

Public Document Pack



Health and Wellbeing Board

Wednesday, 20 March 2024 2.00 p.m.
Karalius Suite - Halton Stadium, Widnes

A handwritten signature in black ink that reads 'S. Young'.

Chief Executive

*Please contact Kim Butler on 0151 5117496 or e-mail
kim.butler@halton.gov.uk for further information.*

The next meeting of the Committee is to be confirmed

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

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HEALTH AND WELLBEING BOARD

At a meeting of the Health and Wellbeing Board on Wednesday, 17 January 2024 at the Karalius Suite - Halton Stadium, Widnes

Present: Councillor Wright (Chair)
 Councillor J. Lowe
 Councillor Woolfall
 A. Allt, National Institute of Health Research
 K. Appleton, Halton Borough Council
 V. Amour, Halton Borough Council
 C. Bradbury, People in Partnership
 H. Crampton, Cheshire Fire & Rescue Service
 R. Foster, Bridgewater Community Healthcare NHS Foundation Trust
 L. Gardner, Warrington & Halton Teaching Hospitals
 D. Gregg, Halton Borough Council
 N. Hidderley, Halton Borough Council
 A. Hindhaugh, Halton Borough Council
 L. Hughes, Healthwatch Halton
 J. Jones, Citizens Advice Bureau
 A. Leo, Integrated Commissioning Board
 W. Longshaw, St. Helens & Knowsley Hospitals
 T. McPhee, Mersey Care NHS Trust
 D. O'Connor, Halton Borough Council
 I. Onyia, Public Health
 S. Wallace-Bonner, Halton Borough Council
 D. Wilson, Healthwatch Halton

Apologies: Councillor T. McInerney
 S. Patel, Local Pharmacy Committee

Also in attendance: Councillor Carlin and 9 members of the public

Action

HWB20 MINUTES OF LAST MEETING

The Minutes of the meeting held on 11 October 2023 having been circulated were signed as a correct record.

HWB21 RESEARCH READY COMMUNITY PROJECT

The Board received a report regarding the Research Ready Community Champion Power in Partnership Project (PIP) which was based in Runcorn.

The Research Ready Community (RRC) Project commenced in Halton in June 2023 and employed six RRC Champions and one NIHR Research Engagement Officer. The Champions were young adults and care leavers who were part of a National programme to help build better

relationships with communities and increase equitable access to health research amongst under-represented groups.

The Board also received a short film which provided a snapshot of what the Champions had achieved so far.

The Champions had identified six areas of health that had affected them the most:

- Isolation and loneliness;
- Diabetes and its complications;
- Managing heart conditions;
- Addiction (alcohol, drugs and gambling);
- Depression, mental health and wellbeing; and
- Sexual health support.

The young people had also made further developments by attending meetings with senior health professionals for the local NHS and shared their own experiences to help organisations to make the changes needed to improve their lives.

The report also outlined the background to the programme and the findings to the community research that had been carried out.

The Board discussed the information presented to them and the following comments were noted:

- Local organisations needed to promote the services that were available;
- How should this initiative be used to shape services and how will be make a difference? A wider discussion was needed; and
- Service providers were keen to speak to the Champions and have some further conversations.

RESOLVED: that the Board note the presentation.

HWB22 HEALTH AND WELLBEING BOARD FORWARD PLAN

The Board received a report regarding the Health and Wellbeing Board Forward Plan.

Members were reminded that a review of the Board and its role that took place in 2022, where it was suggested that part 1 of the agenda included the statutory functions and accountabilities and part 2 of the agenda was thematic; led by the priorities of the Health and Wellbeing Strategy.

There were four themes and these would be aligned with the quarterly Board meetings. The report contained an outline plan which would be updated accordingly when more details were available. Lead officers would work with members of the Board to identify content for the agenda.

Members of the Board noted the contents of the report

RESOLVED: That the Board:

- 1) note the content of the report; and
- 2) endorse the use of a thematic Forward Plan.

HWB23 HALTON FAMILY HUBS

The Board received a presentation and report which provided an update of the progress of Halton Family Hubs.

In 2019, the Government's Manifesto pledged to champion Family Hubs across England. In December 2020, the Minister for Children outlined plans to create a National Centre for Excellence for Hubs, funded by the Department for Education (DfE). This included a Best Start for Life Review which was a programme to ensure the best support during the first 1001 days of a baby's life and maximise lifelong emotional and physical wellbeing.

