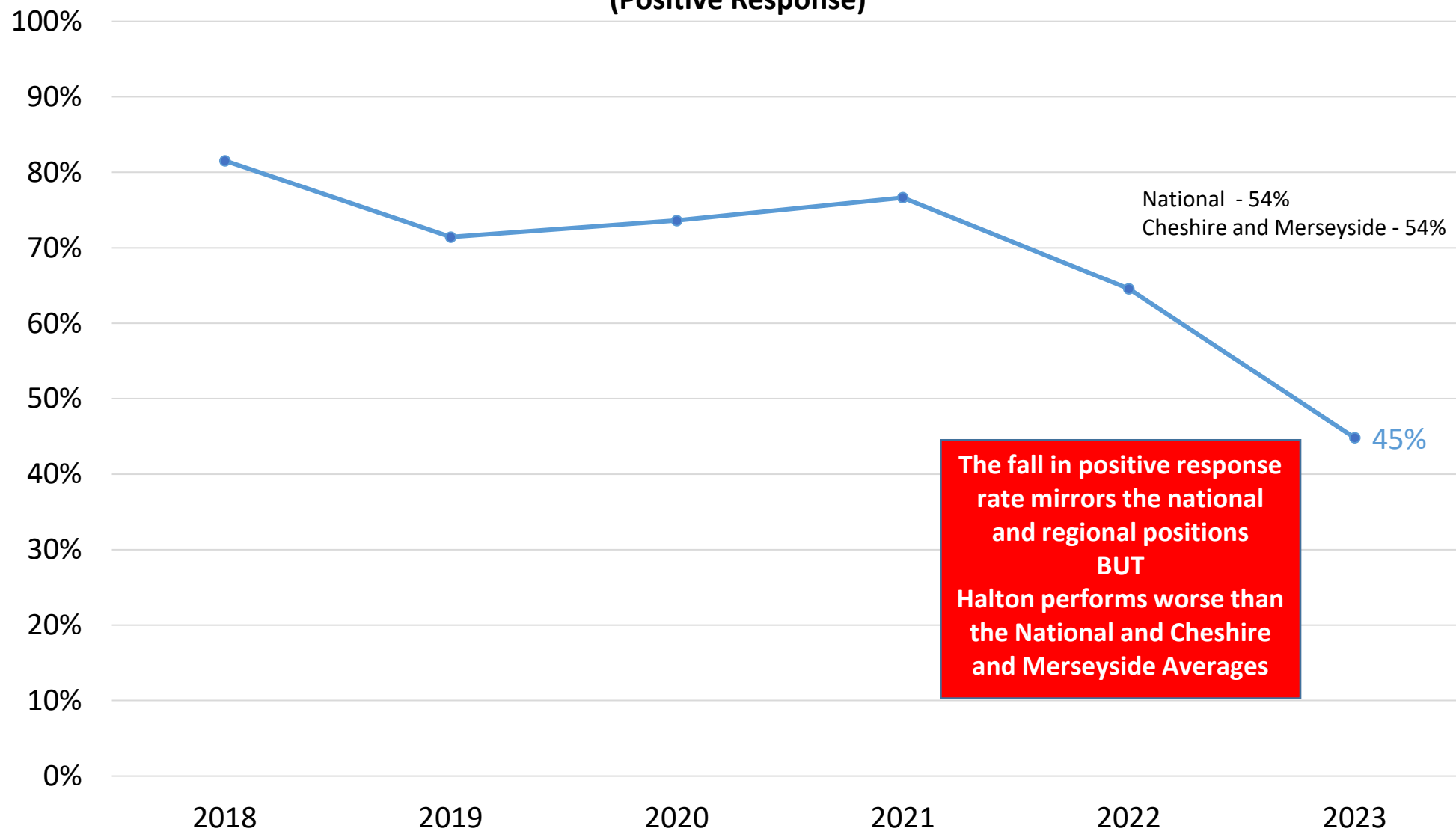
Average DNA rate per month = 5.65%

**General Practice National Patient Survey 2023**  
**Q32. Overall, how would you describe your experience of your GP practice?**  
**(Positive Response)**



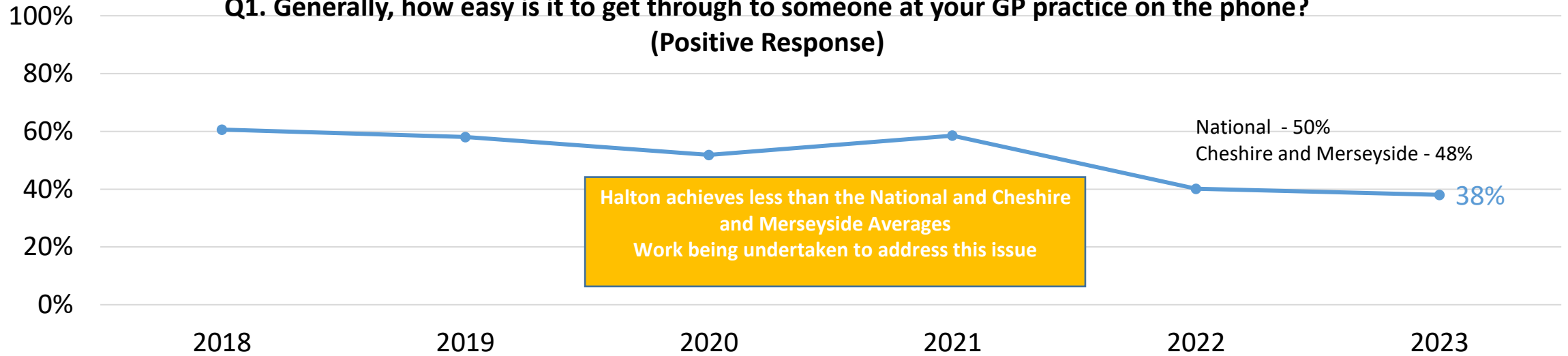
### General Practice National Patient Survey 2023

#### Q21. Overall, how would you describe your experience of making an appointment? (Positive Response)



### General Practice National Patient Survey 2023

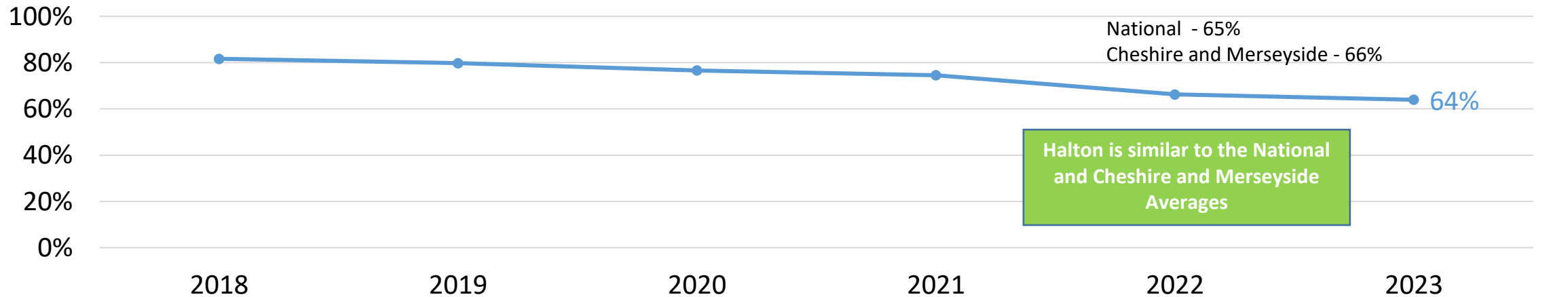
**Q1. Generally, how easy is it to get through to someone at your GP practice on the phone?  
(Positive Response)**



Halton achieves less than the National and Cheshire and Merseyside Averages  
Work being undertaken to address this issue

### General Practice National Patient Survey 2023

**Q4. How easy is it to use your GP practice's website to look for information or access services?  
(Positive Response)**



Halton is similar to the National and Cheshire and Merseyside Averages

# Recovering Access to Primary Care

## May 2023

### KEY AMBITION

- Tackling the 8AM rush to ensure patients can receive same day support and guidance from their local practice
- Enabling patients to know how their needs will be met when they contact their practice
- Plan is a step toward delivering the vision set out in the Fuller Report Next steps for integrating primary care
- To tackle the increasing demands on Primary Care, the plan focuses on four areas to alleviate pressure



1. Empowering patients



2. Implementing Modern General Practice Access



3. Building Capacity



4. Cutting Bureaucracy

# 1. Empowering patients

- General practice is delivering more than 1 million appointments every day
- Enabling patients to take a more active role in the management of their health and care by utilising technology that ;
  - i) provides patients with access to information to inform their health decisions;
  - (ii) removes inefficiencies and
  - (iii) increases flexibility for the workforce.
- Supporting patients to manage their own health and care, by rolling out tools and technology that give accurate and trusted information, and expanding services offered by community pharmacies.



1. Empowering patients

## Recommendations



### Improving information and NHS App functionality

- Enable patients in over 90% of practices to access core functions on the NHS App
- All practices to enable prospective medical record access for patients access by November 2023, enabling them to view information on immunisations, test results and consultations

### Increasing self-directed care

- Increase the number of self-referral options for patients - up to 50% more patients self-referring by March 2024
- Increase use of digital tools and remote monitoring eg. blood pressure control through home monitoring devices
- ICBs to support development of link worker role, connecting people to activities and community-based services

### Expanding community pharmacy

- Pharmacy First to launch before the end of 2023, enabling pharmacists to: i) supply prescription-only medicines and (ii) treat common health conditions
- Expand community pharmacy capacity to provide blood pressure checks and manage ongoing oral contraception
- Improve IT infrastructure and interoperability between community pharmacy and general practice
- Changes to various legislation to give community pharmacy contractors more choice about how they deploy staff and release pharmacists' time for more patient-facing services



# 2. Implementing Modern General Practice Access

- Patients shouldn't be told to call back another time to secure an appointment on the day.
- Better digital online contact tools and telephony, and changes to workflow have successfully increased accessibility for patients
- Enabling patients to know on the day how their request will be handled, based on clinical need and preference for appointment type, reducing long waits on the telephone and providing patients with more timely information

## Recommendations



### Better digital telephony

- All practices to transition to digital telephony by December 2025 to make full use of i) multiple call management; (ii) call-back functionality; (iii) call-routing and (iv) integration with clinical systems
- NHSE to support transition to digital telephony to those practices that commit by 1<sup>st</sup> July 2023
- 1000 practices to be utilising this technology by the end of 2023

### Simpler online requests

- NHSE to provide general practices with high quality online-consultation, messaging and booking tools by July 2023
- ICBs, Primary Care Networks and GPs to agree most appropriate tools to support transition to new model

### Faster navigation, assessment and response

- NHSE to invest in new National Care Navigation Training programme for up to 6500 staff starting in May 2023
- NHSE to fund higher-quality tools that enable the shift to online requests and enable all practice team to contribute to rapid assessment and response
- NHSE to support practices committing to transformation with extra capacity over the next two years - £13,500 per practice





# 3. Building capacity

- Up to £35 million funding for general practice fellowships in 2023/24
- There is a shortage of GPs to meet the needs of a growing and ageing population, with increasingly complex needs. A focused effort is required to bring new doctors into general practice and retain current GPs
- Ensuring general practice is utilising all resources to manage increasing demand, managing more patient requests and optimising the use of the full practice team

## Recommendations



### Larger multidisciplinary teams

- 26,000 more professionals in general practice and 50 million more appointments by 31 March 2024
- Funding for up to £385m for Additional Roles Reimbursement Scheme (ARRS) in 2023/24
- All primary care staff to be able to access suite of health and wellbeing offers and the Practitioner Health Service

### Increase in new doctors

- Up to £35 million of SDF funding available for GP fellowships in 2023/24
- Further expansion of GP specialty training – and make it easier for newly trained GPs who require a visa to remain in UK
- NHSE to work with partners to identify opportunities for other doctors, eg SAS doctors, to work in general practice multidisciplinary team

### Retention and return of experienced GPs

- DHSC agreement to make retire and return easier and protect NHS staff from higher tax charges driven by inflation
- Encourage experienced GPs to stay through the pension reforms announced in the Budget
- NHSE to launch campaign to encourage GPs to return to general practice and invest in GP retention schemes

### Primary care estates

- ICBs to work with local partners to better anticipate where housing developments are putting pressure on existing services
- Changes to local authority planning guidance this year to ensure due consideration of primary care capacity



# 4. Cutting bureaucracy

- 30% of GP time is spent on indirect patient care
- In some practices patient contacts have increased from 20% to 40% since before the pandemic; and there is a risk that GPs are overloaded and spend less time with patients. Reducing paperwork will improve efficiency
- Reducing the time spent by practice teams on low-value administrative work, and improving join up between primary and secondary care services, to give teams more time to focus on patients' clinical needs

## Recommendations



### Improving the primary – secondary care interface

- Secondary care to prioritise onward referrals to ensure referrals are not sent back to general practice and resulting in further delays
- NHS trusts to provide accurate and up to date fit notes and discharge letters, highlighting clear actions for general practice
- NHS trusts to establish their own call/recall systems for patient follow ups
- ICBs to ensure providers establish single routes for general practice and secondary teams to communicate rapidly
- ICBs to report progress on improving the interface with primary care

### Building on the Bureaucracy Busting Concordat

- Reduce requests to GPs to verify medical evidence, including by increasing self-certification, by continuing with the Bureaucracy Busting Concordat
- Examples include, working with the aviation industry to encourage clear, proportionate and pragmatic processes, so passengers with medical conditions who need to fly with medication/medical equipment can do so easily

Risk	Mitigations
<p><b>1. Workforce: Good access requires a resilient workforce with adequate staffing levels</b></p>	<ul style="list-style-type: none"> <li>• Number of national, ICB and local schemes which focus on supporting the workforce &amp; retaining staff.</li> <li>• New Place General Practice Workforce group established to build links with Training Hub to ensure accessing support &amp; training.</li> <li>• ICB Place Team working with PCN Clinical Directors &amp; Education Leads to ensure maximise support available e.g., PLT, networking, shared learning etc</li> <li>• Halton has 64.4 GP FTE per 100,000 patients – 4<sup>th</sup> highest across C&amp;M – and Practices are attracting new GPs to the area.</li> <li>• PCNs are expanding the number of roles in place as outlined in the national Additional Roles Re-imburement Scheme.</li> <li>• Transformation &amp; Development Plans in development which aim to improve access.</li> </ul>
<p><b>2. Patients &amp; Residents: Alternative access routes may be confusing to patients &amp; widen digital inequalities</b></p>	<ul style="list-style-type: none"> <li>• Implementation plans to consider and develop strategies to support local people in accessing services, working with partner organisations e.g. Community Connectors, Health Watch, VCA etc</li> </ul>
<p><b>3. Demand: Post pandemic recovery has led to unprecedented demand for services</b></p>	<ul style="list-style-type: none"> <li>• Re-introducing care navigation to ensure patients can access the right service at the right time.</li> <li>• Transformation &amp; Development Plans in development which aim to improve access.</li> </ul>
<p><b>4. Estate: General Practice estate may not have the capacity to expand to house additional staff</b></p>	<ul style="list-style-type: none"> <li>• Primary Care Networks developing Strategic Estates Plans which link to ICB Place Primary Care Estates plans.</li> <li>• Strategic Estates Group being re-established to improve co-ordination and collaboration across partners.</li> <li>• ICB Commissioned support for Place teams to assess the need and request Section 106 Infrastructure funding for new housing developments.</li> </ul>

<b>REPORT TO:</b>	Health Policy and Performance Board
<b>DATE:</b>	28 November 2023
<b>REPORTING OFFICERS:</b>	Place Director - Halton
<b>PORTFOLIO:</b>	Health & Wellbeing
<b>SUBJECT:</b>	Service Updates: Phlebotomy Musculo-Skeletal
<b>WARDS:</b>	Borough wide

## **1.0 PURPOSE OF THE REPORT**

1.1 To provide updates on Phlebotomy and Musculo-Skeletal Services.

**2.0 RECOMMENDED: That a presentation for both is received and noted.**

## **3.0 SUPPORTING INFORMATION**

3.1 The attached presentation provides an update on the latest position for both phlebotomy and musculo-skeletal services for Halton patients as well as details of planned increases in service capacity during the coming period.

## **4.0 POLICY IMPLICATIONS**

None. This is an update on the latest current operational status of the services.

## **5.0 FINANCIAL IMPLICATIONS**

None at this stage.

## **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

This supports the Council's and the Health and Wellbeing Board priorities for a Healthy Halton.

### **6.1 Children and Young People in Halton**

N/A

### **6.2 Employment, Learning and Skills in Halton**

N/A

**6.3 A Healthy Halton**

One Halton is a key stakeholder locally supporting the Council & Health  
This supports the Council's and the Health and Wellbeing Board priorities  
for a Healthy Halton.

**6.4 A Safer Halton**

N/A

**6.5 Halton's Urban Renewal**

N/A

**7.0 RISK ANALYSIS**

7.1 N/A

**8.0 EQUALITY AND DIVERSITY ISSUES**

Local services need to be sensitive to local population needs and be  
delivered in a way which ensures equality and access to services in is  
considered.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None identified.

**10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE  
LOCAL GOVERNMENT ACT 1972**

10.1 None under the meaning of the Act.

## Provision Update

Progress continues in the restoration of community-based phlebotomy services for Runcorn & Widnes.

### Runcorn

- Warrington & Halton Hospital (WHH) deliver Phlebotomy services through the Community Diagnostic Centre (CDC) at the Nightingale Building, Halton Hospital.
- Practice-based phlebotomy services are delivered from 2 x practices in Runcorn: Murdishaw & Castlefield's
- Overall capacity in Runcorn per week of 920 slots. Waiting list > 2 working days. Unused slots 5. DNA 50. Slots by site per week:
  - Nightingale - 770 slots. Breakdown of demand data unavailable by site due to multiple systems
  - Murdishaw – 48 slots.
  - Castlefields – 102 slots.
- WHH have recently expanding Phlebotomy capacity by adding 6 new phlebotomy chairs resulting in 150 slots per week
- From 30<sup>th</sup> October there will be additional capacity introduced at CDC Nightingale Building providing another 150 slots per week across extended hours.
- In December the CDC at Runcorn Shopping City will provide phlebotomy access Monday – Sunday providing 322 slots per week (of which 92 during Saturday/Sunday)
- Piloting the use of paperless ordering and booking including an online booking system - E-phlebotomy
  - Runcorn practices: Weavervale and Brookvale practices involved in the pilot.
  - >75% of patients are choosing to book their appointments online via the system.

## Provision Update

### Widnes

- Mersey and West Lancashire (previously St Helens and Knowsley) deliver Phlebotomy services at HCRC, Widnes.
- Practice-based phlebotomy services are delivered by the trust from 2 x practices in Widnes: Bevan Group Practice & Peelhouse Practice
- Overall capacity in Widnes per week of 521 slots, by site per week
  - HCRC - 341 slots. Waiting list > 3 working days. Unused slots 4. DNA 32.
  - Bevan – 72 slots. Waiting List > 11 working days. DNA 7. Unused slots 0. DNA 7.
  - Peelhouse – 108 slots. Waiting list > 3 working days. Unused slots 1. DNA 11.
- Slots are 10mins per patient to ensure compliance with Infection & Prevention control guidance, additional slots were made available to accommodate this change following the pandemic.
- Additional capacity is available to expand current Widnes provision from Nov-23 offering an additional 108 slots per week. Work has commenced with the Trust, PCN and practices to identify suitable venues to enable optimal access for Widnes registered patients. It is proposed that;
  - Bevans capacity will increase by 1 sessions per week to support demand
  - Fir park surgery to receive two sessions per week
- Work continues with the Trust, PCN and Practices to ensure Phlebotomy access is meeting demand, its accessible, equable, efficient and delivers economies at scale.