In April 2022, the DfE and DHSC announced that Halton would be one of the 75 Local Authorities who would become a pilot area for the Family Hubs and Best Start to Life Scheme. Since December 2022, Halton had been working hard to develop this model.

The Board was advised that Family Hubs were designed to support children and families by bringing together all the support families may need from pregnancy through to young people turning 19, or 25 if they had a disability. They brought together early help and intervention delivered by a range of partners and organisations and services that could be delivered in various ways from different venues i.e. children's centres, libraries, health centres, GP practices and many more.

The presentation outlined the journey so far in the development of the model, its achievements and challenges over the past 12 months and the next steps for the future.

The Chair provided some positive feedback she had received about an event organised by the service.

RESOLVED: That the Board noted the presentation.

HWB24 CORPORATE PARENTING

A report was presented to update the Board on the role it plays in supporting and delivering corporate parenting responsibilities.

The Board also received a presentation which set out the corporate parenting principles, the role and responsibilities of a corporate parent and who the members were on the Corporate Parenting Board.

Members were advised that the Corporate Parenting Strategy was shortly to be re-launched and invites would be sent out in due course.

RESOLVED: That the Board:

- 1) adopts the principles of the corporate parenting strategy and the defining of the seven key priorities, to support the improvement journey of Halton care experienced young people and care leavers;
- 2) notes the senior management representation across Halton and affirm the corporate commitment to develop stronger partnership working to ensure the needs of care experienced young people and care leavers are galvanised and prioritised by all stakeholders, ensuring 'our children are our future'; and
- 3) notes that the cross-party members, senior managers and key stakeholders would meet bi-monthly, receive reports, including performance reports, undertaking strategic and thematic enquiry into specific elements of the strategy, and seek ways of resolving barriers to support the success of our people place and practice.

Executive Director
of Children's
Services

HWB25 INSPECTION OF SEND LOCAL AREA PARTNERSHIP

The Board received a presentation from the Operational Director, Education, Inclusion and Provision, which provided an update on the recent Special Educational Needs and Disabilities (SEND) Local Area Partnership Ofsted Inspection.

The presentation described the membership of the Local Area Partnership and who they were. Under the umbrella of One Halton, the Council, community and NHS

organisations work together for the benefit of children and young people living in Halton. It outlined the responsibilities and priorities of the partnership.

The presentation also outlined the partnership's learning from the process; the outcome of the inspection was embargoed until the publication of the final Ofsted report. The report would share the responsibilities of the Local Area Partnership and help to inform the Board of priorities which would inform strategic planning and support the partnership to deliver the right support at the right time, in the right way, for children and young people with SEND.

Once the inspection report was published, the findings would be shared with all stakeholders. The Strategy and priority plans for the SEND Local Area Partnership would be shared and steps would be taken to progress as a partnership on the collective vision for children and young people with SEND in Halton.

RESOLVED: That the report and presentation be noted.

HWB26 UPDATE ON THE TRANSITION TEAM

The Board received a report which provided an overview on the Transition Team. The Transition Team was established in 2017 with a remit to work with young people with severe learning disabilities (SLD) and physical and sensory disabilities (PSD) to ensure they had a smooth transition from children's services to adult services.

The Board also received a presentation from the lead Occupational Therapist, which described a piece of research that had been undertaken to identify some of the issues surrounding the delays in provision of disabled paediatric equipment in Halton and the impact this had on families.

The research made a number of recommendations which were noted as follows:

- Review how the process of service provision could be streamlined;
- Compile a policy for the supply of all equipment for disabled children encompassing acceptable timescales in all areas of provision; and
- Purchase a core stock to reduce early intervention time after initial assessment.

It was also noted that the budget for this service area

was currently £25,000, however, in order to purchase the required specialised bespoke equipment, this budget would require a substantial increase.

RESOLVED: That the Board note the report.

HWB27 CITIZENS ADVICE HALTON - CHILD POVERTY UPDATE

The Board considered a report on how the rising rate of the National Living Wage (NLW) in April 2024 and the rising cost of school uniforms could impact on child poverty levels in Halton.

The report highlighted some of the issues faced by local families and set out some steps which local partners could take to help reduce the financial burden faced by families with young children in schools.