## Current Provision

Runcorn		Widnes	
Site	Access	Site	Access
CDC - Nightingale, Halton Hospital	Monday to Friday 09:00am – 4:40pm. 770 Slots per week Bookable via central telephone contact centre  Capacity will be extended from 30 <sup>th</sup> October between 08:00 and 18:30. Additional 150 slots per week	HCRC - Widnes	Monday to Friday 08:00am – 11:45pm 341 slots per week Bookable via online booking system
		Bevan Group Practice	Tuesday & Thursday 08:30am to 12:15pm (Additional clinic to start in November day to be confirmed) 08:30am to 12:15pm 108 appointments/week from November Practice registered patients only
Murdishaw Practice	Tuesday – Wednesday 09:00am - 1:00pm. 48 slots per week Practice registered patients only	Peelhouse Practice	Monday, Wednesday Friday 08:30am to 12:15pm 108 appointments/week Practice registered patients only
Castlefield's Practice	Monday to Friday 09:00am to 1:00pm. 120 Slots per week Practice registered patients only	Fir Park	Two morning clinics per week to start in November days to be confirmed 08:30am to 12:15pm 72 appointments/week. (from November) Practice registered patients only

All patients have access to centralised provision at the following sites: Nightingale Building Runcorn, HCRC Widnes, Bath Street clinic Warrington, Warrington Hospital, St Helens Hospital.

Children & Young People: Referral to outpatient's department Warrington Hospital or Bath Street, Warrington.



# Musculoskeletal Services

## Provision Update

- Musculoskeletal Clinical Assessment and Triage Service (MSKCATS) and the MSK Physiotherapy services is provided by Warrington & Halton Hospital (WHH)
- Patients can self-refer
- Delivery from the following sites:
  - Runcorn: Nightingale Hospital
  - Widnes: HCRC
  - Both operating Monday to Friday 9pm-5pm.
- MSKCATS waiting list average - 14 days.
- MSK physiotherapy service continues to experience high demand (613 referrals per month) impacting on waiting times up to 22 (Runcorn) – 34 (Widnes) weeks.
- Therapy services were heavily impacted by COVID-19 workforce redistribution incentives. The impact of this is still being seen in 2023 waiting times.
- MSK services is currently carrying vacancies due to the high demand for physios following the training disruptions of the COVID-19 pandemic and the introduction of First Contract Practitioners by NHSE.

## Developments

- MSKCATS recently adopted a GP practice care navigated self-referral model. This service change commenced in November 2022, stabilising the services deficit in capacity versus expected demand and reduced waiting times for assessment from 11 weeks to 14 days.
- WHH are implementing the following waiting list initiatives to reduce MSK Physio waiting times:
  - Trialling group consultation model pioneered in other NHS trusts.
  - Offering patients who have opted for Widnes clinic locations a shorter waiting time in Runcorn clinic.
  - Senior physio's reviewing referrals to ensure patients who need onwards referral are not having to wait.
- WHH has recruited 3.7 x WTE Physio First Contact Practitioners (FCP) on behalf of Runcorn PCN as part of the ARRS programme. It is envisaged that these Additional Role Reimbursement Scheme (ARRS) staff will support GP practices by offering assessment and management for patients with complex MSK issues.
- WHH is also engaged with Widnes PCN to understand if they have additional MSK ARRS needs which the service can support. Widnes PCN is assessing its options with regards to additional MSK FCP services.

## Current MSK Provision in Halton

Service	Description	Location	Operating Times	Referral Route	Indicative Waiting Times
<b>Musculoskeletal Clinical Assessment and Triage Service (MSK CATS)</b>	Assessment and Triage Service for musculoskeletal issues.	<b>Runcorn:</b> Nightingale Hospital, Hospital Way, Palace fields, Runcorn WA7 2DA <b>Widnes:</b> Widnes HCRC, Caldwell Rd, Widnes WA8 7GD	9-5 Monday Friday.	Care Navigated self-referral via GP practice.	Less than 2 weeks
<b>MSK Physio.</b>	Provides treatment of muscles, joints, tendons and ligament problems.	<b>Runcorn:</b> Nightingale Hospital, Hospital Way, Palace fields, Runcorn WA7 2DA <b>Widnes:</b> Widnes HCRC, Caldwell Rd, Widnes WA8 7GD	9-5 Monday Friday.	Requires referral from GP practice, Consultant, MSKCATS.	34 weeks* - Widnes Clinic 24 weeks* - Runcorn Clinic (Patient has a choice as to which they attend)
<b>Community Therapy Team.</b>	Domiciliary joint Physio and OT services providing treatment in the community.	Community based	9-5 Monday Friday.	Requires referral from GP practice, Consultant.	24 weeks*
<b>Chronic Pain Management Service.</b>	Provides support for patients who have chronic pain from MSK related issues.	Nightingale Hospital, Hospital Way, Palace fields, Runcorn WA7 2DA	9-5 Monday Friday.	Requires referral from GP practice, Consultant, MSK services as part of a treatment plan.	6-8 weeks**
<b>Occupational Therapy</b>	Occupational therapy provides practical support to overcome any barriers that prevent them from doing the activities (occupations) and aid recovery	Nightingale Hospital, Hospital Way, Palace fields, Runcorn WA7 2DA	9-5 Monday Friday.	Requires referral from GP practice, Consultant, MSKCATS.	8-12 weeks *

Other secondary services such as Orthopaedics, Podiatry, Rheumatology, Wellbeing, Weight Management, Women's Health and Neuro Rehab all form part of the MSK Pathway.

\* For routine first appointment. Referrals triaged as urgent are seen more quickly.

\*\* Patient is referred to Chronic Pain Management as part of a multifaceted treatment plan put in place by MSK team, consultant or GP and will be seen by other professionals during this wait.

<b>REPORT TO:</b>	Health Policy & Performance Board
<b>DATE:</b>	28 November 2023
<b>REPORTING OFFICER:</b>	NHS Director – Halton Place
<b>PORTFOLIO:</b>	Health & Wellbeing
<b>SUBJECT:</b>	One Halton Partnership - Update
<b>WARD(S):</b>	Borough-wide

### 1.0 PURPOSE OF THE REPORT

1.1 To present the Board with an update on One Halton Partnership.

### 2.0 RECOMMENDATION: That the Board:

*i) That a presentation is received and noted.*

### 3.0 SUPPORTING INFORMATION

3.1 Throughout the course of the past 18 months, the Health Policy and Performance Board has received update reports and presentations on One Halton Partnership both during and following the establishment of the NHS Cheshire and Merseyside Integrated Care Board.

3.2 The Health and Care Bill 2022 became effective on 1 July 2023 and set out new arrangements for Integrated Care Systems (ICS): ICS comprise a number of different elements:

- NHS Integrated Care Board (ICB) – this is the statutory NHS body
- Integrated Care Partnership – incorporating major partners including non-NHS organisations
- Place-Based Partnerships – these are not organisations, but collaborative partnership arrangements at Place level
- Provider Collaboratives – these bring together two or more NHS trusts to work together at scale to benefit their populations

These were the most significant changes to the health system in a decade which aim to improve outcomes and reduce inequalities.

3.3 One Halton Partnership Board comprises a wide-range of members including NHS bodies, local authority (including children's, adults, public health services), and non-NHS/non-statutory bodies. This Partnership Board is the vehicle for delivery of national priorities, local priorities and Halton's

Joint Health and Wellbeing Strategy. Achieving One Halton's ambitions is the responsibility of all partners working together to achieve a set of shared strategic objectives for Halton Place.

The presentation sets out the context and provides the latest overview of progress.

#### **4.0 POLICY IMPLICATIONS**

4.1 The original White Paper, *Joining Up Care for People, Places and Populations*, February 2022 set out the future ambition for shared outcomes with shared accountability and a single person accountable at place level. This means that as One Halton Place-Based Partnership further evolves and develops there will be a need to understand the potential impact on policies of all of the partner organisations, including the Council.

#### **5.0 OTHER/FINANCIAL IMPLICATIONS**

5.1 One Halton is a partnership arrangement as described above and therefore a collaborative of statutory and non-statutory organisations serving residents and patients within Halton. As One Halton further develops partners will need to understand more fully the resourcing and financial impacts on a collective basis at Place. This work is being progressed with partners.

#### **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

One Halton supports the Council's and the Health and Wellbeing Board priorities for a Healthy Halton.

##### **6.1 Children & Young People in Halton**

One Halton supports the Council's Health & Wellbeing Board's priority of improving levels of early child development. One of the system thematic priorities is Start Well.

##### **6.2 Employment, Learning & Skills in Halton**

One Halton shares the Council's priorities for employment, learning and skills in Halton. One of the system thematic priorities is Wider Determinants which encompasses employment, education and opportunities as priorities.

##### **6.3 A Healthy Halton**

One Halton is a key stakeholder locally supporting the Council & Health and Wellbeing Board's priorities for supporting improved health outcomes and reducing health inequalities for Halton's population.

##### **6.4 A Safer Halton**

One Halton supports the Council's priorities to create a safer Halton. Health and wellbeing are pivotal characteristics of resilient communities; a whole

system approach to place will intrinsically contribute to building a safer Halton.

## **6.5 Halton's Urban Renewal**

The NHS reforms to Integrated Care Systems and Place Based Partnerships seek to engender a whole place collaborative approach.

There will be a One Halton work stream around assets to understand the public estate that supports delivery (in the widest sense) in Halton and work towards collaborative planning of the public estate.

It is also imperative to plan appropriately for healthy communities utilising Public Health ensuring an evidence-led approach to meeting the future needs of Halton's population. One Halton will link into future regeneration schemes and developments in the Borough to ensure appropriate planning and system partner involvement. There are recent examples of joint working with the delivery of a Hospital Hub in Shopping City and the development of the Town Deal for Runcorn Old Town.

## **7.0 RISK ANALYSIS**

7.1 This will require further work to be undertaken when One Halton understands the range of services and activity that will be delivered at scale (Cheshire & Merseyside footprint) and those delegated to place (One Halton) provided by the different partners.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 In developing One Halton and health delivery moving over to NHS Cheshire & Merseyside, all services will continue to require equality impact assessments for any fundamental changes to service delivery to ensure equality and access to services is considered.

The One Halton Partnership Board and its sub-committees also has membership of Halton's Third Sector organisations and will actively work alongside them to consider equality and diversity issues. Many of Halton's voluntary sector organisations exist to support vulnerable, disadvantaged or disenfranchised cohorts of the community and have a reach often beyond public service delivery

## **9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 This report is for information only, therefore there are no environmental or climate implications as a result of this report.

## **10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None under the meaning of the Act.



**Cheshire and Merseyside**

# **NHS Cheshire and Merseyside**

## ***One Halton - Update***

**28 November 2023**

# Recap: Integrated Care System - Overview

## NHS Integrated Care Board (ICB)

Statutory Body  
Employer of NHS Staff  
All CCG staff and functions transferred to ICB

## Integrated Care Partnership

Cheshire and Merseyside Health and Care Partnership

## Place-Based Partnerships x 9

These are NOT organisations  
Working within a Place - NHS (ICB, trusts, primary care providers) local authorities, public health, voluntary sector, housing, education working in partnership

## Provider Collaboratives

C&M Acute and Specialist Trusts  
C&M Mental Health, Community, and Learning Disability  
Enabled by ICB Delegation



1. Since July 1st 2022, NHS Cheshire and Merseyside – an Integrated Care Board – has held responsibility for planning NHS services, including Primary Care, community pharmacy and those previously planned by clinical commissioning groups (CCGs).
2. As well as our chair and chief executive, membership of the board includes partner members drawn from local authorities, NHS trusts / foundation trusts and Primary Care.
3. Accountable to the people of Cheshire and Merseyside and in charge of NHS money, NHS Cheshire and Merseyside will ensure that the strategies developed by Cheshire and Merseyside Health and Care Partnership become a reality on the ground.
4. NHS C&M ICB is now over 1 year old and held its **Annual General Meeting on Thursday 28 September 2023.**

## Our vision

We are proud of Cheshire and Merseyside's record of collaborative working and there are countless examples of brilliant care, but there are also examples of variation in service which only serve to exacerbate health inequalities.

Our vision is for everyone in Cheshire and Merseyside to have a great start in life and get the support they need to stay healthy and live longer.

We will do this by working together, as equal partners, to support seamless, person-centred care and tackle health inequalities by improving the lives of the poorest fastest.

## We are Cheshire and Merseyside

We want everyone in Cheshire and Merseyside to have a great start in life and get the support they need to stay healthy and live longer

**2.7m**

Population

**18**

NHS Trusts

**355**

GP Practices

**9**

Local Authorities

**590**

Pharmacies

## Your Place



## Place-based partnerships

NHS Cheshire and Merseyside will arrange for some of its functions to be delivered and decisions about NHS funding to be made in the region's nine Places – Cheshire East, Cheshire West, Halton, Knowsley, Liverpool, Sefton, St Helens, Warrington, Wirral.

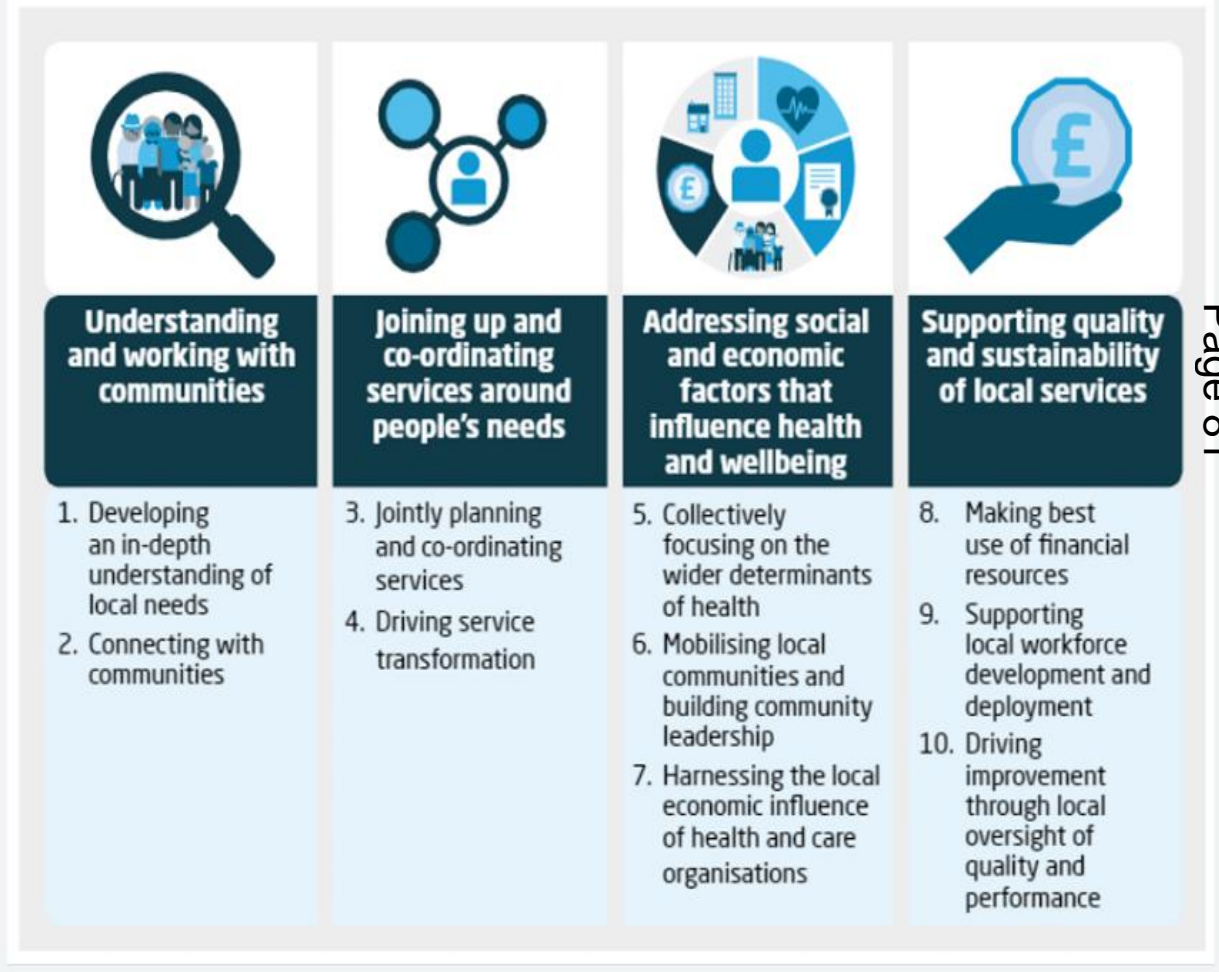


While NHS Cheshire and Merseyside will retain overall accountability for NHS resources deployed at Place-level, Place-based partnerships – led by Place Directors – will have freedom to design and deliver services according to local need.

The infographic below - courtesy of the King's Fund - sets out the key functions of Place-based partnerships:

Figure 1 Key functions of place-based partnerships

K



# C&M ICB - Key Priorities

1

## Improve population health and healthcare

- Reduce deaths from cardiovascular disease, suicide and domestic abuse
- Reduce levels of obesity
- Reduce harm from alcohol
- Provide high quality, safe services
- Provide support to all those experiencing 'long Covid'
- Provide integrated, high quality, mental health and wellbeing services for all people requiring support from low levels of intervention to crisis management and inpatient care
- Underpin improvements in health and healthcare with Research and Innovation by supporting collaboration between Cheshire and Merseyside academic partners and making them a key part of Cheshire and Merseyside Health and Care Partnership

3

## Enhance productivity and value for money

- Prioritise making greater resources available to prevention and well-being services
- Plan, design and deliver services at scale (where appropriate) to drive better quality, improved effectiveness and efficiency
- Maximise opportunities to reduce costs by procuring and collaborating on corporate functions at scale
- Develop whole-system plans to address workforce shortages and maximise collaborative workforce opportunities
- Secure value for money
- Develop a whole system Estates Strategy

2

## Tackle unequal outcomes and access

- Reduce the life expectancy gap in the most deprived communities, in children and those with mental health conditions and help people live extra years in good health
- Improve early diagnosis, treatment and outcome rates for cancer
- Improve waiting times for children and adult mental health services
- Target those with chronic diseases so they access services especially those in our most deprived areas
- Reduce the impact of poor health and deprivation on educational achievement

4

## Support broader social and economic development

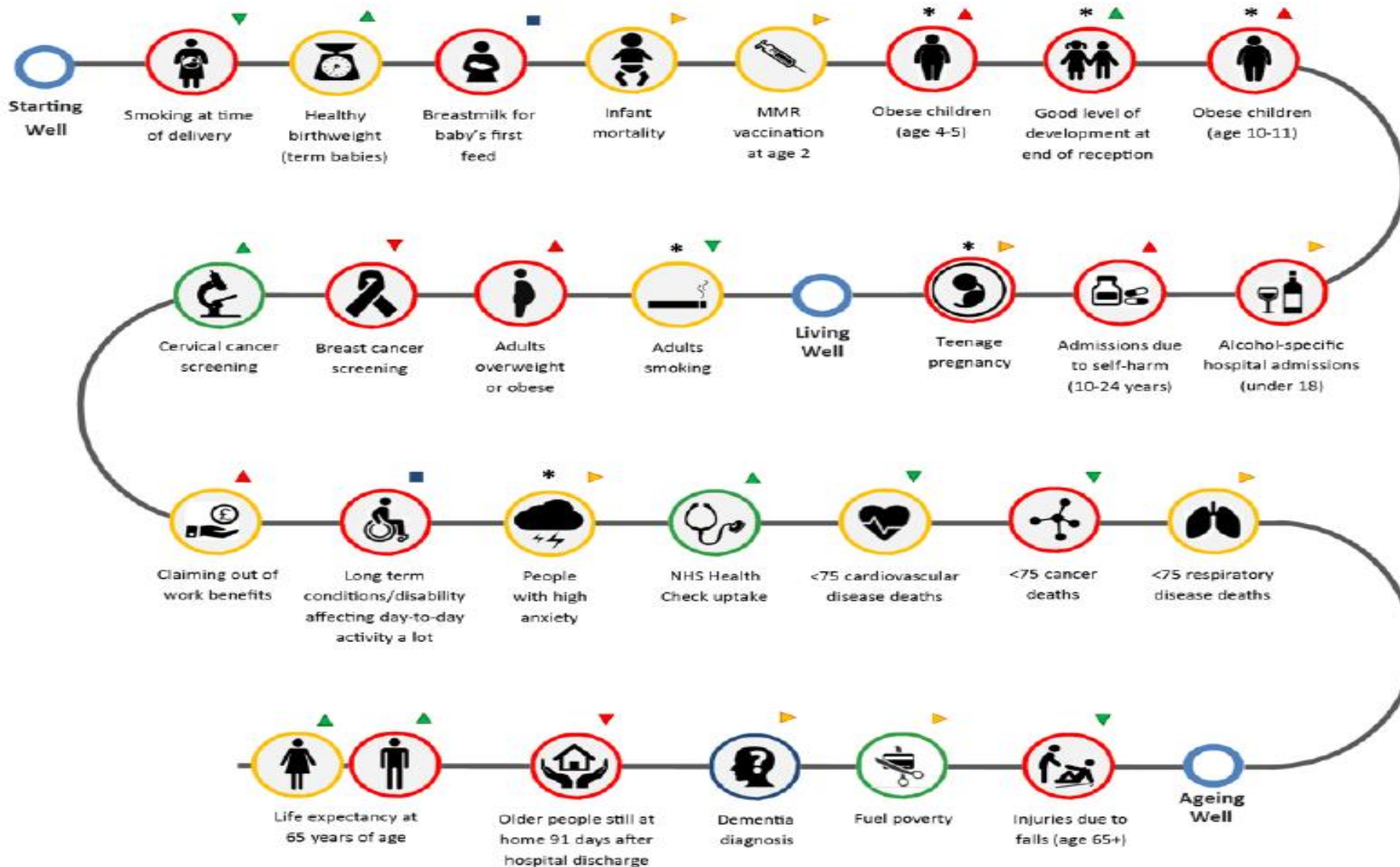
- Embed a commitment to social value in all our partner organisations
- Establish an 'Anchor Institution' in Cheshire and Merseyside, offering significant employment opportunities for local people
- Integrated Care System will be involved in regional initiatives to develop economy and support communities in Cheshire and Merseyside
- Develop a programme in schools to support mental wellbeing of young people and inspire a career in health and social care
- Work with Local Economic Partnerships to connect partners with business and enterprise.

# C&M ICB – Aligned to Halton Place Priorities

## Halton's life course statistics 2021

A comparison to the North West

\* INDICATES NATIONAL DATA COLLECTION HAS BEEN AFFECTED BY COVID-19



### HALTON FACTS

#### Population

About **129,400** people live in Halton.

By 2041, this is projected to change:

age 0-14 ↓ 11%  
age 15-64 ↓ 5%  
age 65+ ↑ 38%

#### Deprivation

**48.7%** of Halton's population live in the top **20%** most deprived areas in England.

#### Child Poverty

**19.6%** of children aged 0-15 live in relative low income households

### KEY

#### Direction of travel

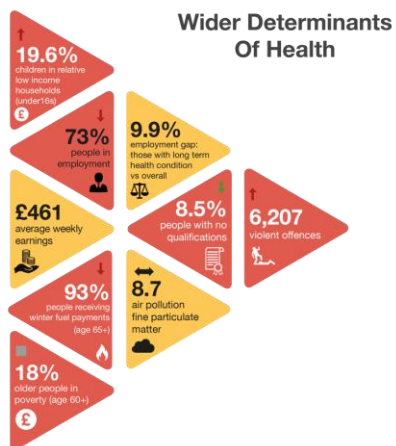
- ▲ Improved since last period
- ▶ Similar to last period
- ▼ Worse than last period
- No Comparator

#### Statistical significance to North West

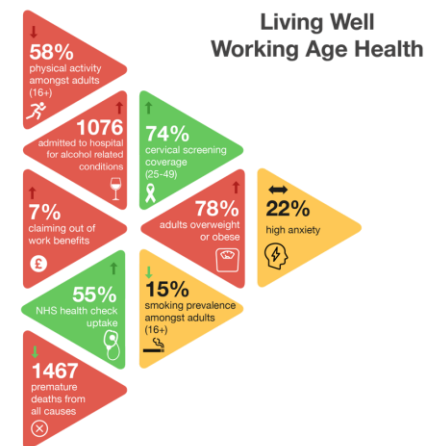
- Better
- No different
- Worse
- Lower

For more information, please contact Halton Borough Council's Public Health Intelligence Team: [health.intelligence@halton.gov.uk](mailto:health.intelligence@halton.gov.uk)

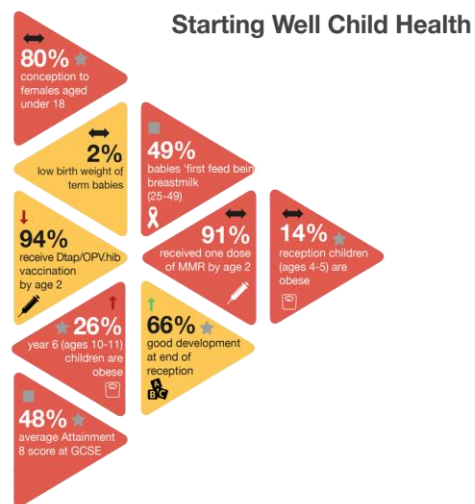
Icons made by Flaticon and available here: [www.flaticon.com](http://www.flaticon.com)  
Concept developed from Gateshead PHAR 2013/14 and Leicestershire PHAR 2015



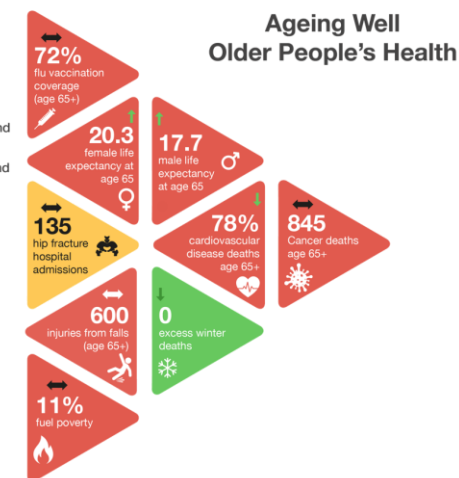
**The Wider Determinants of Health:** Improve the employment opportunities for the people of Halton in particular where it affects children and families.



**Living Well:** Provide a supportive environment where systems work efficiently and support everyone to live their best life



**Starting well:** Enabling children and families to live healthy independent lives



**Ageing Well:** Enabling older adults to live full independent healthy lives

# One Halton

## One Halton's Ambition

To improve the health and wellbeing of the population of Halton by empowering and supporting local people from the start to the end of their lives by preventing ill health, promoting self-care and independence, arranging local, community based support and ensuring high quality services for those who need them

## Leadership, Oversight and Delivery Arrangements:

Achievement of our ambition and delivery of our strategic priorities is led and overseen by the One Halton Place Based Partnership Board.

**Our vision for neighbourhood working is greater than just health and social care and moves beyond treating symptoms to addressing the underlying causes of poor health and wellbeing and supporting people to have a good life.**

## Strategic Priorities and Goals:

<b>Wider Determinant of Health:</b> Improve the employment opportunities for the people of Halton in particular where it affects children and families.	<b>Starting Well:</b> Enabling Children and Families to live Healthy Independent Lives.	<b>Living Well:</b> Provide a supportive environment where systems work efficiently and support everyone to live their best life.	<b>Ageing Well:</b> Enabling Older Adults to live Full Independent Healthy Lives.
<b>Goal:</b> A more financially active and enabled community who are employed in good jobs that provide greater financial stability, improves quality of life and provide better health outcomes	<b>Goal: More financially stable,</b> informed and supported families with children who have better health outcomes	<b>Goal:</b> A more supported and enabled community who are able to understand where to go to get the support and care they need in time.	<b>Goal:</b> A more active and independent older population who are able to live at home or are supported to get the care they need.

## Integrated Neighbourhood Working:

**One Halton partners have also agreed that the development of an integrated neighbourhood way of working as fundamental to our success.**

Building on the good work completed to date including learning from the pandemic

Delivering both the NHS Operational Plan and the Long Term plan

Vulnerable Groups

Marmot and All Together Fairer

Inequalities/PHM/Core20+5

# Addressing the Challenges in Halton

**We want to:**

Create a better understanding the impact of poverty and health inequalities within local communities  
 Focus on wider determinants using Marmot priorities  
 Focus on delivery of CORE20PLUS5  
 Focus on prevention to tackle the drivers of the life expectancy gap locally  
 Social Prescribing

**Some early One Halton Partnership priorities. Further work being undertaken.**

**STARTING WELL**

**Family Hubs**  
 (infant feeding; perinatal MH;  
 Parenting; Parent and Carer  
 Panels; Start for Life)

**LIVING WELL**

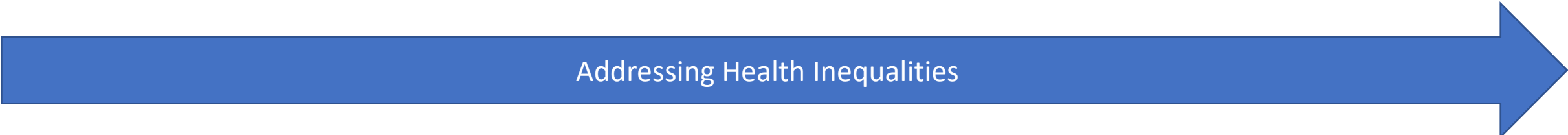
**Prevention**  
 (screening, healthy weight,  
 CVD)  
**Mental health and Wellbeing**  
 (self-harm, talking therapies)  
**EMI Health Checks**

**AGEING WELL**

**End of Life**  
**Social Isolation**

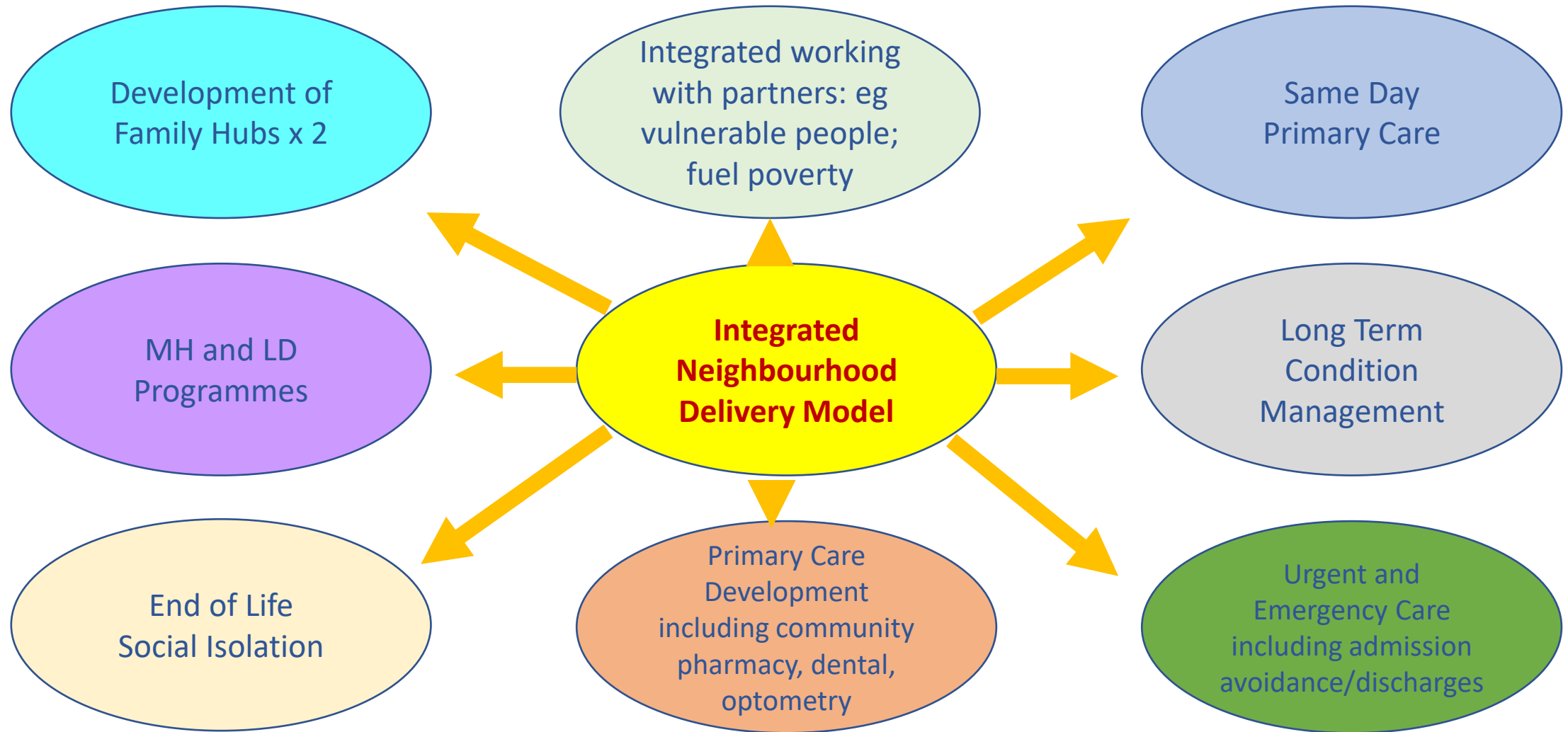
**Integrated Neighbourhood  
 Delivery Model**

**Same Day Primary Care**





# Some examples of things we are working on:



# Summary: working together in Halton to:

1 Deliver NHS Operational Planning Priorities 2022/23 and local Place priorities and Halton Joint Health and Wellbeing Strategy.

2 Improve the **employment opportunities** for the people of Halton in particular where it affects children and families.

3 Enable **Children and Families** to live Healthy Independent Lives.

4 Provide a **supportive environment** where systems work efficiently and support everyone to **live their best life**.

5 Enable **Older Adults** to live **Full Independent Healthy Lives**.

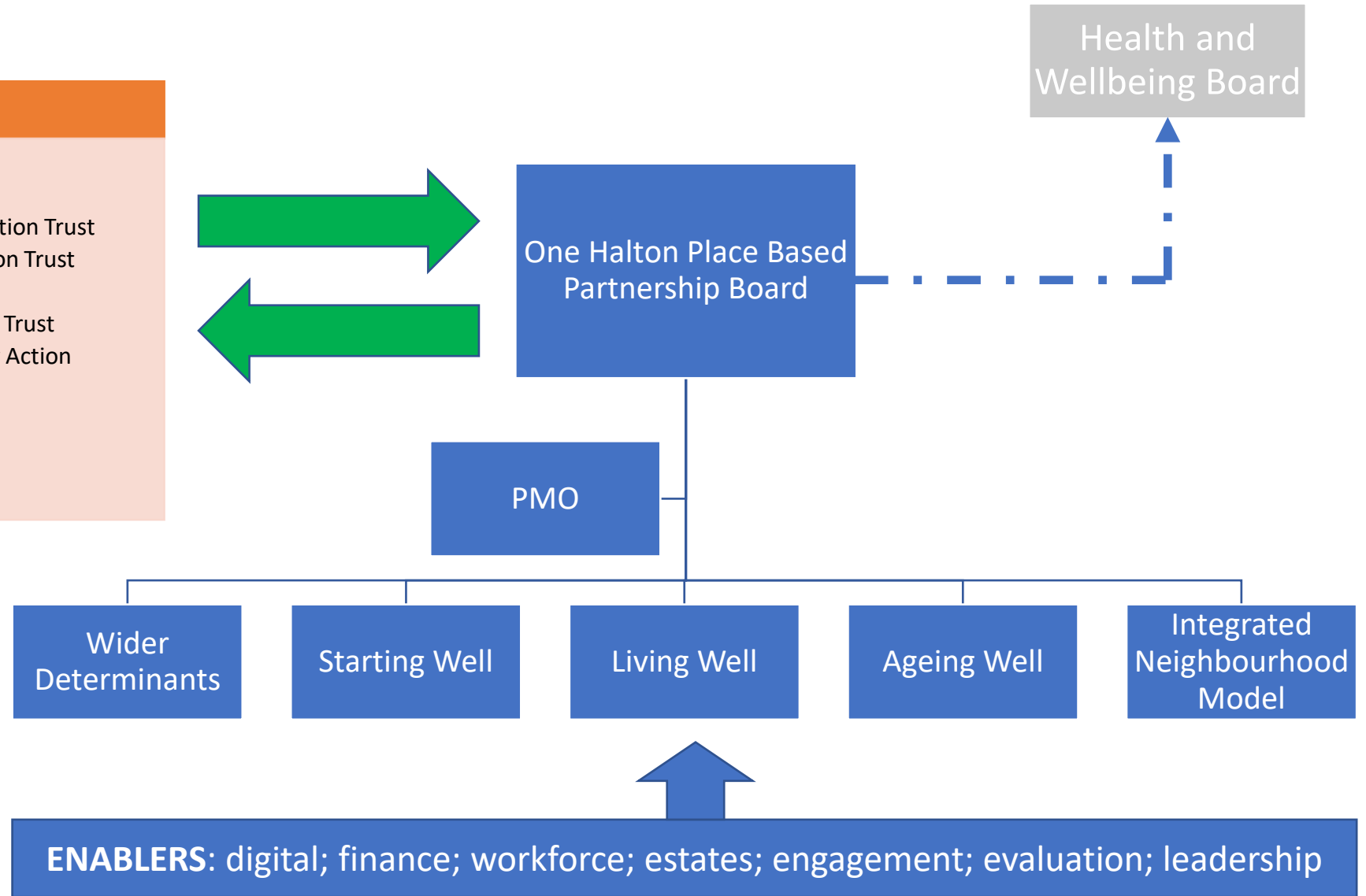
6 Ensure that **primary care** is fully integrated into delivery mechanisms in Halton.

7 Mitigate the impact of **cost-of-living** increases on our population and **support the most vulnerable**.

8 Maximise the use of **public sector estate** and ensure that this is linked to Halton Council's local plans and regeneration work.

## Partner Organisations

- NHS Cheshire and Merseyside
- Halton Borough Council
- Bridgwater Community Healthcare NHS Foundation Trust
- Warrington and Halton Hospitals NHS Foundation Trust
- Healthwatch Halton
- St Helens and Knowsley Teaching Hospitals NHS Trust
- Halton and St Helens Voluntary and Community Action
- Widnes Primary Care Network
- Runcorn Primary Care Network
- Mersey Care NHS Foundation Trust
- Halton Housing



<b>REPORT TO:</b>	Health Policy & Performance Board
<b>DATE:</b>	28 <sup>th</sup> November 2023
<b>REPORTING OFFICER:</b>	Executive Director, Adults
<b>PORTFOLIO:</b>	Adult Social Care
<b>SUBJECT:</b>	Halton Safeguarding Adults Board Annual Report 2022-23
<b>WARD(S)</b>	Borough Wide

## 1.0 **PURPOSE OF THE REPORT**

1.1 To provide the Board with a copy of the Halton Safeguarding Adults Board Annual Report 2022-23.

## 2.0 **RECOMMENDED: That**

- 1) the report be noted; and
- 2) the Board approves the Annual Report for publication

## 3.0 **SUPPORTING INFORMATION**

3.1 Under the Care Act 2014, Safeguarding Adults Boards are responsible for producing an Annual Report setting out achievements of the SAB and highlighting priorities for the following year.

3.2 The HSAB Annual Report has been developed in conjunction with HSAB partners to ensure the report encompasses a multi-agency approach. The Annual Report includes performance data and comparisons between years; achievements in the year and highlights areas of good practice regarding safeguarding in the borough.

3.3 Once approved, the Annual Report will be published widely and shared with HSAB member organisations through the SAB board meetings.

## 4.0 **POLICY IMPLICATIONS**

4.1 The HSAB Annual Report is in line with current regulations and guidance from the Care Act 2014

## 5.0 **FINANCIAL IMPLICATIONS**

5.1 None identified.

## 6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

- 6.1 **Children & Young People in Halton**  
None identified.
- 6.2 **Employment, Learning & Skills in Halton**  
None identified.
- 6.3 **A Healthy Halton**  
This document is an important part of the safeguarding policy framework ensuring that the Council fulfils its statutory obligations, in line with the Care Act 2014.
- 6.4 **A Safer Halton**  
As above.
- 6.5 **Halton's Urban Renewal**  
None identified.
- 7.0 **RISK ANALYSIS**
- 7.1 Halton Safeguarding Adults Board strives to show improvement in fulfilling its statutory duties and a dedication to seeking and providing the best possible care and support to protect those members of our community that need it.
- 8.0 **EQUALITY AND DIVERSITY ISSUES**
- 8.1 None identified.
- 9.0 **CLIMATE CHANGE IMPLICATIONS**
- 9.1 None identified.
- 10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**
- 10.1 None under the meaning of the Act.