The report also described the negative impact of the rising NLW and the potential implications which included:

- Low income working households will not see the full value of a higher NLW;
- Few parents will be exempt from the benefits cap;
- Families would not be eligible for free school meals;
- There would be implications for Universal Credit conditions; and
- Self-employed parents may lose benefit income.

The report outlined a number of recommendations relating to the rising NLW and cost of school uniforms.

The Board noted and discussed the report and suggested that further work needed to be done to revisit interventions and maximise income.

RESOLVED: That the report be received and the Board determines a way forward.

Director of Public Health

The Chair expressed thanks to Kath Parker, Chair of Healthwatch Halton who had now retired from the role. Kath had been a member of the Board for many years and her support had been invaluable. The Chair also welcomed Lydia Hughes who had taken over the role on an interim basis.

Meeting ended at 4.00 p.m.

REPORT TO:	Health & Wellbeing Board
DATE:	20 th March 2024
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Health and Wellbeing
SUBJECT:	NHS Health Checks
WARD(S)	Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To provide the Health and Wellbeing Board with an update on activities by the Council which contribute towards the Live Well theme from the Health and Wellbeing Board Strategy theme focussed on working age adults.

2.0 RECOMMENDATION: That the Board:

1) Note the report; and

2) Consider and advise on any further opportunities to improve and address inequities in uptake of NHS Health Checks.

3.0 SUPPORTING INFORMATION

3.1.1 Background Information

3.1.2 Cardiovascular disease (CVD) remains a leading cause of ill health and mortality. People living in the most deprived areas of England are almost four times as likely to die prematurely from CVD than those living in the least deprived area.

3.1.3 Premature mortality from cardiovascular disease for those aged under 75 is significantly higher in Halton when compared to the English average.

3.1.4 The NHS Health Check was launched in 2009 (with early adopters starting in 2007) to reduce ill-health from cardiovascular disease (CVD). It is a mandatory service and since 2013, local authorities have been responsible for the NHS Health Check programme. People aged 40 to 74 with no known pre-existing CVD are eligible for an NHS Health Check every 5 years. It reviews the risks to their health and seeks to reduce the likelihood of CVD-related illnesses by supporting adoption of healthier behaviour, onward referral to services, or by through prescribing of relevant medication (e.g. for high blood pressure).

3.1.5 Halton's data showed that the uptake of the NHS Health Check was lowest among those living in the most deprived areas and ethnic minorities; this is similar to the pattern of uptake seen nationally.

3.1.6 In 2022, a pilot to help tackle the inequitable uptake of Health Checks in Halton was developed. Initially, the team focussed on understanding issues and barriers which informed an action plan to increase uptake, focussing on ethnic minority groups and those living in deprived areas.

3.1.7 In the majority of areas in England, Health Checks are delivered via GP staff in primary care- this is the most common model across England. In addition, Halton also delivers Health Checks in the community as well as in Primary Care (Health Improvement Team working in General Practice) to meet local need and further work has been done (as described below) to help improve this offer.

3.2 Pilot findings

3.2.1 To understand how to improve accessibility and uptake of the NHS Health Check service, a review of current evidence alongside a survey and interviews with targeted population groups were completed.

3.2.2 Recommendations from the review included the following:

- Booking via telephone, text and online for patients to book their own appointment.
- Increase availability of appointments outside of routine working hours (e.g. evenings and weekends).
- Access to the service at different settings e.g. community venues and workplaces.

3.3. Booking system

3.3.1 A new online booking system was launched earlier this year to enable patients to be able to book appointments in the community themselves. This has seen a significant increase in appointments booked with clinics now booked 6 weeks in advance in the community. An example of the booking system can be seen on the following link: <https://outlook.office365.com/owa/calendar/NHSHealthChecks2@halton.gov.uk/bookings/>

3.4 Increasing the availability and accessibility of appointments

3.4.1 As noted above, in addition to the universal NHS Health Check offer is delivered via GP staff in primary care Halton also delivers Health Checks in the community as well as in Primary Care. Findings from the pilot demonstrated the need to expand the community model to reach those most at need.

Community settings now include:

- Employment Services – The Health Improvement Team have partnered with Halton people into jobs which offers a range of services to help local residents seek employment. Health can be a barrier to employment so an NHS Health Check can help to identify issues and onward referral to services as needed.
- Workplaces – Often finding the time to access health services outside of working hours can be a barrier for people to attend. The NHS Health Checks are now

included in the Workplace Health Program. This means that individuals can attend a Health Check during their workday. It also supports employers to reduce absenteeism and improve productivity by supporting employees to become healthier.

- Community Clinics – An ability to attend health services during regular opening hours and use public transport to primary care have also been reported as a barriers to accessing services so evening and weekend clinics are now available in community settings across the borough.
- Targeted clinics- These have been developed (in partnership with agencies already working with these groups) to support those most in need but least likely to access routine clinics. Groups include asylum seekers/refugees, travellers, drug and alcohol users, the homeless population, and probation service users.

3.5 Delivery of NHS Health Checks programme

3.5.1 To improve patient centre care and better serve underrepresented groups, the NHS Health Check contract was updated.

3.5.2 Contractual updates to increase uptake and reduce health inequalities include:

- Mandatory Training –Staff who deliver NHS Health Checks must complete the Level 2 Royal Society of Public Health ‘Understanding the NHS Health Check’. This qualification gives staff the knowledge around a holistic approach to health interventions as well as covering key topics of addressing health inequalities and differentiating approach based on this.
- Incentivising Target Populations – GP Practices now receive an enhanced payment for completing an NHS Health Check on the poorest patients within the eligible population.
- Recent introduction of new software- NHS Health Checks should be completed using the newly introduced ‘Health Diagnostics’ software. This is to improve data quality, analysis and allow for focus on populations who have a low uptake.

3.6 Health Diagnostics software

3.6.1 The new IT software has the following functions to help improve inequities in uptake and monitoring of outcomes following Health Checks. Key functions of the system include:

- Targeted invitations are prioritised based on key demographics such as ethnic minority and resident deprivation score (Index of Multiple Deprivation).
- Interactive Consultation – the forms used to record patient information to clearly demonstrate their health status and uses a RAG (Red, Amber, Green) display to clearly outline what a reading means. This consultation also

advises staff on the recommended advice to be given to the patient.

- Automated Referrals –staff would previously have to use separate systems to make a referral. There is now a system where staff now have to actively decline to refer a patient for onward care (if indicated by the outcome of the Health Check). Referrals are then automatically sent to the relevant service.
- Reporting/Performance Monitoring – a detailed analysis outlining outcomes will be available over time allowing for analysis of Health Check data (e.g. population level data on physiological measurements) as well recording outcomes such as a patient receiving relevant medication.

3.7 Progress and next steps

- 3.7.1 Following the changes in the NHS Health Check service, there has been an increase of uptake overall as well as within those living the most deprived areas and ethnic minority groups.
- 3.7.2 The results have shown that there has been an increase in overall uptake from 2018/19 (2601) to 2023/24 year to date (3509). At the same time, there has been an increase in invite and uptake in Health Checks in the most deprived areas and ethnic minorities groups meaning that there is an overall decrease in inequalities.
- 3.7.3 Next steps are to promote the service through social media and community presence. A communications and marketing plan has been created for the service to fulfil this need.

4.0 POLICY IMPLICATIONS

- 4.1 The programme of work carried out by the Health Improvement Health Check Team to improve the health and wellbeing of working age residents will contribute to and inform strategic development of One Halton workstreams moving forwards.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 Finance

The NHS Health Checks programme is one of the mandated services of the local authority. It is commissioned and delivered from the public health budget.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children & Young People in Halton

None

6.2 Employment, Learning & Skills in Halton

The service is working in partnership with local authority employment services (Halton People into Jobs) to implement NHS Health Checks to encourage healthier lifestyles and address health issues. This approach is to better support access to employment.

6.3 A Healthy Halton

The work programmes identified in this report focus directly on this priority, to improve adults health and wellbeing, enabling them to live longer, healthier and happier lives.

6.4 A Safer Halton- None

6.5 Halton's Urban Renewal - None

7.0 RISK ANALYSIS

7.1 This report content does not present any obvious risk. Any risks linked to implementation will be identified as they arise and recorded.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 The expanded service to improve accessibility and availability of services based on local insights supports improving uptake of the service across the population.

8.2 The new IT software encourages a more inclusive approach by giving bespoke advice based on known demographic differences to make the service proportionately universal in invitation process. An example is the difference in ranges of BMI dependant on ethnicity are enabled to provide more informed CVD risk assessment and advice.