**Halton Safeguarding Adults Board Annual  
Report April 2022 – March 2023**

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# Message from the Chair

I am very pleased to present the annual report of Halton Safeguarding Adult Board for 2022/23. The report is an opportunity to share the work of the Board more widely and it provides an overview of the progress and achievements made during this 12 month period which I hope you will find informative and useful.

During this year we have continued to work closely with partner agencies to ensure that safeguarding adults remained at the top of our agendas. We remain committed to ensuring that safeguarding is “Everyone’s Business” across Halton.

The context of our work over the next year will be to continue to strengthen our commitment in achieving the statutory functions of the Board, as well as focusing on our local priorities through the work of the Board and its sub groups.

Finally I would like to extend my thanks to all those who continue to work hard to support the Board and their continued commitment and focus on safeguarding

Adults in Halton. By working together, we can continue to improve the lives and outcomes of many of our vulnerable residents.

I look forward to working with you all again this year.



**Sue Wallace-Bonner**  
**Executive Director, Adults**  
**Directorate Halton Borough Council**



# Key Safeguarding Facts 2022-23

1096 Safeguarding Concerns raised during the year

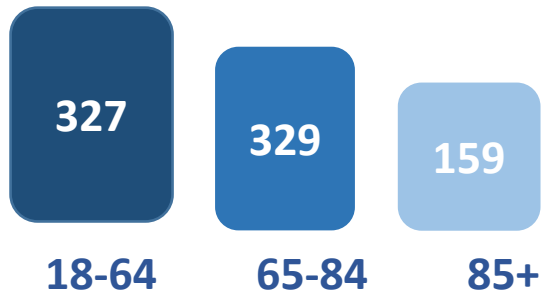
436 became S42 enquiries

10% Decrease in the number of concerns raised, down from 1220 last year

19% Increase in the number which progressed to S42 enquiries, up from 366 last year



More women than men were alleged victims



The age groups of people who had safeguarding concerns raised on their behalf

689 White British

21 Black & Minority Ethnic

Ethnicity of those who had safeguarding concerns raised on their behalf



227

Concluded S42 enquiries involved allegations of neglect



105

Concluded S42 enquiries involved allegations of financial abuse



218

Concluded S42 enquiry allegations occurred in victim's own home

In Halton, an adult at risk is most likely to be a female aged 65 or over living in their own home and will suffer from neglect or acts of omission perpetrated by a service provider

# Deprivation of Liberty Safeguards (DoLS)

**894** applications received  
**6%** increase in the number of DoLS applications received last year, up from 847 in 2021/22

**518** applications received for females



**376** applications received for males



**121**

Applications for 18-64 age group

**142**

Applications for 65-74 age group

**332**

Applications for 75-84 age group

**299**

Applications for 85+ age group

# Overview of the Board

## What is Halton Safeguarding Adults Board?

Halton Safeguarding Adults Board (HSAB) is a statutory partnership between the Local Authority, Cheshire Police, NHS, Fire Service and other organisations who work with adults with care and support needs in our Borough.

The role of the Board is to make sure that there are arrangements in Halton that work well to help protect adults with care and support needs from abuse and neglect.

## The Board and its Duties

### Safeguarding Adults Board were established under the Care Act 2014

<b>Main SAB Objective</b>	To assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who meet the safeguarding adult criteria
<b>3 Core Duties</b>	1. Publish an Annual Report
	2. Publish a Strategic Plan
	3. Conduct Safeguarding Adult Reviews

## What is our vision?

“Our vision is that people with care and support needs in Halton are able to live their lives free from abuse and harm”

Halton Safeguarding Adults Board

Halton Safeguarding Adults Board strives to show improvement in fulfilling its statutory duties and a dedication to seeking and providing the best possible care and support to protect those members of our community that need it.

## What does Safeguarding Adults mean?

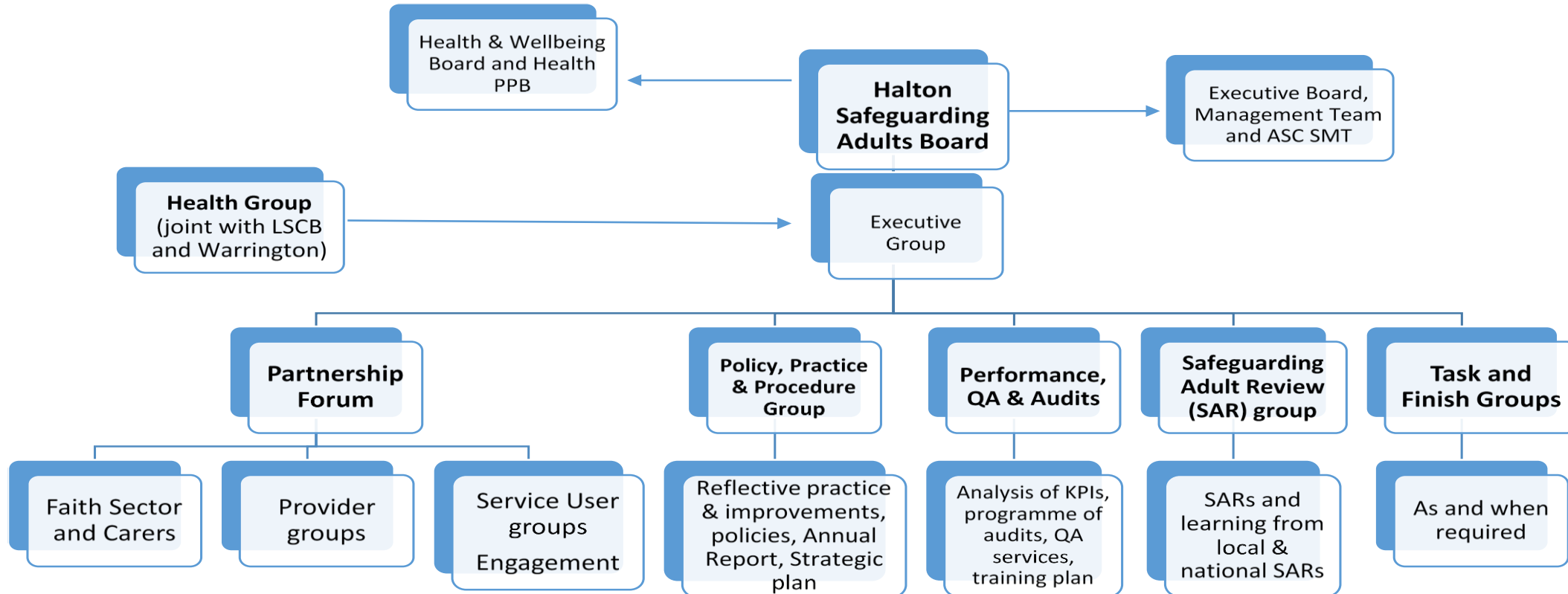
Safeguarding adults means stopping or preventing abuse or neglect of adults with care and support needs.

Adults with care and support needs are aged 18 and over and may:

- ❖ Have a learning disability
- ❖ Have a mental health need or dementia disorder
- ❖ Have a long or short term illness
- ❖ Have an addiction to a substance or alcohol
- ❖ And/or are elderly or frail due to ill health, disability or a mental illness

# Overview of the Board

## Halton Safeguarding Adults Board Structure



# Overview of the Board

HALTON

SAFEGUARDING

ADULTS

BOARD

Who are HSAB's partner organisations?



# Priorities for 2022-23

## Quality Assurance



- ❖ Ensuring internal quality assurance frameworks are in place
- ❖ Ensuring any identified learning is shared
- ❖ Review of the safeguarding adults audit processes within Halton
- ❖ Sharing of information across HSAB members and provider services

- ❖ Ensure all agencies promote a Making Safeguarding Personal approach
- ❖ Ensure that there is effective communication of training

## Co-production & Engagement




- ❖ Ensuring HSAB partner agencies have learning and professional development opportunities in place for their individual workforce
- ❖ Ensure there is a consistency and standardisation of safeguarding practice across Halton

## Learning & Professional development



- ❖ Reassurance that safeguarding approaches are developed actively including representation from all key areas
- ❖ Ensure that the voice of people who use services are heard, are involved in developing policy and are at the centre of any health and social care intervention ensuring their rights, wishes and feelings are at the heart of the decision making process

# HSAB Achievements 2022/23


Priority	What we said we'd do	What we did
<p><b>Quality Assurance</b></p>	<p>Ensuring internal quality assurance frameworks are in place</p>	<p>Following a restructure of HSAB and its sub groups, the Board now has a clear reporting structure in place which ensures that work programmes are closely monitored and any issues are identified and resolved quickly.</p>
	<p>Share identified learning</p>	<p>The Safeguarding Policy, Procedure &amp; Practice Sub Group ensures that any lessons learned or areas of good practice are shared and adopted where possible.</p>
	<p>Review of the safeguarding adults audit processes within Halton</p>	<p>The Safeguarding Adult Case File Audit policy was reviewed and updated in July 2022. There have been multi-agency audits held during the year. The first audit focused on financial abuse and the second audit focused on self-neglect.</p>
	<p>Sharing of information across HSAB members and provider services</p>	<p>The Chairs of each sub group are asked to share information within their groups on a regular basis, with quarterly reports presented to the Board.</p>

# HSAB Achievements 2022/23


Priority	What we said we'd do	What we did
<b>Co Production &amp; Engagement</b>	HSAB partner agencies to have learning and professional development opportunities in place for their individual workforce	An annual training programme is developed and delivered on behalf of the board, which is available to all partner agencies.
	<p>Consistency and standardisation of safeguarding practice across Halton</p> <p>All agencies to promote a Making Safeguarding Personal approach</p>	<p>All policy and procedure documents, toolkits and strategies developed in relation to adult safeguarding are agreed by HSAB and the relevant sub groups. All policies are reviewed on a 3 yearly basis ,, or earlier if required, to ensure they are reflective of current processes and legislation</p> <p>Making Safeguarding Personal is at the centre of all safeguarding practice in Halton, with a survey completed at the end of each S42 enquiry.</p>



# HSAB Achievements 2022/23

Priority	What we said we'd do	What we did
<b>Co Production &amp; Engagement</b>	Implement effective communication of training opportunities within HSAB members and partner agencies	An annual training programme is developed and delivered on behalf of the board, which is available to all partner agencies.
	Support the development of good multi-agency practice, sharing best practice, lessons learned and have the confidence to challenge decision making	<p>The Safeguarding Policy, Procedure &amp; Practice Sub Group ensures that any lessons learned or areas of good practice are shared and adopted where possible.</p> <p>HSAB Partnership Forum have developed a Communications &amp; Engagement Strategy for 2022-24 and action plan for delivery with partners.</p>
	Support adults at risk, informal carers and families with safeguarding and ensuring that they feel support within the safeguarding process	<p>By adopting the Making Safeguarding Personal approach to safeguarding practice in Halton, to ensures the adult at risk is at the centre of all decisions and are supported to ensure their desired outcomes are met.</p> <p>HSAB Partnership Forum have led on the compilation, distribution and evaluation of an adult safeguarding awareness questionnaire/survey to support engagement with service users, family members/carers and the public regarding feedback on safeguarding services, to help shape services in the future.</p>

# HSAB Achievements 2022/23

Priority	What we said we'd do	What we did
<p><b>Learning &amp; Professional Development</b></p> 	<p>Reassurances that safeguarding approaches are developed actively including representation from all key areas</p>	<p>Development of New Safeguarding Case File Audit process was shared and tested with practitioners and managers including the Partnership Forum members in advance of implementation in July 2022. Partner representatives also invited to participate in multi agency audits, with representatives from partner agencies given the opportunity to act as Lead Auditors.</p>
	<p>Ensure that the voice of people who use services are heard, are involved in developing policy and are at the centre of any health and social care intervention ensuring their rights, wishes and feelings are at the hear of the decision making process</p>	<p>Engagement survey /questionnaire was created and distributed in September 2022 through the SAB Partnership Forum for people who use services linked to safeguarding. Feedback was used to inform the Communication &amp; Engagement Strategy.</p>

# Partner Achievements 2022/23

## Halton Borough Council



Halton Borough Council has continued to support the work of Halton Safeguarding adults Board and it's sub groups this year. The Board and all of it's sub groups include at least two members of Halton Borough staff on each group.

The work that has been led by Halton Borough Council this year includes the planning and hosting of the HSAB Strategic Planning Event. This is an annual planning event that takes places every December and provides an opportunity for the Board members to contribute to priority setting for the Board and it's sub groups for the forthcoming year.

As part of the work of the Policy and Practice Sub Group, two scam awareness events were held over the summer in Widnes and Runcorn. Both events were a great success and well supported by our partner agencies.

National Safeguarding Week was supported once again this year, with a series of Lunch & Learn events on various aspects of safeguarding hosted online. These events were all well attended and received

positive feedback.

A new Safeguarding Adults Multi Agency Case File Audit Policy was implemented this year. Two multi agency audits took place during the year, with a total of 6 cases being reviewed and analysed.

During the year, a Modern Slavery Toolkit was developed and published and the Financial Abuse Toolkit was updated and published. The Safeguarding Induction Booklet was also reviewed and updated. This booklet is designed to help new members of staff joining the Directorate to familiarise themselves with safeguarding and their role and responsibilities when dealing with any safeguarding concerns they may identify.

A Supporting People with Dementia to be involved in Safeguarding Enquiries Toolkit was also developed and published this year. This toolkit is a useful resource for practitioners to use when involved in Section 42 Enquiries where the adult at risk or a family member has dementia.

# Partner Achievements 2022/23

## Quality Assurance

NHS Cheshire & Merseyside Integrated Care Board (C&M ICB) Halton Place has received quarterly safeguarding assurance from NHS commissioned health providers. Safeguarding activity at local NHS providers shows an increased demand for support from NHS Safeguarding Teams. This demonstrates that staff are acting on concerns.

NHS C&M ICB have devised and implemented a region wide safeguarding assurance framework, this will increase consistency in practice. The new framework will be used from Quarter 1 2023/24.

A change to the LeDeR review process was implemented in 2022. LeDeR reviews are now completed by NHS C&M ICB dedicated LeDeR team. Learning will be shared with the Integrated Care System.

NHS C&M ICB staff supported Primary Care colleagues in relation to Covid vaccination for people who lacked capacity to consent. Mental Capacity Act awareness training was facilitated with practice nurses.

To support the health provision to Daresbury initial accommodation

centre, a maternity pathway was developed by Warrington and Halton

NHS Foundation Trust, this is fully operational. Primary Care provision planned and urgent is available, including on site service. There is a pathway for onward referral to the 0-19 service. The emergency dental line is used for emergency issues and work is progressing around a planned service for residents.

## Co-Production & Engagement

NHS C&M ICB and health providers have worked in partnership with other key partners to support Daresbury initial accommodation centre. Meetings are ongoing.

NHS C&M ICB and health providers have worked collaboratively with Halton Borough Council safeguarding colleagues and the HSAB partnership on all sub group areas. This includes various task and finish groups, audit workstream and National Safeguarding Adults Week.

In September 2022, NHS C&M ICB and health providers supported the Multi-Agency Audit around financial abuse. Further audits are planned for 2023/24.

# Partner Achievements 2022/23

## Cheshire & Merseyside Integrated Care Board continued:

### Learning & Professional Development

GP safeguarding leads meetings have continued this year. This involved cascading relevant safeguarding information (child and adult) to primary care. In addition, safeguarding information is relayed in regular primary care bulletins.

NHS providers supported HSAB Safeguarding Adults Week Lunch and Learn events. Providers also attended events over the week.

During 2022/23 NHS providers have continued to report challenges in delivering face to face training. Post covid factors, acuity levels and staff levels have all impacted on the ability to achieve full training compliance. These factors have led to an increased demand for specialist Trust safeguarding advice.

Bridgewater Community Healthcare NHS Foundation Trust facilitated several supervision sessions with staff across Halton. Topics included Learning Disabilities Practice Guidelines and Self-Neglect.

Warrington & Halton Hospitals Foundation Trust Team supported the World Down's Syndrome Day with a week of celebrations across the trust. The Safeguarding Team complete daily checks on all patients

Admitted with a learning disability diagnosis.

### Organisational Activity

On 1<sup>st</sup> July 2022 NHS Halton Clinical Commissioning Group transitioned to the Integrated Care System. Forming part of NHS C&M ICB at Halton Place. During this time of change business as usual has continued in all aspects of safeguarding practice. Safeguarding leads have been appointed within NHS C&M ICB and they will commence in post in early 2023/24.

NHS C&M ICB Health Providers worked throughout 2022/23 to improve MCA knowledge in preparation for the introduction of the Liberty Protection Safeguards (LPS). NHS C&M ICB and NHS providers responded to the Government's draft LPS and MCA Code of Practice. Regular supportive meetings took place to aid all services around the anticipated implementation.

Collaborative work has continued over the last 12 months in relation to health input to support Asylum Seekers.

# Partner Achievements 2022/23

HALTON

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## Cheshire & Merseyside Integrated Care Board continued:

Individual NHS providers have completed internal safeguarding audits over the 12 month period, to improve practice and give assurances.

Safeguarding Named GP posts have now been recruited to. Halton will be allocated several weekly sessions. This will support primary care with safeguarding practice.



# Partner Achievements 2022/23

HALTON

SAFEGUARDING

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BOARD

**Bridgewater Community Healthcare  
Foundation Trust**



## Quality Assurance:

As part of the commissioning arrangements with NHS Cheshire and Merseyside, the Trust reports on a quarterly basis to provide assurance that Bridgewater Community Healthcare NHS Foundation Trust is fulfilling its responsibilities under:

- The Care Act 2014
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 11 and 13
- Safeguarding Accountability and Assurance Framework 2022

and to provide an overview of the trusts contribution and activity related to safeguarding adults at risk of abuse and neglect.

The reports provide a summary of:

- Organisational safeguarding structure/Governance arrangements
- Safeguarding concerns relating to the organisation/staff in the quarter reporting
- Overview of safeguarding related incidents identifying themes, trends and any associated risks
- Training, summary of training figures from the KPIs – new training, changes, progress on barriers to achieve

- Progress on safeguarding annual work plan
- Progress on current safeguarding audits
- Contribution to Warrington and Halton Safeguarding Adults Boards
- Wider safeguarding assurance/issues relating to:
  - Mental Capacity Act (MCA)/Deprivation of Liberty Safeguards (DoLS)
  - PREVENT/Channel Panel
  - Domestic Violence/Multi-Agency Risk Assessment Conference (MARAC)

In addition to the quarterly reports further assurance was provided to commissioners through:

- 2022-23 Audit Tool to measure NHS Provider compliance with the NHS Assurance and Accountability Framework for Safeguarding (Safeguarding Vulnerable People in the NHS 2019)
- 2022-23 Prevent Self-Assessment Tool
- 2022-23 Lampard Self-Assessment Tool

Scrutiny and challenge of the reports is undertaken via NHS Cheshire and Merseyside Clinical Quality & Performance Group.

# Partner Achievements 2022/23

HALTON

SAFEGUARDING

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## Bridgewater Community Healthcare Foundation Trust continued:



During 2022-2023, the Trust's Safeguarding Team have been able to provide significant assurance around policies and procedures, safeguarding supervision, and multi-agency engagement. Throughout the year we have experienced challenges in relation to safeguarding training compliance which has reduced the assurance to our Commissioners to reasonable overall.

Written and verbal feedback received from Halton and Warrington's Designated Nurses in the ICB, indicated that our commissioners recognise and value the contribution the Trust makes to local multi-agency safeguarding arrangements. The following quotes are taken from the feedback reports prepared by the Designated Nurses in Halton and Warrington in response to our quality schedule submissions during 2022-23:

- The Trust's reports for both safeguarding adults and children provide excellent examples of good practice/assurance to the ICB and reflect the openness and transparency the Trust has in relation to safeguarding
- Bridgewater provide active input to the Halton Safeguarding Adult Board (HSAB) sub groups and works effectively with partners re:

adult safeguarding

- Significant assurance is noted from the wider aspects of safeguarding practice within the Trust
- The adult services who support safeguarding remain very involved in the place-based work and endeavour to share and cooperate with the key agencies who support adults at risk
- The retiring ICB Designated Nurse commented in Q3: "I would like to thank [the Head of Safeguarding Adults] and his team for the continued efforts and support with adult safeguarding and commitment to multiagency working and developments. It has been a pleasure to work with you all".

Internally, the Safeguarding Trust Assurance Group (STAG) provides a forum for safeguarding leads and all members to work together to receive assurance, address and discuss safeguarding issues within the community setting and delivers assurance to the Quality Council and the Quality & Safety Committee within the Trust.

During 2022-23, all STAG meetings have been held virtually. Meetings



# Partner Achievements 2022/23

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## Bridgewater Community Healthcare Foundation Trust continued:



have been held quarterly (April, July, October and January). An additional “extraordinary” STAG meeting was held in November and focused on providing oversight of the progression of several safeguarding related internal action plans.

The assurance process through STAG was strengthened with the incorporation of a safeguarding remit within the portfolio of one of the Non-Executive Directors (NED) who joined the STAG membership in October 2022.

Named Professional meetings have taken place bi-weekly throughout the year. These, together with six-weekly Senior Safeguarding Nursing Team meetings provide supportive, clinically, and professionally focused forums for our Senior Safeguarding Nurses as well as promoting consistency in approach to safeguarding across the organisation and supporting progression of a shared work plan.

During 2022-23, as part of the Trusts internal audit plan Mersey Internal Audit Agency (MIAA) undertook a review of the Trust’s safeguarding systems and processes. The review identified a small

number of low and medium risk recommendations for the Trust. Many of the recommendations made reflected completion of work streams that were already in progress and which had been discussed with the auditor during the review. All recommendations received have been incorporated into an action plan the progress of which will be monitored via STAG.

The overall conclusion from MIAA was “Substantial Assurance”. MIAA noted: “There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently”.

Internally, the Trust Safeguarding Teams provide a range of functions to help quality assure activity of wider clinical services in relation to safeguarding adults at risk:

- Support to clinical teams around engagement in multi-agency reflection and learning through their involvement in safeguarding adult reviews, domestic homicide reviews, practice learning reviews, local single and multi-agency learning reviews, strategy meetings and conferences

# Partner Achievements 2022/23

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## Bridgewater Community Healthcare Foundation Trust continued:



- Safeguarding oversight of all adverse incidents reported within Bridgewater through participation into the Trust's Patient Safety Meeting and Serious Incident Review Panel (SIRP)
- Providing specialist input into Trust improvement forums including the Harm Free Care and Learning Disability Groups
- Contribution from the Senior Safeguarding Team with the consultation process with Trust wide policies and membership of the Corporate Clinical Policy Group
- Safeguarding supervision in a range of formats including reactive and group

The Trust's reactive supervision offer help to support the quality of interventions where there are concerns about an adult at risk. Safeguarding Adult Specialist Nurses support clinical teams where there are concerns about adults at risk day in day out, two examples are provided below:

- A practitioner at the Urgent Treatment Centre used professional curiosity and supportive challenge to explore a patient's account of a head injury and gained disclosure of domestic abuse enabling support to be offered and a MARAC referral being made

- Widnes North District Nurse responded to an accidental voicemail which raised concerns about a relative's safety and wellbeing. Additional visits were undertaken to seek the person's wishes and feelings and support to access appropriate services

Audit activity has been impacted by the team's prioritization of other work streams particularly during the early part of the reporting year, however, a single agency audit was completed on Groups and Relationships in District Nurse Teams.

The Trust has also contributed to multi-agency audit activity. These have included:

- All Age Exploitation (Pan-Cheshire)
- Self-Neglect (Halton)
- Mental Capacity Assessments (Warrington)

The outcomes from the multi-agency audit are not yet available. As an organization whose services extend to more than one Borough, learning gained via involvement in audit single and multi-agency audit activity is shared across the Trust's footprint.

# Partner Achievements 2022/23

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## Bridgewater Community Healthcare Foundation Trust continued:



### Co-Production & Engagement:

The Trust recognizes that eliciting, measuring and acting upon feedback is a key driver of quality and service improvement. The Bridgewater Engagement Group (BEG), chaired by the Chief Nurse, continues to provide a focus on the Trust wide, strategic issues for patients and carers, ensuring their views are instrumental in influencing service provision. The Trust has an Engagement Strategy which is also monitored by BEG.

The Trust uses a range of methods to seek patient feedback including the use of patient stories, Friends and Family Test, and patient surveys using Patient Reported Experience Measures (PREMS) and Patient Partners, as a way of involving the people who actually use our services. All feedback is closely monitored by the BEG with any lessons learned identified and cascaded across the organization.

Bridgewater has started working with Aqua (Advancing Quality Alliance) to develop “Lived Experience Panels” across our services in Halton and Warrington Boroughs and in our Community Dental Services. A lived experience panel is where patients, family members and carers who

have experience of our services come together with healthcare staff to look at service development and improvement.

We know that patients and carers are well placed to gauge how services are performing. Patient Partners is an approach that actively encourages patients, their families and carers to work in collaboration with services to identify areas for improvement in quality of care and service delivery.

A network of clinical staff meets regularly to share practical ideas and good practice around involving patients as partners in service improvement.

Key areas of work include:

- Methods to collect patient/carer feedback
- Involving patients and their families in service improvement
- Developing Lived Experience Panels
- Collecting patient stories
- Involving patients and carers in staff recruitment
- Supporting carers

# Partner Achievements 2022/23

## Bridgewater Community Healthcare Foundation Trust continued:



- Envoy training for staff

The Bridgewater Carers Plan 2022-25 was launched in August 2022. It's vision is to ensure that "carers are recognized, valued and have access to the right support at the right time, to improve the quality of life and wellbeing for both the carers and the people they care for".

Actions resulting from the Carers Plan have included:

- Developing a new carers webpage  
<https://bridgewater.nhs.uk/aboutus/information-for-carers/>
- Creating a new carers information leaflet  
<https://bridgewater.nhs.uk/wp-content/uploads/2023/02/Are-you-a-carer-leaflet.pdf>
- Developing training for staff, which is currently being delivered
- Developing a communications plan to promote support for carers, to staff

Work is currently focused on establishing a process to better identify carers in contact with Bridgewater services via clinical records.

The Trust developed and launched Care and Support Assessment Tool – Supporting Patients in Developing Treatment Plans Procedure. This will help to:

- To ensure patients/advocates are involved as active partners with professionals in all aspects of their health and care needs
- To ensure patients/advocates have all the necessary information required to make an informed decision about their care
- To enhance patient/advocate engagement "no decision about me without me"
- To guide staff through the process of Shared Decision Making and how this should be recorded within the patient health record

This procedure compliments safeguarding activity relating to self-neglect and Making Safeguarding Personal.

The Children and Social Work Act 2017 highlighted the importance of improving and extending support for children in care (CIC) to include support for young people up to the age of 25, who have previously been looked after. Our CIC teams recognize the vulnerability of care leavers and their ongoing support needs. The Named Nurse for CIC in Halton is currently working with the Designated Nurse and the

# Partner Achievements 2022/23

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## Bridgewater Community Healthcare Foundation Trust continued:



Children's Commissioner at Halton CCG, to consider an extension to current service specification to include support to care leavers and the additional resource which would be required by the Trust to support this transition into adulthood.

The Safeguarding Team have used their twitter account @BWSafeguarding which gives an opportunity to engage with patients, staff and the wider public. Examples are given below.

### **Learning & Professional Development:**

The Trust has a Safeguarding Training Strategy Training Needs Analysis which sets out an approach to safeguarding training which is consistent with the Intercollegiate Documents 2018, 2019 and 2020, Working Together to Safeguard Children 2018 (amended 2022), NHS England Competency Framework for Prevent 2015 and NICE (National Institute for Health and Care Excellence): Domestic Violence and Abuse 2014.

Apart from safeguarding training Level 3 (adults and children's), all mandatory safeguarding training is delivered via eLearning packages which staff can access via their ESR (Electronic Staff Record). During

the pandemic, the Safeguarding Team delivered Level 3 training via a blended offer which combined a Level 3 eLearning package with virtual face to face delivery via Microsoft Teams, however, over the past 12 months both our adult and children's Safeguarding Teams have re-established a face to face Level 3 training offer and this has been well received by practitioners.

Earlier in this report we referred to safeguarding training compliance an area which has continued to challenge us as a Trust and therefore, which has been the focus of significant attention at all levels of Trust during 2022-23. Throughout the year the Trust's Executive Team have set incremental targets for increased compliance at Level 1, 2 and 3 for both adults and children's safeguarding training. The Safeguarding Teams have added additional sessions of Level 3 training into their regular training programmes to support these targets working with Service Managers and the Trust's EPD Team to ensure that the training has been appropriately targeted, and staff have been supported to access it.

Significant progress with training compliance has been made in year as a

# Partner Achievements 2022/23

## Bridgewater Community Healthcare Foundation Trust continued:



result. Whilst we acknowledge the need for further improvements in relation to safeguarding adults' Level 2 and Level 3, it is notable that compliance has improved from 74.6% to 88.86% and 47.24% to 76.09% respectively.

In addition to delivering Level 3 safeguarding training, our Safeguarding Teams have delivered a variety of bespoke training sessions responsive to service needs as well as supporting the delivery of multi-agency safeguarding training. During 2022-23 bespoke and multi-agency training delivered has included:

- Perplexing Presentations/Fabricated and Induced Illness
- “Asking the Question” Professional Curiosity
- Self-Neglect
- Creating Safer Organisational Cultures

The Safeguarding Team have used safeguarding-related awareness days to provide learning opportunities to staff through article and briefings in the Trust bulletin and the safeguarding twitter account @BWSafeguarding which gives an opportunity to engage with staff and public both directly and by amplifying content from partner agencies.


Examples of these are given below:

Event	Example
<p>Stalking Awareness Week ran from the 25-29<sup>th</sup> April 2022. Key messages were included in Bridgewater Global and social media focusing both on staff and patients as potential victims. The media used from the Suzi Lamplugh to help ensure it was widely accessible to readers</p>	
<p>World Elder Abuse Awareness Day took place on 15<sup>th</sup> June 2022 with key messages again shared using Bridgewater Global and our safeguarding social media account</p>	

# Partner Achievements 2022/23

Bridgewater Community Healthcare Foundation Trust continued:



Event	Example
<p>The Team engaged with both Halton and Warrington Safeguarding Adults Boards in the promotion of Safeguarding Adults Week within the Trust Bulletin and on twitter.</p>	
<p>The Head of Safeguarding Adults contributed to the series of Lunch and Learn events organised by Halton Safeguarding Adults Board</p>	

**Organisational Activity:**  
**Restorative Supervision**

It is recognised that the last few years have had a significant impact on all staff across the Trust and the need to care for our staff members emotional health and wellbeing has never been

more important: for the staff and for the direct correlation between staff wellbeing and patient care. Since the beginning of April 2022, all members of the Trust’s Safeguarding and CIC teams have had access to restorative supervision. Frequency of supervision is tailored to individual needs with all staff have restorative supervision a minimum of 3 monthly. This quote from a staff member is typical of the response to the programme:

*“I’m so pleased we have this (restorative supervision) in place as it really feels like we now have an opportunity to talk to (supervisor) who is so skilled and has such great listening skills – she actively listens to me. It’s also really important that (supervisor) is not my manager but has a good understanding of the service/the difficulties/the stresses that we are dealing with.*

*I really feel that the time we have is for me – and (supervisor) emphasises this during the sessions. You never feel rushed. She also validates how you feel but also challenges in a very nurturing way. Overall it clears my head, means I have space to deal with complex situations on a daily basis, and feel more balanced, calm and valued”.*

Across the wider Trust, the introduction of Professional Nurse Advocate

# Partner Achievements 2022/23

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## Bridgewater Community Healthcare Foundation Trust continued:



roles is enabling a similar restorative-focused opportunities to be brought to other clinical staff.

### Learning Disabilities

The Safeguarding Adults Team are engaged with groups set up to improve the care of people with a learning disability:

- The Head of Safeguarding Adults represented the Trust at the multi-agency Learning Disability Standards Group
- The Head of Safeguarding and Safeguarding Specialist Nurse support the Trust's Learning Disability Improvement Group. This is chaired by the Halton Borough Council Director and has dedicated specialist support of one day a week to the groups work plan from the Specialist Nurse Safeguarding Adults
- The Specialist Nurse has continued work to roll out Trust Best Practice Guidelines to clinical teams

### Mental Capacity Act

Audit of MCA assessments was completed in Quarter 4 2021-22. Work related to this audit focused on identifying the key "relevant

Information" needed for common assessments including:

- Catheterisation
- Clexane administration
- Pressure Ulcer Prevention
- Pressure Ulcer Treatment
- Having Care
- Phlebotomy

The Safeguarding Adult Team have worked with clinicians to draft learning resources based around key "relevant information" for specific decisions that are used in supervision with clinical teams.



# Partner Achievements 2022/23

HALTON

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Healthwatch Halton



## Quality Assurance:

Healthwatch Halton has adopted the new Healthwatch England Quality Framework and introduced a new system for recording and monitoring the public feedback we receive on local health and care services. As part of this we have added additional safeguarding monitoring, with all public feedback being reviewed to highlight any safeguarding concerns.

We continue to have representation at various stakeholder meetings which allows for regular sharing of information.

## Co-Production & Engagement:

Our Advocacy Hub Team Lead attends monthly safeguarding meetings at Gateway Recovery Hospital with external parties such as the Safeguarding Team and the Police. From this we now receive updates from the Safeguarding Team to advise of safeguarding enquiries and this allows for any enquiries not received from the hospital. We also attend the Mental Health Law Governance Group from MerseyCare and support the service with issues with the Brooker Centre. From this the Halton Advocacy Service are providing information to update the NICE guidelines for adults receiving advocacy support.

At public outreach sessions we continue to raise awareness of the role the public can play in safeguarding. Joint sessions have been held with Halton Carers Centre and Widnes & Runcorn Cancer Support. We work with local NHS Trusts to carry out “Listening Events” to gather the public views on services and highlight any issues, including safeguarding. We’ve held regular sessions with local veterans and local asylum support groups, we’ve also set up regular drop-in sessions for the local Traveller community.

In November, we joined with partners to raise awareness of safeguarding during National Safeguarding Adults Awareness Week 2022. One of the main concerns raised with us this year was lack of access to NHS Dental Treatment. We’ve worked closely with NHS England to help a number of vulnerable local residents with severe oral health problems to access treatment at NHS dentists.

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# Partner Achievements 2022/23

## Healthwatch Halton continued:

### Learning & Professional Development:

All Healthwatch Halton staff and board members undertake a wide range of online e-learning sessions in subjects such as Level 2 Adult and Child Safeguarding. In addition, our Advocacy Hub team are currently undertaking advocacy qualifications across different elements of the statutory services Healthwatch Halton provides. The aim is for all advocates to be qualified across all areas of the statutory services we provide.

Training for all advocates has been through extensive online Flick training platform. Specialised training in Mental Capacity Law when undertaking S21A challenges to the Court of Protection has also taken place.

Online training has been undertaken by all advocates provided by Blackbelt advocacy training services including relevant topics of statutory support including safeguarding, case law, supporting mental health in secure settings, when to support a S21A challenge.

### Organisational Activity:

During the past year Healthwatch Halton's Advocacy Hub has supported more than 259 IMHA patients at the Gateway Recovery Centre and the Brooker Centre.

The team support ongoing autistic and learning difficulty patients primarily each week and support extra meetings and assessments for these patients. The team responded to approximately 70 seclusion/safeguarding related issues across the statutory services. The main response for safeguarding is via Care Act referrals but we have also supported safeguarding concerns within the hospitals and work closely with the Safeguarding Team in ensuring standards at Gateway Recovery Centre and with Mersey Care NHS for the Brooker Centre.

Our advocacy team have been instrumental in providing/promoting the IMHA advocacy service in two hospitals covering eight wards and units when receiving referrals from the hospitals but also provides extra support promoting further safeguards by visiting both hospitals each week, to allow self-referral of patients or to identify any patients not referred to the service.

# Partner Achievements 2022/23

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## Healthwatch Halton continued:

The team have supported 86 IMCA referrals, primarily serious medical treatment decisions and this increased significantly throughout the Covid period.

In addition our advocacy team have supported 31 DoLS referrals and continue to act as the Relevant Person's Representative (RPR) for over 95 current cases.



# Partner Achievements 2022/23

North West Ambulance Service



## Background:

The Trust has a statutory responsibility to safeguarding children and adults who are at risk of harm from abuse or those who are vulnerable, this commitment is underpinned by specific legislation, namely Children’s Act (1984 & 2004) and the Care Act (2014). The Trust works in partnership with other organisations to ensure that the response to individuals who are at risk of harm from abuse or neglect or who are vulnerable, is communicated in an effective manner which results in an appropriate response. Safeguarding child and adult standards are determined nationally for NHS Provider organisations and are monitored via the regulator (Care Quality Commission) and further through internal audits.

Following a review of the safeguarding training and information shared with external agencies, a focused review and redesign was undertaken. In November 2022, the referral system for safeguarding referrals changed from ERISS system onto a new referral system through CLERIC. This system now allows staff to determine whether referrals are “safeguarding or early help”. As seen in the figures, this move has caused a significant drop in the number of referrals being made – this is attributed to a number of different factors, namely that crews can

make an improved, informed judgement on the type of help they believe is needed and due to the formation of other pathways now in place such as mental health. The new system has also had fewer rejections by social care than the ERISS system, which suggests that the new referral process is more accurate. Staff have also received additional training, prior to the move to CLERIC. Paramedic Emergency Services and the NWSAS 111 service continue to be the two service areas which raise the most concerns.

31, 753 adult concerns were raised up to Mid-November 2022. From November to end of March 2023 there were 2,083 adult safeguarding concerns and 8,391 early help concerns raised – a significant decrease from the first 7 and a half months and approximately 18,000 less than 2021/22.

The number of concerns raised for both adult and child has dropped dramatically. The new system also has the ability to split safeguarding referrals into “true” safeguarding where there is the element of actual or potential harm, or “early help” where social care needs have been identified and require additional support for example. There is also now greater understanding around mental health and the ability to

# Partner Achievements 2022/23

## North West Ambulance Service continued:

refer on the mental health pathways which is also partly attributing to the change in the numbers.

### Safeguarding Audits

The safeguarding team currently carry out two audit cycles a year. These are deep dive audits that focus currently on repeat children’s safeguarding concerns and domestic abuse.

The domestic abuse audit is carried out to ensure that there have been no missed opportunities to raise concerns for the person at risk. It is to provide assurance that staff are reporting appropriately through onward communication with social care, the police or specialist domestic abuse advisor and that when domestic abuse is witnessed or disclosed, then a safeguarding concern has been raised. It also provides the team with the opportunity to review more in depth cases and to educate staff where needed. These audits also provide assurance that where cases of domestic violence are raised, safeguarding concerns for any children in the family are also raised jointly.

Both audits require the analysis of data and the contacting of the

## 

relevant multi-agency partners which for these specific audits would usually be social care and the police.

### Polices and Procedures

During 2022/23 the following procedures have been reviewed and updated:

- Managing Allegations against staff policy
- Domestic Abuse procedures
- Missing & Absconding patients’ procedure

Ongoing awareness updates and 7 minute briefings have also been published regularly as part of the continuing safeguarding education through the Communications team.

### Safeguarding Assurance Framework

The Safeguarding Assurance Framework (SAF) is an assurance document which the Trust are required to complete and return to the Lead Commissioners. The SAF asks specific questions of the safeguarding arrangements which are in place within the Trust. The document once agreed is shared with the 46 safeguarding boards. The safeguarding boards use the NWAS response to form part of their

# Partner Achievements 2022/23

## North West Ambulance Service continued:

overall multi-agency section 11 report.