8.3 Changes to the contract (in particular the need to complete training) supports staff to deliver an inclusive approach to all residents.

9.0 CLIMATE CHANGE IMPLICATIONS

9.1 By promoting healthier lives, this encourages a reduction carbon emission associated with reduction and/or avoidance of increased future healthcare needs. This includes a direct reduction in travel to healthcare services (and associated costs) which will reduce the carbon footprint associate with healthcare.

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

None under the meaning of the Act.

REPORT TO:	Health and Wellbeing Board
DATE:	20th March 2024
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Health and Wellbeing
SUBJECT:	Reducing Suicides in Men
WARD(S)	Borough Wide

1.0 **PURPOSE OF THE REPORT**

1.1 Report will provide an overview of work taking place to reduce suicides in men in Halton.

2.0 **RECOMMENDED: That the Board:**

1) **Note the report; and**

2) **Consider if there is further action which can be taken to support this work.**

3.0 **Background information**

Nationally three times as many men die by suicide each year (75%) compared to women, with suicide being the biggest cause of death in men under the age of 50. Local data shows over the last 3 years 66% of all suicides in Halton are male. Although this figure is slightly lower than the national data which is encouraging it still demands a specific focus locally.

The reasons men take their own life are complicated, not yet fully understood and requires further research. However, we do know men can be impacted very differently to women in terms of the problems they coping with, how they behave when they feel they are struggling as well as the unhelpful coping strategies, they tend to turn to in order to get some relief. We also know through national research that only 34% of men would talk openly about how they feel and 31% would feel embarrassed about seeking help for a mental health problem. Finally, we are aware that men are less likely to take notice of generic marketing material as they think it isn't for them.

To reduce the number of men taking their lives locally a dedicated member of staff has been recruited to lead on this area of work and an action plan is being developed

3.1. **What Action are we taking?**

Local Action plan

The newly recruited Health Improvement specialist is working collaboratively with lived experienced champions, the local mental health and wellbeing lead and partners to develop an evidenced based action plan to:

Raise awareness of what men can do to look after their mental health.

Raise awareness of specific support available for key issues men are facing.

Share lived experience stories of local men who have overcome challenges.

The ultimate overall aim of the action plan is to reduce the number of males taking their life locally. Although the action plan is being finalised, certain work is already under development or has been completed.

3.2 **Calm Your Mind Campaign**

[Calm Your Mind](#) is a campaign and local website designed with local men for local men with the aim of improving men's mental health and reducing suicides. The campaign focusses on:

- Sharing information specifically for men helping them to understand why they react the way they do to certain situations and problems.
- Raising awareness of positive practical things men can do to calm their minds and think more clearly.
- Sharing details of support available for specific problems to help them get back on their feet.
- Raising awareness of support available via text, web chat and face to face to help them offload in confidence as we know men often don't like worrying their family and friends.

The campaign uses local men's stories to raise awareness of the issues that men can face but more importantly the actions that can help overcome them and get back to a better place. The Health Improvement Specialist works with local lived experienced champions to ensure the campaign continues to meet the needs of local men reflecting the issues they are facing.

JEFF'S STORY

Jeff's story is a powerful reminder of how the shock and stress of losing a family member to suicide can be a traumatic experience that can leave a lasting impact on how you think and feel. This tragedy made him realise that there are so many men struggling alone. He now makes it his mission to be open and honest about how he is feeling and encourages others to do the same.

To listen to local men's stories, visit <https://calmyourmind.co.uk/hear-from-others/>

A variety of assets have been created to enable local organisations and community groups to get involved. Examples of posters and social media visuals can be found below.



To access assets, visit <https://calmyourmind.co.uk/get-involved/>

Since the campaign website had a soft launch in June 2023 further improvements driven by local lived experienced champions Include: the development of a specific page focussed on suicidal feelings, the inclusion of local men's groups as well as the development of 3 new lived experience champion videos.

The campaign and website have been active since June 2023 and receive just under 400 visitors per month. Although it is too early to evaluate its impact, the number of notifications for male suicides in 2023 is just over half of what it was in 2022.

3.3 Exhibition in a box

An exhibition in a box resource has been created for local organisations to hire free of charge to enable them to raise awareness of Calm Your Mind. The exhibition contains a variety of resources to enable a mini 'exhibition' to be set up within their organisations or group to raise the profile of the campaign and website. Resources

included are: Calm Your Mind pop up, Calm Your Mind tablecloth, Calm Your Mind business cards, posters, pens and badges. The exhibition also includes details of local support including men's groups as well as resources to help start conversations. The resource will be available to hire from the 1st of April 2024 and will be widely promoted to local organisations and community groups.

3.4 **Training**

To educate front line professionals and members of the public on men's mental health specific training is under development. The training will focus on the type of issues that are more likely to impact men, how men in distress tend to present differently to women, the types of unhelpful coping styles men are more likely to adopt and how we can support men who are struggling. The training will be ready to pilot from the 1st of April 2024.

3.5 **Family Hubs**

The Health Improvement Specialist is working collaboratively with Family Hubs to ensure any development to Calm Your Mind compliments the work Family Hubs is developing with dads. Work is underway to create a section on Calm Your Mind specifically for dads as we know there are certain stresses and worries common to dads.

3.6 **Working Collaboratively with partners**

The Health Improvement Specialist is keen to work collaboratively with local partners and community groups to raise the profile of Calm Your Mind. For Men's Health week in June 2024 discussions are underway with Widnes Vikings exploring how we can work together to raise the profile of Calm Your Mind.

4.0 **POLICY IMPLICATIONS**

4.1 There are no new Policy implications as a result of this report

5.0 **FINANCIAL IMPLICATIONS**

5.1 There is an economic cost of approximately £1.6 million for every person who takes their own life. Work to reduce suicides mitigates against this economic cost and the unseen implications on the wider system.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES [\(click here for list of priorities\)](#)**

6.1 **Children & Young People in Halton**

Working to reduce male suicides will reduce the number of children and young people who are bereaved due to suicide, contributing to the safeguarding of Children and Young people.

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

Working to reduce male suicides will contribute to employment prospects of residents through the improvement of men's mental health.

6.3 A Healthy Halton

Working to reduce suicides in males will contribute to a healthier community by working to improve men's mental health.

6.4 A Safer Halton

Working to reduce suicides in males contributes to a safer Halton through the reduction in suicides.

6.5 Halton's Urban Renewal

No implication on Urban Renewal

7.0 RISK ANALYSIS

7.1 None

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 The risk of suicide is inequitable and impacts those in areas of high deprivation and males.

9.0 CLIMATE CHANGE IMPLICATIONS

9.1 No climate change implications identified at this time.

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

None under the meaning of the Act.

REPORT TO:	Health & Wellbeing Board
DATE:	20 th March 2024
REPORTING OFFICER:	Director of Public Health
PORTFOLIO:	Health and Wellbeing
SUBJECT:	Halton commitment to HIV Fast Track Cities
WARD(S)	Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To ask the Health and Wellbeing Board to support the opportunity to sign both the Paris and Seville declarations on Fast Track Cities and commit Halton to accelerate and scale-up the response to ending new HIV transmissions by 2030.

2.0 RECOMMENDATION: That the Board:

- i) Endorses the Fast Track Cities Initiative; and
- ii) Puts forward a key representative to be the nominated 'Key Opinion Lead' for Halton Place.

3.0 SUPPORTING INFORMATION

3.1 The Fast Track Cities initiative on HIV was launched globally in 2014. The Paris declaration (see Appendix 1) has been developed and led by the International Association of Providers of Aids Care (IAPAC).

3.2 The Seville declaration is designed to be a supplement to the Paris Declaration (which states that we will put people and specifically under-served communities in the centre of service design).

3.3 Halton's endorsement of the Fast Track Cities initiative will form part of a joint Liverpool City Region (LCR) approach. The city of Liverpool signed up in 2018 and have found that the initiative has helped to drive local plans to improve testing, support, identification and treatment related to HIV, and has bolstered prevention approaches. Liverpool has also found that the benefits associated with the initiative have included a new galvanised approach to a strategic plan, and the ability to attract funding for research and pilots to reach the target of zero new HIV transmissions by 2030.

3.4 The initiative involves aiming for three targets – around making sure people living with HIV (i) know their status, (ii) have access to treatment and (iii) that the treatment is working. This is an exciting opportunity for Halton, as part of LCR, to sign up to commit to achieving the 'triple 95' targets:

- 95%
- 95%
- 95%

With this, Halton can work as a collective, with the other LCR Places, to formulate a series of strategic actions to help LCR be one of the first regions to achieve elimination by 2030.