The 2022/23 assurance framework report is still in draft and has not as yet been verified through the commissioners, however, high compliance and assurance is evidenced throughout the report. This is currently being discussed with the lead ICB and expected to be shared June 2023. There are areas which continue to be focal points for action within the Safeguarding Team and the wider Trust. There remain two points in the standards which the Trust is unable to mark themselves as fully compliant. One of these being the Trust delivering stand-alone domestic abuse training. At present this training is delivered on an ongoing basis as part of the mandatory training and safeguarding level 3 training packages. A stand-alone option is being considered and a package will be developed in due course. This will be part of the 2023/24 training plan.

In regard to the second non-compliant standard, this is in relation to staff appraisals and the inclusion of safeguarding being part of the appraisal process. The Trust do not currently feature safeguarding as a specific item within each member of staff's individual appraisal. The need for specific safeguarding questions within individual appraisals will

be reviewed and considered with HR.

### Safeguarding Assurance

Each month the Trust receives a number of case requests from adult or children's social care or multi-agency safeguarding boards, where we are asked to provide information on our Trust's involvement. These can take several forms from a simple enquiry, a rapid review, chronology or completion of a individual management review. There have been 25 case reviews requested this year for 2022/23. Some of these cases were reviewed and described showing good practice, potential missed opportunities, multi-agency working and actions.

Outcomes and learning from these reviews were listed alongside highlighted areas of good practice, challenges and suggested next steps. Whilst there will occasionally be missed opportunities to make safeguarding notifications these are improving. This is due to various actions being put in place, including sharing of bulletins, 7 minute briefings, updating of training and highlighting lessons learnt through committees. The move from ERISS to CLERIC has also reduced the number of rejections of cases, received back into the Trust from social care. This is due to the fact that we now have more appropriate

# Partner Achievements 2022/23

## North West Ambulance Service continued:

referral pathways in place including early help and mental health, which then allows only “true” safeguarding referrals to be accepted. This results in patients receiving the care and support they require in a timelier way.

### Safeguarding Board Engagement

Increased notifications, improved visibility and Board engagement has resulted in increased numbers of requests to be involved in Safeguarding Adult Reviews, Domestic Homicide Reviews, Serious Case Reviews, Learning Disability Reviews and Strategy Meetings.

The Safeguarding Team work alongside senior managers and clinicians to ensure engagement with the Boards is visible and specific to local needs. There are currently 46 safeguarding board across the geographical footprint of North West Ambulance Service and the team have committed to attend each board a minimum of once per year, as per local board request as deemed appropriate. The Safeguarding Team monitor Board engagement.

Each local Safeguarding Board is formally written to on an annual basis by the Safeguarding Manager, to inform them of our commitment to

engage with the Safeguarding Boards and to establish good working relationships in each area. A copy of the Trust’s annual safeguarding report is also shared, this prompts invites to Board meetings to discuss the safeguarding activity within the Trust and look at ways of collaboratively working to improve safeguarding partnerships. In addition, practitioners and managers are involved in Local Safeguarding Board sub groups.



# Policy, Practice & Procedure Sub Group Update

HALTON

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**Chair: Marie Lynch – Operational Director, Care Management, Safeguarding & Quality, Halton Borough Council**

June/July 2022 – Pop up scam events held at Runcorn Shopping City and Widnes Market during the summer 2022

July 2022 – New Safeguarding Induction Booklet was developed and published on the HSAB website

September 2022 – HSAB Annual Report for 2021/22 was completed and shared with partners including the Halton Health & Wellbeing Board

December 2022 – Annual Strategic Planning event held for HSAB where priorities were reviewed

March 2023 – Modern Slavery Toolkit has been developed and added to the HSAB website

March 2023 – Financial Abuse Toolkit has been developed and added to the HSAB website

March 2023 – A review of the Multi-Agency Public Protection Arrangements (MAPPA) Policy was conducted and the policy was updated and distributed. Further work planned in respect to associated training with regards to MAPPA

## **Ongoing activity from 2022/23 into 2023/24:**

Framework drafted in respect to Harmful Sexual Behaviours with Adults with Learning Disabilities/Autism – work to continue to be taken forward during 2023/24 via a Task and Finish Group

Safeguarding Adults Policy, Procedure and Guidance – work is continuing on the review of the current guidance and will be completed during 2023

Multi-Agency Risk Assessment and Management (MARAM) policy – work progressing on the development of this policy and will be completed during 2023



# Safeguarding Adult Review Sub Group Update

**Chair: Helen Moir - Divisional Manager Independent Living, Halton Borough Council**

The Safeguarding Adult Review (SAR) Sub Group initially sat within the HSAB Practice Sub Group until the restructure of sub groups in November 2022

May 2022 – members for the Mervyn Task and Finish Group were identified

July 2022 – the first Mervyn Task and Finish Group meeting took place. The Terms of Reference were drafted and the purpose was to focus on the recommendations and map what they mean for Halton. Once this happened, it was brought back to the group for recommendations

August 2022 – the Mervyn Task and Finish Group recommendations were updated

February 2022 – The Group is looking at the update from the Task and Finish Group re: Mervyn SAR and there will be a similar action log for Whorlton Hall SAR

February 2022 – the group has started looking at reviewing the current SAR policy

# Performance, Quality Assurance & Audit Sub Group Update

HALTON

SAFEGUARDING

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**Chair: Danielle Knox - Detective Chief Inspector, Cheshire Constabulary**

The Performance, Quality Assurance and Audit Sub Group tasks initially sat within the HSAB Practice Sub Group until the restructure of the sub groups in November 2022.

April 2022 – the HSAB Dashboard was created with the first populated HSAB dashboard being presented at Executive Group and HSAB from July 2022 on a quarterly basis

April 2022 – work had started on developing Multi-Agency audits

September 2022 – the first Multi-Agency Audits took place and the theme was Financial Abuse

February 2023 – it was agreed for the standard training items

and the self-neglect training to be progressed for the 2023/24 HSAB training programme

February 2023 – The Performance, Quality Assurance and Audits Sub Group moving forwards will be used to look at themes and trends for Multi-Agency Audits

March 2023 – the HSAB training programme was shared and uploaded onto the HSAB website

# Partnership Forum Update

**Chair: Mark Weights – CEO, Sustainable Housing Action Partnership**

September 2022 – Partnership Newsletter created and dates agreed for distribution to partners. First newsletter distributed in September 2022

October 2022 – Presentations from specific partners introduced to each Partnership Forum meeting

October 2022 – Presentation relating to Domestic Violence and Older People. Task and Finish Group set up to look at issues raised in presentation

December 2022 – Safeguarding Adults Survey completed with an analysis, outcomes and recommendations provided to HSAB. Partnership Forum requested marketing budget from HSAB to implement outcomes from survey

January 2023 – Communications and Engagement Strategy – distribution of national and local events plan updated for 2023

March 2023 – Domestic Violence and Older People Task and Finish Group created a new Domestic Violence Toolkit for providers, including a dementia checklist for use within Halton

March 2023 – Partnership Forum commenced work on engagement with service users and people with lived experience to support future safeguarding processes and safeguarding multi-agency audits

March 2023 – second Partnership Forum Newsletter distributed to partners

March 2023 – Forum agreed Safeguarding Adults Strategy for 2023-2028

# HSAB Strategic Planning Event

HSAB held a virtual Strategic Planning Event on Thursday 1<sup>st</sup> December 2022 via MS Teams, to develop priorities and key actions to inform the “Strategic Plan on a Page” and work programmes of the HSAB and its associated sub groups. The event was well attended with 32 representatives from all statutory partners, health sector and voluntary/third sector organisations as detailed below:

The event was facilitated by Moira Wilson, Care and Health Improvement Advisor, Yorkshire and Humber for the Local Government Association. The event began with an introduction and outline of the event that Moira presented, reminding partners of the legal context from the Care Act 2014, along with some current issues and priorities and the outcomes from the day. Helen Moir, Divisional Manager for Independent Living and Safeguarding Lead at Halton Borough Council, gave a presentation on the pre-work themes and what the data is telling us.

This led to five breakout room discussions focused on the draft Strategic Plan; what other work areas should be added to the draft plan; what actions can organisations take to progress the proposed work areas and what support or guidance might sub groups provide to support member organisations. Each group had a one-hour discussion and then fed back to the whole group.

## Next Steps

The Annual Report was shared with the Health Policy and Performance Board in September.



# National Safeguarding Week

HSAB supports the National Safeguarding Adults Week on an annual basis, it took place this year during 21<sup>st</sup> – 27<sup>th</sup> November 2022. The campaign came about through a national collaboration with Ann Craft Trust and the Safeguarding Adults Board Managers Network, supported by University of Nottingham. Locally, HSAB collaborated with the following statutory, private and voluntary services to help raise awareness of National Safeguarding Week across Halton:

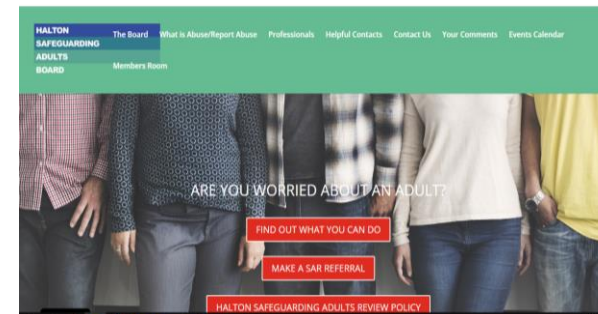
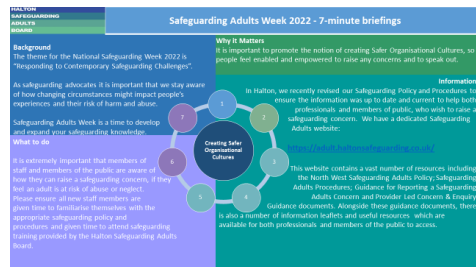
The aim of the campaign this year was *“Responding to Contemporary Safeguarding Challenges”*. Each day during National Safeguarding Week focuses on a key theme, the daily themes for this year were as follows



Day	Theme
Monday	Exploitation & County Lines
Tuesday	Self-Neglect
Wednesday	Creating Safer Organisational Cultures
Thursday	Elder Abuse
Friday	Domestic Abuse in Tech-Society
Saturday & Sunday	Safeguarding in every day life

# National Safeguarding Week

The campaign consisted of:



HSAB Website fully updated and has a dedicated National Safeguarding Week tab with all information easily accessible

A 7 minute briefing for each daily theme cascaded to all HSAB partners to distribute Within their own organisations



A series of Lunch & Learn events were held online for each of the daily themes for all HSAB Partner organisations to attend



Daily social media messages published on all HBC Social Media Platforms



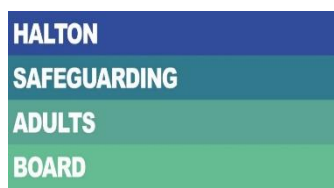
Mersey Gateway Bridge lit up in HSAB colours to mark the start of National Safeguarding Week

# Scam Awareness Events

Two pop up awareness raising events were held in the summer on behalf of HSAB. The theme of the events was scam awareness, as during the pandemic we saw an increase in the number of scams targeting vulnerable members of the borough.

The events provided an opportunity for members of the public to talk to staff members from the organisations present to find out more information about how they could keep themselves safe from possible financial abuse and learn more about how to protect themselves from falling victim to scams in the future.

The first event was held at Widnes Market on 29<sup>th</sup> June 2022 and the second event was held at Runcorn Shopping City on 7<sup>th</sup> July 2022. The event was supported by MP Mike Amesbury and representatives from the following organisations:





# Multi-Agency Audits

HSAB implemented a new Safeguarding Case File Audit Policy in July 2022. The aim of the policy was to provide a robust audit process which is central to HSAB quality assurance system and offers front line staff an opportunity to reflect in a safe environment.

The safeguarding adults audits are centred on analysing quality with a view to gauging how effective our safeguarding practice is, in improving outcomes for the service user. The process is focused on learning and any recommendations are monitored. The process does not focus on the individual practitioners (although feedback will be given), but assists senior and service managers by providing evidence of recurring key issues/patterns or trends in safeguarding practice across adult services, as a means of informing future improvement and development.

The first round of multi-agency audits took place in September 2022 with the theme of Financial Abuse. Three cases were selected and as a result of this audit, our Financial Abuse Toolkit was reviewed and updated.

The second round of multi-agency audits took place in April 2023 (delayed from January 2023 due to winter pressures on services). The theme for the second audit was self-neglect. Again as a result of this audit, the Self-Neglect Policy and Toolkit will be reviewed during 2023-24 to ensure information is relevant and current for practitioners to utilise.



# Modern Slavery Toolkit

Building on the Modern Slavery Strategy Cheshire, the Modern Slavery Toolkit was devised to help practitioners with cases of modern slavery and where to find accessible resources available to them.

This toolkit was based upon the Pan Lancashire Anti-Slavery Partnership Modern Slavery Toolkit, with permission.

The toolkit provides an overview of what modern slavery is, provides details of the referral pathway for victims of modern slavery and human trafficking, how to identify possible victims of modern slavery and key legislation and resources which may help practitioners when dealing with a case of modern slavery and human trafficking.

The toolkit was approved by HSAB and was distributed to staff members, HSAB partners and is available to view via the HSAB website:

[www.halton.gov.uk/adultsafeguarding](http://www.halton.gov.uk/adultsafeguarding)

A 7 minute briefing was also developed for staff members and partner agencies for ease of reference.

HALTON SAFEGUARDING ADULTS BOARD

## Modern Slavery - 7-minute briefing

**Legislation**  
The Modern Slavery Act 2015 provides the legal framework for supporting potential victims of modern slavery or human trafficking. There are many different characteristics that distinguish slavery from other human rights violations. Someone is in slavery if they are:

- Forced to work – mental or physical threat
- Owned or controlled by an “employer”
- Dehumanised, treated as a commodity
- Physically constrained
- Human trafficking

**What to do**  
If you identify a potential victim of modern slavery/trafficking and if you believe they are in immediate danger call **999**.  
If you do not believe they are in immediate danger you can call **Adult Social Care** on **0151 907 8306** if the victim is aged 18yrs and over or call **Children’s Social Care** on **0151 907 8305** if the victim is aged under 18yrs. If outside of office hours please call **0345 050 0148**.

For further detailed information please refer to the Modern Slavery Toolkit which can be found on the HSAB website: [www.halton.gov.uk/adultsafeguarding](http://www.halton.gov.uk/adultsafeguarding)

**Myth Busting**  
Modern Slavery should not be confused with illegal immigration or people smuggling. It doesn’t have to be cross-border, it can happen in the same town/country. Victims are often trafficked from outside the UK but British citizens can and have been victims of slavery/exploitation. If the victim knows or is related to the organizer/employer or if the victim has a better quality of life, they are still the victim of slavery/exploitation. Similarly, if someone hasn’t attempted to escape, this does not mean they are not a victim.

**Indicators**

**1** **Manner:** Does the victim act as if they are instructed or coached by someone else? Do they allow others to speak for them when spoken to directly? Do they appear anxious or intimidated?

**2** **Physical:** Does the victim look as if they have been harmed or deprived of food, water, sleep, medical care or other life necessities? Are they appropriately dressed for the job they are undertaking? Do they display signs of substance misuse? Are they forced to work excessive hours with little or no breaks?

**3** **Environment:** Is their accommodation fit for purpose and suitable for their needs? Do they have their own bedroom and living space? Are they allowed to travel freely alone? Are they able to contact family and friends when they wish to?

**4**

**5**

**6**

**7**

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# Financial Abuse Toolkit

The Financial Abuse Toolkit in Halton was originally produced in 2015 and following our first Multi-Agency Safeguarding audit focused on financial abuse held in September 2022, the toolkit has now been reviewed and updated.

The Financial Abuse Toolkit is intended to be used by Adult Social Care staff, partner agencies, providers and members of the public. It will provide them with the information they need to respond appropriately to suspected cases of financial abuse.

It is important that the indicators of financial abuse are recognized, so that safeguarding concerns can be raised appropriately.

The Financial Abuse Toolkit will:

- ❖ Provide advice on when to raise a safeguarding concern
- ❖ Provide information on the indicators of financial abuse and who is vulnerable to financial abuse
- ❖ Provide a range of preventative measures
- ❖ Emphasise the importance of partnership working

- ❖ Provide case examples that demonstrate how financial abuse enquiries can be conducted effectively
- ❖ Provide information in additional resources for further reading and sharing with adults who may be vulnerable to financial abuse and partner agencies



# Case Study

## Initial concern received to Local Authority:

Concern raised by local housing provider in relation to possible financial exploitation of a number of elderly residents by a neighbour in a particular area of the borough. The neighbour had offered to complete caring tasks for the residents and in turn was borrowing money from the residents who, due to the tasks the neighbour was completing, felt obligated to agree to.

In addition to this, the neighbour was often completing shopping tasks and taking more money than what was required and not providing any change.

Further discussions with the housing officer revealed that the individual in question, had previously been known to both police and the housing association for fraudulent activity of the same nature in recent years.

## Intervention and Planning:

Prior to any interventions with the named vulnerable adults, a multi-agency professionals meeting was held in order to share information and to formulate a strategy in order to safeguard the residents. Intelligence from both police and housing officers revealed that there was possibly more victims than initially thought and more than one perpetrator, who both lived separately in the same neighbourhood. Housing officers

informed that it was very difficult to speak to any of the potential victims alone, as the alleged perpetrators would alert each other when any professionals would call at the homes of the victims and either of the alleged perpetrators would “just pop in” to see if the victim needed anything, playing the role of a caring neighbour.

Many of the residents were socially isolated and had become reliant on the tasks that the perpetrators completed and were reluctant to make a complaint, therefore, the concerns raised needed to be approached sensitively, ensuring that the views of the victims were taken into consideration and that reassurance was given.

The decision was taken between partner agencies that an open day with the locality was the best option to invite a number of agencies to include debt management; trading standards (around fraud); police; social services; housing association and a number of other agencies in order to residents to explore what services could offer and allow for the safeguarding team to speak with a number of residents of whom there were concerns. This meant not singling any particular residents out and not making any accusations. The social worker and housing officer took goodie bags with information leaflets and other items, to those residents who could not attend allowing for a foot in the door approach and an opportunity to open

# Case Study

conversation around financial exploitation.

During these initial enquiries, the professionals were approached by the alleged perpetrators who informed them that it was a close knit community, where everyone looks out for each other and people did not need any support from services.

## Outcomes Achieved:

As a consequence of the open day, a number of adults at risk were identified and offered social care support. It was made clear to them that any tasks that they may need help with, could be facilitated by the local authority which would be a formal arrangement with no unexpected costs.

The joint approach by partner agencies that some adults at risk were safeguarded by various methods, such as support with shopping; accessing the community; assistance with personal care and assistance with managing finances and bills.

It was evidenced that as a result of this multi-agency intervention, the perpetrators reduced their contact with some of the residents as their method of offering to complete tasks was no longer required and professionals having regular

contact were able to monitor the situation.

Work continues with the housing association, police and safeguarding team with planned annual community outreach events, to target vulnerable individuals living in this locality as a result of the positive outcomes of the initial piece of work with all agencies involved sharing intelligence as a preventative measure.

## Benefits of the work:

- ❖ Multi-Agency work allowing for information sharing
- ❖ Positive professional relationships allowing for improved collaboration between agencies
- ❖ Residents who may not have previously become known to adult social care were offered assessments
- ❖ Raised awareness of financial exploitation between residents of the area and how to seek help and support
- ❖ Annual events to monitor outcomes and reinforce initial work
- ❖ Person-Centred approach taking into consideration the wishes and feelings of the residents

<b>REPORT TO:</b>	Health Policy & Performance Board
<b>DATE:</b>	28 November 2023
<b>REPORTING OFFICER:</b>	Executive Director, Adults
<b>PORTFOLIO:</b>	Health & Wellbeing
<b>SUBJECT:</b>	Performance Management Reports, Quarter 2 2023/24
<b>WARD(S)</b>	Borough-wide

## 1.0 **PURPOSE OF THE REPORT**

1.1 This Report introduces, through the submission of a structured thematic performance report, the progress of key performance indicators, milestones and targets relating to Health in Quarter 2 of 2023/23. This includes a description of factors which are affecting the service.