- 3.5 The experience of the city of Liverpool has been that the Fast Track Cities (FTC) initiative galvanised a new focused partnership approach in that has led to significant change. Prior to FTC, 91% of people knew their HIV status, 98% were successfully in treatment and care, and 96% had undetectable levels of HIV. An estimated 115-120 people were still undiagnosed. Five years later, those statistics had reached 95-99-98, with only 45-50 people estimated to be undiagnosed. This has been significant progress.
- 3.6 HIV prevalence rates have been increasing across LCR. In Halton, the diagnosed HIV prevalence rate for people aged 15-59 years increased by 8.2% between 2021 and 2022. Similar rates of increase have been seen across the other Places. Although the numbers of new HIV diagnoses in Halton are small, there was a substantial increase from two new diagnoses in 2021 to nine new diagnoses in 2022. Of these nine cases, over half were diagnosed at a late stage of infection.
- 3.7 Furthermore, testing rates across certain areas of the region have been declining, most notably amongst women, with the percentage of eligible attendees accepting an HIV test in specialist services declining since 2020. Women have also represented a larger cohort of the above listed late diagnoses.
- 3.8 On the whole, there are a higher number of males seen for care across the region, and more men testing than women. Therefore, targeted work and campaigns are required collectively across the region.
- 3.9 Access to crucial HIV prevention drug PrEP is not equitable across the region either. This picture is mirrored nationally, with the drug largely being accessed by gay and bisexual men and other men who have sex with men (GBMSM). Fast Track Cities would provide the opportunity to action plan and improve access for currently underserved communities, particularly Black and minority ethnic communities and also women. It would also help to improve the rates of identification of PrEP need, to ensure everyone eligible receives the offer of PrEP.

4.0 **POLICY IMPLICATIONS**

- 4.1 An LCR sign up to the FTC approach would allow a regional commitment to re-creating a 'Positive Voices' survey to understand people's attitudes and opinions around HIV to help formulate a clear policy position as well as a baseline figure in our ambition to reduce HIV associated stigma.
- 4.2 The Cheshire and Merseyside Sexual Health and HIV Commissioners network will be the main strategic group to map needs, gaps and develop a relevant regional plan, reporting to Directors of Public Health on a quarterly basis.

5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 This proposal comes as an additional partnership proposal to improve prevention and testing in relation to HIV.

5.2 A joint commitment by the LCR Places would have the scope to see Halton projects and programmes benefit from similar additional funding.

5.3 Most sexual health services, HIV prevention and PrEP are funded from the public health core budget.

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

6.1 **Children & Young People in Halton**

Commissioned services support the Council's priorities for Children and Young People.

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

The improving outcomes in this area will have an impact on improving the health of Halton residents who are of working age.

6.3 **A Safer Halton**

Ending new HIV transmissions will contribute to community safety

6.4 **A Healthy Halton**

Commissioned services supports the Council's priorities for a Healthy Halton.

6.5 **Halton's Urban Renewal**

None

7.0 **RISK ANALYSIS**

7.1 This report content does not present any obvious risk. Any risks linked to implementation will be identified as they arise and recorded.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 This is in line with all equality and diversity issues in Halton and supports a reduction in inequalities.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 There are no obvious impacts on climate change.

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

None

Appendix 1: The seven objectives of the Paris Declaration are set out below.