## 2.0 **RECOMMENDATION: That**

- i) **Receive the Quarter 2 Priority Based report**
- ii) **Consider the progress and performance information and raise any questions or points for clarification**
- iii) **Highlight any areas of interest or concern for reporting at future meetings of the Board**

## 3.0 **SUPPORTING INFORMATION**

3.1 The Policy and Performance Board has a key role in monitoring and scrutinising the performance of the Council in delivering outcomes against its key health priorities. Therefore, in line with the Council's performance framework, the Board has been provided with a thematic report which identifies the key issues in performance arising in Quarter 2, 2023/24.

## 4.0 **POLICY IMPLICATIONS**

4.1 There are no policy implications associated with this report.

## 5.0 **FINANCIAL IMPLICATIONS**

5.1 There are no financial implications associated with this report

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children & Young People in Halton**

There are no implications for Children and Young People arising from this report.

6.2 **Employment, Learning & Skills in Halton**

There are no implications for Employment, Learning and Skills arising from this report.

6.3 **A Healthy Halton**

The indicators presented in the thematic report relate specifically to the delivery of health outcomes in Halton.

6.4 **A Safer Halton**

There are no implications for Safer Halton arising from this Report.

6.5 **Halton's Urban Renewal**

There are no implications for Urban Renewal arising from this report.

7.0 **RISK ANALYSIS**

7.1 Not applicable.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 There are no Equality and Diversity issues relating to this Report.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 There are no implications for Climate Change arising from this Report.

## Health Policy & Performance Board Priority Based Report

**Reporting Period:** Quarter 2 – Period 1<sup>st</sup> July 2023 – 30<sup>th</sup> September 2023

### 1.0 Introduction

This report provides an overview of issues and progress against key service area objectives and milestones and performance targets, during the second quarter of 2023/24 for service areas within the remit of the Health Policy and Performance Board. These areas include:

- Adult Social Care (including housing operational areas)
- Public Health

### 2.0 Key Developments

2.1 There have been a number of developments within the Directorate during the second quarter which include:

#### **Adult Social Care**

ALD Day Services; ‘Stay Calm and Milk a Goat’

And to demonstrate that we are finally leaving Covid behind, Day Services is now teaching service users how to milk a goat. Long in the pipeline this unique and innovative development, amongst an embarrassment of previous innovative riches, will dispel the gloom of the coming crises’ if only for a moment. A range of products will be made from the milk for sale at our commercial outlets.

Dementia – As at Sept 2023 arrangements are being made with Liverpool Museum’s ‘House of Memories on the Road’ to bring their mobile immersive reminiscence experience unit to Halton for 1 day. The offer of one free day access to the mobile unit is as a result of Halton’s involvement in the LCR Dementia Action Group. The session will take place in November 2023. Last year the mobile unit was located at a community centre in Runcorn, this year it will be situated at Upton Community Centre. There will be several reminiscence sessions held throughout the day, hosted by Liverpool Museum’s staff, with the local Alzheimer’s Society advisors located within the community centre for the duration of the event. The sessions are free and are currently being promoted through HBC care homes, provider care homes and wider community contacts. To book places, or for more information, contact [emma.bragger@halton.gov.uk](mailto:emma.bragger@halton.gov.uk)

#### **Trusted Assessor – Care Homes**

The job role description for a Trusted Assessor, which was devised in partnership with the care home sector, has now been job evaluated. This role will work closely with homes to understand individual settings, including their current mix of residents and available resources, in order to support further safe and appropriate placements following hospital discharge. This role will sit with the Adults Directorate Care Home Division and will be advertised and recruited to in the next quarter.

#### **Strength’s Based Practice**

Three coproduction workshops were held in September to start to progress our development of strengths based practices, working in conjunction with Helen Sanderson

Q2



Associates. The sessions involved people with lived experience as well as practitioners and professionals and looked to map out the pathways through assessment processes, looking at what works and what doesn't work. The information gathered will shape the next stages of the proposed training programme to be rolled out.

### **Think Local Act Personal (TLAP)**

TLAP supported two coproduction events with people with lived experience of learning disabilities and/or autism. Comments and responses captured at these events will help shape a One Halton approach to coproduction and develop a Coproduction Charter for the borough. A further event is planned for October and project tools and resources will be devised before the end of the year.

### **Dementia Strategy**

While the refreshed Dementia Strategy has yet to be formally agreed progress is already being made against identified actions on the work plan. The priorities identified for the coming period involve commitment from across the system and the strategy group will continue to meet to capture outcomes.

### **Adult Social Care Market Position Statement**

A three-year Adult Social Care Market Position Statement has recently been published on the Council's website. The document is a requirement under the Care Act 2014 and is designed to provide information to current and prospective providers regarding the market for Adult Social Care in Halton. The Market Position Statement sets out information regarding the current delivery of Adult Social Care, as well as the Council's Aims and Objectives regarding the development of the Adult Social Care sector in Halton over the next three years. The Market Position Statement draws on a range of data and local information, including the One Halton Health and Wellbeing Strategy, local performance information and various other Adult Social Care plans and strategies.

### **Market Sustainability & Improvement Fund (MSIF) – Workforce Fund 2023/24**

Published at the end of August 2023, the MSIF Workforce Fund is worth £365 million in 2023/24 and £205 million in 2024/25, and closely mirrors the original MSIF grant worth £1.4 billion over these 2 years.

The £570 million of additional funding is designed to have the same flexibility as the MSIF to meet local pressures, and so local authorities could choose to use the funding to: increase fee rates paid to adult social care providers, particularly as we continue to prepare for the implementation of charging reform; increase adult social care workforce capacity and retention; and reduce adult social care waiting times.

The main challenges currently within the Halton adult social care sector are Older People Care Home capacity (Residential and Nursing), with a number of units closed due to lack of staffing capacity, along with Domiciliary Care staffing capacity. It was therefore agreed that this funding was allocated to Older People Care Homes (External and Internal Care Homes) in the Borough, along with Halton's contracted Domiciliary Care provider, to support workforce capacity.

Halton's allocation for 2023/24, which needs to be fully spent by 31<sup>st</sup> March 2023 is £972,013.

## **Public Health**

The Public Health team continues to work with partners to improve health outcomes and tackle health inequalities, The Director of Public Health is currently supporting health inequalities as a scrutiny topic and held meetings with the ICB about action that can be taken to improve health

This quarter we launched HENRY in Halton. This is an evidence-based programme for parents and carers of under 5s, which aims to improve diet and reduce obesity, improve oral health, improve mental wellbeing and enhance parenting skills. This programme is being delivered in collaboration between Halton Health Improvement Team (HIT) and Halton 0-19 Team. Standalone workshops were delivered through summer, and the first 8-week programmes commenced in September. Feedback so far has been very positive and staff are finding the HENRY solution-focussed approach is working really well with parents.

A combination of staff training and campaigns has been used to improve the mental health and wellbeing of adults in Halton with a focus on workplaces to help keep people well. Training is targeted at teams and staff who are likely to engage with those who are more vulnerable.

### **3.0 Emerging Issues**

- 3.1 A number of emerging issues have been identified during the second quarter that will impact upon the work of the Directorate including:

#### **Adult Social Care**

##### **Halton Floating Support Service**

Halton's floating support service will come to an end on 31<sup>st</sup> March 2024. Plans are in place to re-tender the service in Quarter 3 and Quarter 4

#### **Public Health**

Whilst bereavement services have been funded by the Public Health team, there is a concern that these are not widely known. The registrar has agreed to provide a bereavement support leaflet to everyone who is registering a death in Halton, ensuring those who may need support are aware of what support is available.

The stop smoking service has previously used medically licensed stop smoking products however these are no longer available to access as a quitting aid, narrowing down the options available to potential quitters. Introducing e-cigarettes to the service will widen the choice of products available for clients to use and increase their chances of successfully quitting. This is being done carefully, in line with evidence from Department of Health and the National Centre for Smoking Cessation and Training (NCSCT) guidance and National Institute for Health and Clinical Excellence (NICE). Work continues to dissuade young people and those who have never smoked from starting on e-cigarettes.

### **4.0 Risk Control Measures**

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements. As such Directorate Risk Registers were updated in tandem with the development of the suite of 2018/19 Directorate Business Plans.

As a result, monitoring of all relevant 'high' risks will be undertaken and progress reported against the application of the risk treatment measures in Quarters 2 and 4.

### 5.0 Progress against high priority equality actions

There have been no high priority equality actions identified in the quarter.






### 6.0 Performance Overview


The following information provides a synopsis of progress for both milestones and performance indicators across the key business areas that have been identified by the Directorate. It should be noted that given the significant and unrelenting downward financial pressures faced by the Council there is a requirement for Departments to make continuous in-year adjustments to the allocation of resources in order to ensure that the Council maintains a balanced budget. Whilst every effort continues to be made to minimise any negative impact of such arrangements upon service delivery they may inevitably result in a delay in the delivery of some of the objectives and targets contained within this report. The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained at the end of this report.

#### Commissioning and Complex Care Services

##### Adult Social Care

##### Key Objectives / milestones

Ref	Milestones	Q2 Progress
1A	Monitor the Local Dementia Strategy Action Plan, to ensure effective services are in place.	
1B	The Homelessness strategy be kept under annual review to determine if any changes or updates are required.	
1C	Monitor the effectiveness of the Better Care Fund pooled budget ensuring that budget comes out on target.	
1D	Integration of Health and social care in line with one Halton priorities.	
1E	Monitor the Care Management Strategy to reflect the provision of integrated frontline services for adults.	

1F	Continue to establish effective arrangements across the whole of adult social care to deliver personalised quality services through self-directed support and personal budgets.	
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### Supporting Commentary

**1A** The delivery plan, with updates and discussion about future direction and implementation of proposed actions, will be presented at the One Halton Board by the Operational Director in September 2023.

**1B** No commentary received for Q2

**1C** Budget projected to come in on target

**1D** Integration work continues through the One Halton work streams









**1E** Integration work continues through the One Halton work streams







**1F** Work continues to maintain and improve the delivery of self directed support and personal budgets

### **Key Performance Indicators**

<b>Older People:</b>						
<b>Ref</b>	<b>Measure</b>	<b>22/23 Actual</b>	<b>23/24 Target</b>	<b>Q2</b>	<b>Current Progress</b>	<b>Direction of travel</b>
ASC 01	Permanent Admissions to residential and nursing care homes per 100,000 population 65+ <b>Better Care Fund performance metric</b>	TBC	600	NA	NA	NA
ASC 02	Total non-elective admissions in to hospital (general & acute), all age, per 100,000 population. <b>Better Care Fund performance metric</b>	252.9 (Q1 22/23)	285.2 (Q1 23/24)	NA	NA	NA
ASC 03	Proportion of Older People (65 and over) who were still at home 91 days after discharge from	TBC	85%	NA	NA	NA

Q2

	hospital into reablement/rehabilitation services (ASCOF 2B) <b>Better Care Fund performance metric</b>					
<b>Adults with Learning and/or Physical Disabilities:</b>						
ASC 04	Percentage of items of equipment and adaptations delivered within 7 working days (VI/DRC/HMS)	97%	97%	100 %		
ASC 05	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 1) SDS	74.5%	80%	77.9 %		
ASC 06	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 2) DP	22.6%	45%	41.2 %		
ASC 07	Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF 1G)	99%	89%	92.3 %		
ASC 08	Proportion of adults with learning disabilities who are in Employment (ASCOF 1E)	5.8%	5.5%	6.1%		
<b>Homelessness:</b>						
ASC 09	Homeless presentations made to the Local Authority for assistance In accordance with Homelessness Act 2017. Relief Prevention Homeless Advice	NA	2000	NA	NA	NA
ASC 10	LA Accepted a statutory duty to homeless households in	NA	750	NA	NA	NA

	accordance with homelessness Act 2002					
ASC 11	Number of households living in Temporary Accommodation Hostel Bed & Breakfast	NA	NA	NA	NA	NA
ASC 12	Percentage of individuals involved in Section 42 Safeguarding Enquiries	TBC	30%	42.5 %		
ASC 13	Percentage of existing HBC Adult Social Care staff that have received Adult Safeguarding Training, including e-learning, in the last 3-years (Previously PA6 [13/14] change denominator to front line staff only.	62%	85%	74%		
ASC 14	The Proportion of People who use services who say that those services have made them feel safe and secure – Adult Social Care Survey (ASCOF 4B)	78.8%	89%	TBC	TBC	TBC
ASC 15	Proportion of Carers in receipt of Self Directed Support.	98%	99%	97%		
ASC 16	<i>Carer reported Quality of Life (ASCOF 1D, (this figure is based on combined responses of several questions to give an average value. A higher value shows good performance)</i>	7.5% (2021-22)	NA	NA	NA	NA
ASC 17	<i>Overall satisfaction of carers with social services (ASCOF 3B)</i>	39.3% (2021-22)	NA	NA	NA	NA
ASC 18	The proportion of carers who report that they have	69.5%	NA	NA	NA	NA

	been included or consulted in discussions about the person they care for (ASCOF 3C)	(2021-22)				
ASC 19	Social Care-related Quality of life (ASCOF 1A). (This figure is based on combined responses of several questions to give an average value. A higher value shows good performance)	18.9%	20%	NA	NA	NA
ASC 20	The Proportion of people who use services who have control over their daily life ( ASCOF 1B)	78.4%	80%	NA	NA	NA
ASC 21	Overall satisfaction of people who use services with their care and support (ASCOF 3A)	70.4%	71%	NA	NA	NA

### **Supporting Commentary**

#### **Older People:**

**ASC 01** This measure needs to be cleansed due to reporting issues.

**ASC 02** No data received for Q2

**ASC 03** Annual collection only to be reported in Q4.

#### **Adults with Learning and/or Physical Disabilities:**

**ASC 04** Q2 figure is above target.

**ASC 05** We are on track to meet the target. Work continues to supporting service users to have choice and control in their care planning.

**ASC 06** We continue to promote the use of Direct Payments to support people to choose how to they manage their care package.

**ASC 07** We are on track to meet this target, the figures are higher than they were in the same quarter 2022/23

**ASC 08** We have currently exceeded this target and figures are higher than they were in the same quarter 2022/23

#### **Homelessness:**

**ASC 09** No data received for Q2

Q2

**ASC 10** No data received for Q2

**ASC 11** No data received for Q2

### Safeguarding:

**ASC 12** this figure is lower than they were in the same quarter 2022/23. This is a relatively new indicator and may differ to year end data.

**ASC 13** The current Q2 figures have exceeded the actuals from last year. They are on a trajectory to meet the current target by Q4.

**ASC 14** Annual collection only to be reported in Q4, (figure is an estimate).

### Carers:

**ASC 15** Survey measures are reported annually for service users and bi-annually for carers. The results of these are provided in Quarter 4, however are not published until later in the year.



**ASC 16-21** The next Adult Social Care Survey is due to be administered in January 2024, for results to be reported in the 2024/25 period.

The Survey of Adult Carers will be administered later in 2023 for results to be captured in the 2023/24 period.

Further details on both surveys can be found [here](#)








## Public Health

### Key Objectives / milestones

Ref	Objective 1: Child Health	
	<b>Milestones</b>	<b>Q2 Progress</b>
PH 01	Working with partner organisations to improve the development, health and wellbeing of children in Halton and to tackle the health inequalities affecting that population.	
Ref	Objective 2: Adult weight and physical activity	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 02	Reduce levels of adult excess weight (overweight and obese) and adult physical inactivity	

Q2



<b>Ref</b>	<b>Objective 3: NHS Health Checks</b>	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 03	Ensure local delivery of the NHS Health Checks programme in line with the nationally set achievement targets and locally set target population groups.	
<b>Ref</b>	<b>Objective 4: Smoking</b>	<b>Q2 Progress</b>
	<b>Milestone</b>	
PH 04	Reduce smoking prevalence overall and amongst routine/manual and workless groups and reduce the gap between these two groups.	
<b>Ref</b>	<b>Objective 5: Suicide reduction</b>	<b>Q2 Progress</b>
	<b>Milestone</b>	
PH 05	Work towards a reduction in suicide rate.	
<b>Ref 05</b>	<b>Objective 6: Older People</b>	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 06	Contribute to the reduction of falls of people aged 65 and over and reduction in levels of social isolation and loneliness.	
<b>Ref</b>	<b>Objective 7: Poverty</b>	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 07	To increase awareness of fuel poverty and drive change to tackle the issue through better understanding of services available across Halton (staff and clients).	
<b>Ref</b>	<b>Objective 8: Sexual health</b>	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 08	To continue to provide an easily accessible and high quality local sexual health service, ensuring adequate access to GUM and contraceptive provision across the Borough, whilst reducing the rate of sexually transmitted infections and unwanted pregnancies.	
<b>Ref</b>	<b>Objective 9: Drugs and alcohol</b>	
	<b>Milestone</b>	<b>Q2 Progress</b>
PH 09	Work in partnership to reduce drug and alcohol related hospital admissions.	

**PH 01****Supporting commentary**

Regular performance contract meetings in place. Currently working with the service; developing SEND action plan incorporating the Complex Needs Pathway.

Evidence-based HENRY programme (covering nutrition, being active, parenting, wellbeing) for parents of 0-5s commenced. 5 workshops delivered over summer and two 8-week programmes commenced this quarter, delivered in collaboration with 0-19 Team. First cohort of RSPH Award for Young Health Champions began at an SEN secondary school, plus the first cohort of teenagers have participated in the teen 12-week lifestyle app programme pilot.

**PH 02****Supporting commentary**

Halton continues to support weight management objectives.

Objective	Outcome
Started Service	273
Completed 12 weeks	27%
Completed 6 months	19%

Halton continues to support physical activity through the 'exercise on referral' program. This service provides bespoke physical activity support for those with health condition and has supported 99 clients throughout Q1.

Objective	Outcome
Started Service	132
Completed 6 week review	49%
Completed 12 week review	14%

We have a work request for IT to add 6 month reviews to recordable objectives now too.

**PH 03****Supporting commentary**

Throughout quarter 1 and 2 HIT have been rolling out the new Health Diagnostics IT system. This is not fully embedded yet which means NNSHC data from GP practice data is not currently available. This should be ready by Q3.

















Outcome	Q1	Q2
Invites	994	6175
Completed by HT in Practice	472	652
Completed in Community	13	59
Completed in Workplace	133	59
Referrals Onward	191	362












- PH 04 Supporting commentary**  
Completed data for Q1 2023: 230 clients set a quit date of which 126 quit (55% quit rate). This data includes 73 routine & manual/workless set a quit date of which 36 quit (49 % quit rate).
- PH 05 Supporting commentary**  
We continue to work closely with partners and Champs on the Zero Suicide Agenda and consistently drive Halton's action plan to drive reduction in suicides
- PH 06 Supporting commentary**  
We have trained 39 carers across 6 care homes in falls prevention and have organised 6 Get Together Event aimed at tackling loneliness and Isolation. In total 335 people attended the event this quarter which is an increase on last quarter.
- We held 2 community events for healthy and active ageing this quarter where we engaged with the public. The topics discussed were falls prevention, getting more active, social isolation and loneliness and well as promote the cost of living offer.
- PH 07 Supporting commentary**  
Cost of living information continues to be shared with professionals and promoted across the community to help raise awareness of the support available to alleviate fuel poverty. We are currently in the process of devising a winter plan.
- PH 08 Supporting commentary**  
Over the last few months Axxess have held regular clinics at Daresbury Hotel, linked in with Halton's new Family Hub, PAUSE programme and delivering training to the 0-19 nurses. Current areas of focus for development include improving access to contraception, testing, and Relationship & Sex Education in schools.
- PH 09 Supporting commentary**  
Outreach youth provision/ Vibe, along with CGL and the HBC Early Help Team have continued to work together to provide advice, support and referrals to adults and young people; all of whom are members of the Combatting Drugs Partnership.  
Audit C screenings are delivered during Health Checks and Stop Smoking consultations to clients across Halton. In Q2 Health Trainers/Health Check Officers have delivered 514 Audit C screenings and the Stop Smoking Service have delivered 118 Audit C screenings. Total =632





### Key Performance Indicators

Ref	Measure	22/23 Actual	23/24 Target	Q2	Current Progress	Direction of travel
PH 01a	Healthy life expectancy at	58.0	58.0	n/a	<span style="background-color: yellow; border: 1px solid black; padding: 2px;">u</span>	<span style="color: green; font-size: 1.2em;">↑</span>

Q2

	birth: females (years)	(2018-20)	(2019-21)			
PH 01b	Healthy life expectancy at birth: males (years)	61.4 (2018-20)	61.4 (2019-21)	n/a		
PH 02	A good level of child development (% of eligible children achieving a good level of development at the end of reception)	66.1% (2018/19)	N/A	60.1% (2021/22)		
PH 03	Health Visitor new births visits (% of new births receiving a face to face visit by a Health Visitor within 14 days)	73.4% (2021/22)	90%	80.4% (2022/23)		
PH 04	Prevalence of adult excess weight (% of adults estimated to be overweight or obese)	65% (2020/21)	64.7% (2021/22)	71.2% (2021/22)		
PH 05	Percentage of physically active adults	65.5% (2020/21)	65.5% (2021/22)	63.1% (2021/22)		
PH 06	Uptake of NHS Health Check (% of NHS Health Checks offered which were taken up in the quarter)	76.1% (2021/22)	76.5% (2022/23)	73.7% (Q1 2023/24)		
PH 07	Smoking prevalence (% of adults who currently smoke)	13.2% (2021)	13.1% (2022)	n/a		
PH 08	Deaths from suicide (directly standardised)	10.1 (2019-21)	10 (2020-22)	9.7 (2020-22 provisional)		

	rate per 100,000 population)					
PH 09	Self-harm hospital admissions (Emergency admissions, all ages, directly standardised rate per 100,000 population)	282 (2021/22)	280.6 (2022/23)	263.6 (2022/23 provisional)		
PH 10	Emergency admissions due to injuries resulting from falls in the over 65s (Directly Standardised Rate, per 100,000 population; PHOF definition)	2,676 (2021/22)	2,663 (2022/23)	2,279 (2022/23 provisional)		
PH 11	Social Isolation: percentage of adult social care users who have as much social contact as they would like (age 18+)	37% (2021/22)	40% (2022/23)	n/a		
PH 12	Fuel poverty (low income, low energy efficiency methodology)	13.8% (2020)	13.7% (2021)	n/a		
PH 13	New sexually transmitted infections (STI) diagnoses per 100,000 (excluding chlamydia under 25)	225 (2021)	220 (2022)	383 (2022)		
PH 14	Long acting reversible contraception (LARC) prescribed as a	57.8% (Q1 2022/23)	58% (2022/23)	58% (2022/23)		n/a

	proportion of all contraceptives					
PH 15	Admission episodes for alcohol-specific conditions (Directly Standardised Rate per 100,000 population)	908 (2021/22)	900 (2022/23)	872 (2022/23 provisional)		
PH 16	Successful completion of drug treatment (non opiate)	47.9% (2021/22)	43% (2021)	21.2% (2022/23)		

### Supporting Commentary

**PH 01a** - Data is published annually by OHID. 2018-20 data showed a slight improvement; however this may not continue due to the excess deaths that occurred during 2021

**PH 01b** - Data is published annually by OHID. 2018-20 data showed a slight improvement; however this may not continue due to the excess deaths that occurred during 2021.

**PH 02** - Department for Education did not publish 2019/20 or 2020/21 data due to COVID priorities. The percentage of children achieving a good level of development has reduced by 6% between 2018/19 and 2021/22 in Halton; this is similar to the decline in England overall.

**PH 03** - The 2022/23 data saw an increase from 2021/22, but failed to meet the target of 90%. However, it did meet the performance standard of 75%.

**PH 04** - Adult excess weight improved (reduced) in 2020/21 but has increased in 2021/22 and did not meet the target.. Data is published annually by OHID.

**PH 05** – Adult physical activity improved in 2020/21 and again slightly in 2021/22. Data is published annually by OHID.

**PH 06** - Please note that there was an issue with the coding of invites during Q1 and Q2 which resulted in an uptake of over 100% for 2022/23.

**PH 07** – Smoking levels improved during 2019 and 2020, but have since remained similar and met the local target. Data is published annually.

**PH 08** - The suicide rate decreased in 2018-20 and 2019-21. Provisional 2020-22 data indicates the rate has fallen slightly again over 2020-22.

**PH 09** - Provisional 2022/23 data indicates the rate of self-harm admissions has reduced slightly since 2021/22, and has met the target.  
(Data is provisional; published data will be released later in the year.)

Q2

**PH 10** - Provisional 2022/23 indicates the rate of falls injury admissions has reduced and has met the target.

(Data is provisional; published data will be released later in the year).

**PH 11** - The proportion of adult social care users having as much social contact as they would like, fell in 2021/22; Covid-19 restrictions may have contributed to this.

(Data is published annually)

**PH 12** – Fuel poverty improved in Halton between 2020 and 2021.

(Data is published annually. N.B. 2021 data was updated nationally in summer 2023)

**PH 13** – New STI rates reduced in Halton between 2018 and 2021; but has increased slightly in 2022. However, rates are consistently better than the England. Data is published annually.

**PH 14** – Data covers Halton & Warrington at present and was only collected from April 2022. The proportion has remained stable throughout the year and met the target.

**PH 15** – Provisional 2022/23 indicates the rate of alcohol-specific admissions has reduced and is on track to meet the target.

(Data is provisional; published data will be released later in the year).

**PH 16** - Data does fluctuate year on year but in 2022/23, the Halton proportion of successful completions was worse than the England average.

## APPENDIX 1 – Financial Statements

**ADULT SOCIAL CARE DEPARTMENT****Finance****COMPLEX CARE POOL BUDGET****Revenue Budget as at 30<sup>th</sup> September 2023**

	Q2				
	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend)	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Intermediate Care Services	3,608	1,718	1,639	79	284
Oakmeadow	1,170	571	517	54	122
Community Home Care First	1,530	532	532	0	0
Joint Equipment Store	829	346	346	0	0
Development Fund	670	0	0	0	670
HICafs	3,226	1,303	1,261	42	85
Discharge Schemes	1,921	960	960	0	0
Contracts & SLA's	3,320	291	261	30	84
Carers Breaks	450	206	147	59	119
Carers centre	354	177	177	0	0
Residential Care	1,246	623	623	0	0
Domiciliary Care & Supported Living	3,713	1,857	1,857	0	0
<b>Total Expenditure</b>	<b>22,037</b>	<b>8,584</b>	<b>8,320</b>	<b>264</b>	<b>1,364</b>
<b>Income</b>					
BCF	-12,762	-6,381	-6,381	0	0
CCG Contribution to Pool	-2,864	-1,416	-1,416	0	0
ASC Discharge Grant	-1,921	-1,431	-1,431	0	0
Transfer from reserve	-223	-223	-223	0	0
<b>Total Income</b>	<b>-17,770</b>	<b>-9,451</b>	<b>-9,451</b>	<b>0</b>	<b>0</b>
<b>Net Operational Expenditure</b>	<b>4,267</b>	<b>-867</b>	<b>-1,131</b>	<b>264</b>	<b>1,364</b>
<b>Recharges</b>					
Premises Support	0	0	0	0	0
Transport	0	0	0	0	0
Central Support	0	0	0	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	0	0	0	0	0
<b>Net Total Recharges</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>ICB Contribution Share of Surplus</b>	<b>0</b>	<b>0</b>	<b>132</b>	<b>(132)</b>	<b>(682)</b>
<b>Net Departmental Expenditure</b>	<b>4,267</b>	<b>-867</b>	<b>-999</b>	<b>132</b>	<b>682</b>

**Comments on the above figures:**

The financial performance as at 30<sup>th</sup> September 2023 shows the Complex Care Pool Budget is £0.264m under budget profile as this point of the financial year. Based on current intelligence, the forecast outturn for the year end is £1.364m under approved budget (including £0.67m development fund) which is split evenly with Health in accordance with the terms of the pool budget. Therefore, the year-end position for the Council is anticipated to be approximately £0.682m. However, as we move into winter this may change as the usual cyclical pressures intensify.



The underspend on Intermediate Care Services, Oakmeadow and HICafs is due to staff costs being lower than expected at the start of the financial year. Expenditure on Contracts and SLA's is less than anticipated at budget setting time due to Inglenook. Although there are two service users using the service one is now funded by Continuing Health Care. Expenditure on Carer's Breaks is £0.059m less than anticipated for the year to date, as demand for services is still lower than pre-pandemic levels.

Although the pool budget does experience a favourable financial performance at this time of year, funding is usually redirected to those services under extreme pressure such as the Health & Community Care budget. This is a volatile budget as demand fluctuates particularly during winter months. The Health & Community Care budget historically has always overspent due to limited resources and reliance on the pool budget underspend to offset pressures has become the norm since the pandemic. Although budgets have managed to be balanced over recent years this strategy is unsustainable long term.

#### **Pooled Budget Capital Projects as at 30<sup>th</sup> September 2023**

	2023-24 Capital Allocation £'000	Allocation To Date £'000	Actual Spend £'000	Total Allocation Remaining £'000
Disabled Facilities Grant	650	360	358	292
Stair lifts (Adaptations Initiative)	200	100	85	115
RSL Adaptations (Joint Funding)	300	80	60	240
Telehealthcare Digital Switchover	300	0	0	300
Millbrow Refurbishment	200	40	37	163
Madeline Mckenna Refurb.	1,000	20	14	986
St Luke's Care Home	100	25	24	76
St Patrick's Care Home	100	0	44	56
<b>Total</b>	<b>2,850</b>	<b>625</b>	<b>622</b>	<b>2,228</b>

#### **Comments on the above figures:**

Allocations for Disabled Facilities Grants/Stair Lifts and RSL adaptations are consistent with 2022/23 spend and budget, and expenditure across the 3 headings is projected to be within budget overall for the financial year.

The £0.4m Telehealthcare Digital Switchover scheme was approved by Executive Board on 15 July 2021. Significant capital investment is required to ensure a functional Telehealthcare IT system is in place prior to the switch-off of existing copper cable-based systems in 2025. Procurement commenced in 2022/23 with an initial purchase to the value of £0.1m. It is anticipated that the scheme will be completed in the current financial year, fully funded from the residual capital allocation of £0.3m.

On 16<sup>th</sup> June 2022 Executive Board approved a £4.2m refurbishment programme in respect of the four Council owned care homes, to be completed withing a three-year timescale. Halton purchased the homes, with the exception of Madeline McKenna, when it was evident that the buildings had been neglected. £0.419m was spent on refurbishment across the 4 homes in the previous financial year, and £1.4m has been allocated for current year refurbishment costs. Unspent funding at year-end will be carried forward to the 2024/25 financial year to enable the scheme's completion.

**Revenue Operational Budget as at 30 September 2023**

	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend)	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Employees	15,664	7,818	7,967	(149)	(301)
Premises	535	290	300	(10)	(20)
Supplies & Services	860	583	568	15	20
Aids & Adaptations	37	19	11	8	10
Transport	228	114	155	(41)	(80)
Food Provision	201	100	100	0	0
Agency	678	337	337	0	0
Supported Accommodation and Services	1,357	699	706	(7)	(10)
Emergency Duty Team	110	55	65	(10)	(20)
Transfer To Reserves	357	0	0	0	0
Capital Financing	44	0	0	0	0
Contacts & SLAs	577	402	407	(5)	(10)
Housing Solutions Grant Funded Schemes					
Homelessness Prevention	357	126	126	0	0
Rough Sleepers Initiative	157	37	37	0	0
<b>Total Expenditure</b>	<b>21,162</b>	<b>10,580</b>	<b>10,779</b>	<b>(199)</b>	<b>(411)</b>
<b>Income</b>					
Fees & Charges	-803	-402	-400	(2)	0
Sales & Rents Income	-454	-300	-296	(4)	(10)
Reimbursements & Grant Income	-1,537	-535	-579	44	90
Capital Salaries	-121	-61	-61	0	0
Housing Schemes Income	-591	-591	-591	0	0
<b>Total Income</b>	<b>-3,506</b>	<b>-1,889</b>	<b>-1,927</b>	<b>38</b>	<b>80</b>
<b>Net Operational Expenditure</b>	<b>17,656</b>	<b>8,691</b>	<b>8,852</b>	<b>(161)</b>	<b>(331)</b>
<b>Recharges</b>					
Premises Support	583	292	292	0	0
Transport Support	575	288	349	(61)	(120)
Central Support	3,667	1,833	1,833	0	0
Asset Rental Support	13	0	0	0	0
Recharge Income	-112	-56	-56	0	0
<b>Net Total Recharges</b>	<b>4,726</b>	<b>2,357</b>	<b>2,418</b>	<b>(61)</b>	<b>(120)</b>
<b>Net Departmental Expenditure</b>	<b>22,382</b>	<b>11,048</b>	<b>11,270</b>	<b>(222)</b>	<b>(451)</b>

**Comments on the above figures**

Net department expenditure, excluding the Community Care and Care Homes divisions, is £0.222m above budget at the end of the second quarter of the 2023/24 financial year.

Employee costs are currently £0.149m above budget profile. This reflects the currently unbudgeted assumed additional cost of the 2023/24 pay award (£1,925 plus on-costs per FTE, less the budgeted 4% overall), less savings above target in relation to staff turnover. Total unbudgeted pay award costs are forecast at £0.451m for the year, and the staff savings above target are estimated at £0.150m for the year. The current £0.149m spend above profile represents the half-year effect to date.

The overspends on transport and transport recharges are currently under review, although full-year projections are currently based on a continuation of current spend patterns.





Housing Strategy initiatives included in the report above include the Rough Sleeping Initiative and Homelessness Prevention Scheme. The Homelessness Prevention scheme is an amalgamation of the previous Flexible Homelessness Support and Homelessness Reduction schemes.

At this stage, a net overspend of £0.451m is projected for the full financial year, which relates to the projected costs of the proposed pay above existing budget provision.




**Approved 2023/24 Savings**




Please see Appendix A for details of progress towards achieving budget efficiency savings agreed by Council in February 2023.

## Progress Against Agreed Savings

	Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value			Current Progress	Comments
				23/24 £'000	24/25 £'000	25/26 £'000		
ASC1	Housing Solutions	474	Remodel the current service based on good practice evidence from other areas.	0	0	125		Expected to be achieved in 2025/26 budget year
ASC2	Telehealthcare	680	Explore alternative funding streams such as Health funding or Disabled Facilities Grants.  Increase charges / review income.  Cease the key safe installation service.	0 0 0	170 170 15	0 0 0		Expected to be achieved in 2024/25 budget year
ASC11	Dorset Gardens Care Services	471	Cease onsite support and transfer to the domiciliary care contract.	275	0	0		To be achieved in current year, although full-year savings not realised
ASC17/18	Quality Assurance Team	395	Review the activities of the Quality Assurance Team, given there are fewer providers for domiciliary care and the transfer of four care	35 0	0 50	0 0		Current year savings achieved, and 2024/25 savings on target

			homes into the Council.  Merge the service with the Safeguarding Unit.					
ASC12	Meals on Wheels	33	Increase charges to ensure full cost recovery. A procurement exercise will also be completed for the provision of food.	33	0	0	<input checked="" type="checkbox"/>	Charge increase implemented
ASC16	Shared Lives (Adult Placement Service)	115	Engage with an external agency currently operating Shared Lives to take over the running of this service. It is anticipated that this would provide an improved service.	0	58	0	<input checked="" type="checkbox"/>	Expected to be achieved in 2024/25 budget year
ASC19	Voluntary Sector Support	N/A	Review the support provided by Adult Social Care and all other Council Departments, to voluntary sector organisations.	0	200	100	<input checked="" type="checkbox"/>	Expected to be achieved in the relevant budget years

			This would include assisting them to secure alternative funding in order to reduce their dependence upon Council funding. A target saving phased over two years has been estimated.					
ASC4	Positive Behaviour Support Service	349	Increase income generated in order to ensure full cost recovery, through increased service contract charges to other councils.  Review the Integrated Care Board contribution for Adults, to ensure the full recovery of related costs.	0	100	0		Expected to be achieved in 2024/25 budget year
				0	150	0		
ASC6	Attract £500k investment from the pooled budget (BCF) from 2024/25.	0	500	1,000		Expected to be achieved in the relevant		To be achieved in current year, although full-year savings not realised

	Undertake work in years 1 and 2 to reduce reliance upon contracted services from 2025/26. Services are currently in the process of being redesigned on a "Strengths Based Approach" ie. focused upon prevention.					budget years		
ASC5	<b>Total Adult Social Care Department</b>	<b>641</b>	<b>1,837</b>	<b>1,225</b>				Currently under review, full-year savings will not be realised
ASC21	Mental Health Team Carers Officer	38	Commission the Carers Centre to complete all Carers assessments or undertake the function through the Initial Assessment Team.	38	0	0		To be achieved in current year, although full-year savings not realised
ASC15	Learning Disability Nursing Team	424	Cease provision of this service. The service is a Health related function rather than Adult Social Care, but this is a historical	0	424	0		Expected to be achieved in 2024/25 budget year

			arrangement. The Integrated Care Board would need to consider how they want to provide this function.					
ASC14	Care Management Community Care Budget	18,982						

## **PUBLIC HEALTH & PUBLIC PROTECTION DEPARTMENT**

### **Revenue Budget as at 30 September 2023**

	<b>Annual Budget</b>	<b>Budget to Date</b>	<b>Actual Spend</b>	<b>Variance (Overspend)</b>	<b>Forecast Outturn</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
<b>Expenditure</b>					
Employees	4,629	2,210	2,150	60	120
Premises	6	0	0	0	0
Supplies & Services	255	143	135	8	16
Contracts & SLA's	7,006	2,922	2,917	5	10
Transport	4	2	1	1	2
Other Agency	23	23	23	0	0
<b>Total Expenditure</b>	<b>11,923</b>	<b>5,300</b>	<b>5,226</b>	<b>74</b>	<b>148</b>
<b>Income</b>					
Fees & Charges	-71	-134	-143	9	18
Reimbursements & Grant Income	-44	-160	-164	4	8
Transfer from Reserves	-1,242	0	0	0	0
Government Grant Income	-11,117	-5,791	-5,802	11	22
<b>Total Income</b>	<b>-12,474</b>	<b>-6,085</b>	<b>-6,109</b>	<b>24</b>	<b>48</b>
<b>Net Operational Expenditure</b>	<b>-551</b>	<b>-785</b>	<b>-883</b>	<b>98</b>	<b>196</b>
<b>Recharges</b>					
Premises Support	156	78	78	0	0
Transport	20	10	10	0	0
Central Support	2,330	1,165	1,165	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	-482	-241	-241	0	0
<b>Net Total Recharges</b>	<b>2,024</b>	<b>1,012</b>	<b>1,012</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>1,473</b>	<b>227</b>	<b>129</b>	<b>98</b>	<b>196</b>



## Comments on the above figures

### Financial Position

At the end of Quarter 2 net spend for the department is £0.098m under budget profile. The estimated outturn position is for net spend to be £0.196m under the approved budget. Which in comparison with Quarter 1 projects a similar outturn position.




Employee costs for the year are expected to be marginally under the approved budget due to vacancies the department is holding. The forecast includes increases to pay from the to be agreed pay deal.

Expenditure on supplies and services will be kept to essential items only throughout the year and is currently running in line with the budget profile.

Savings targets for 23/24 are expected to be achieved.




## APPENDIX 2 – Explanation of Symbols

Symbols are used in the following manner:

<b>Progress</b>		<b><u>Objective</u></b>	<b><u>Performance Indicator</u></b>
<b>Green</b>		Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the <u>annual target is on course to be achieved.</u></i>
<b>Amber</b>		Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage whether the annual target is on course to be achieved.</u></i>
<b>Red</b>		Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the <u>target will not be achieved unless there is an intervention or remedial action taken.</u></i>

### **Direction of Travel Indicator**

*Where possible performance measures will also identify a direction of travel using the following convention*

<b>Green</b>		<i>Indicates that <b>performance is better</b> as compared to the same period last year.</i>
<b>Amber</b>		<i>Indicates that <b>performance is the same</b> as compared to the same period last year.</i>
<b>Red</b>		<i>Indicates that <b>performance is worse</b> as compared to the same period last year.</i>
<b>N/A</b>		<i>Indicates that the measure cannot be compared to the same period last year.</i>