1. End AIDS and new HIV transmissions as a public health threat in cities by 2030. We commit to rapidly reduce new HIV infections and AIDS-related deaths, including from tuberculosis (TB) and comorbid diseases, including viral hepatitis, putting us on the fast-track to ending AIDS as a public health threat by 2030. We commit to provide sustained access to testing, treatment, and prevention services. We will end stigma and discrimination.
2. Put people at the center of everything we do. We will focus, especially on people who are vulnerable and marginalized. We will respect human rights and leave no one behind. We will act locally and in partnership with our communities to galvanize global support for healthy and resilient societies and for sustainable development.
3. Address the causes of risk, vulnerability and transmission. We will use all means including municipal ordinances and other tools to address factors that make people vulnerable to HIV, and other diseases. We will work closely with communities, service providers, law enforcement and other partners, and with marginalised and vulnerable populations including displaced people, young women, sex workers, people who use drugs, migrants, men who have sex with men, and transgender people to build and foster tolerance.
4. Use our AIDS response for positive social transformation. Our leadership will leverage innovative social transformation to build societies that are equitable, inclusive, responsive, resilient, and sustainable. We will integrate health and social programs to improve the delivery of services including HIV, tuberculosis, and other diseases. We will use advances in science, technology, and communication to drive this agenda.
5. Build and accelerate an appropriate response to local needs. We will develop and promote services that are innovative, safe, accessible, equitable, and free of stigma and discrimination. We will encourage and foster community leadership and engagement to build demand and to deliver services responsive to local needs.
6. Mobilise resources for integrated public health and development. Investing in the AIDS response, together with a strong commitment to public health, is a sound investment in the future of our cities that fosters productivity, shared prosperity and well-being. We will adapt our city plans and resources for a fast-tracked response. We will develop innovative funding and mobilise additional resources and strategies to end AIDS epidemic as a public health threat by 2030.
7. Unite as leaders. We commit to develop an action plan and join with a network of cities to make the Paris Declaration a reality. Working in broad consultation with everyone concerned, we will regularly measure our results and adjust our responses to be faster, smarter, and more effective. We will support other cities and share our experiences, knowledge, and data about what works and what can be improved. We will report annually on our progress.

REPORT TO: Health & Wellbeing Board

DATE: 20 March 2024

REPORTING OFFICER: Executive Director, Adults

PORTFOLIO: Adult Social Care

SUBJECT: Strengths Based Training – Helen Sanderson Associates

WARD(S): Borough-wide

1.0 PURPOSE OF REPORT

The purpose of this report is to provide an update on the Strengths Based Training that is being rolled out across Adult Social Care (ASC) staff from the training provider Helen Sanderson Associates.

2.0 RECOMMENDATION

RECOMMENDED: That the Board:

- 1) **Note the report; and**
- 2) **Agree proposals for future developments.**

3.0 SUPPORTING INFORMATION

- 3.1 As part of our desire to embed strength-based practices into our work within ASC. We commissioned Helen Sanderson Associates to build on the strengths-based work of Professor Samantha Baron and the person-centred foundations of work we already have in place in Halton, following the re-design of the social care assessment and care planning forms to incorporate strengths-based approaches, for the changeover into Eclipse.
- 3.2 We wanted staff to receive training that would make them feel confident and competent in using them in taking a strength-based approach and also to be able to fill in the forms, so the outcome is better lives for people not just completed paperwork. We were thinking about the customer journey and including person-centred reviews rather than only focussing on assessment and planning and we needed to ensure that there is support for managers to be able to embed the changes through meetings and supervision and Develop quality standards.
- 3.3 Helen Sanderson Associates is well known within the training world as an expert on strengths-based approaches and are now the Authors of national guidance for Think Local Act Personal (TLAP) and Department of Health around care and support planning and person-centred practice.

- 3.4 We started by mapping out the customer journey with an appropriate stakeholder group, which included two full days with people who experience and use services in Halton, including carers, professionals, Voluntary Sector and Provider services, to understand what their experience of person centred planning and reviews were and we set out targets of what it could look like and feel like. We then put this alongside statutory, CQC and local authority expectations and began to create a process map of what needs to happen when to deliver this experience for people that also meets other expectations. We will align this with a colleague customer journey that illustrates who needs to do what. We would want to cross reference this against national best practice, e.g. York, to ensure that we would also be delivering national best practice and looking at an evaluation process, by looking at the data/information that is already collected and to agree what else would be needed to know how well the customer journey is being implemented. A graphic using Mural has been used to capture this information in a way that can be widely shared both internally and externally.
- 3.5 HSA has developed a process for supporting social workers, providers and others to develop specific outcomes, aligned with the principles of strengths-based practices and person-centred approaches. The process helps ensure that practitioners build on the strengths of the person, recognizing what matters to them, who matters to them, where matters to them and what is working and not working, and uses this to craft specific, achievable outcomes.
- 3.6 The Support Sequence is a 7-step process taking outcomes and ensuring that a wide range of options are considered to achieve the outcome. This includes working with the person's strengths, technology and community solutions. Put together, the outcome and support sequence will help ensure that we are addressing the assessed needs and outcomes and delivering them in a strengths based and creative way, within current resources. This is described as 'Working Together for Change'

The 7 Steps :

Step 1: Prepare

The first step of WTfC involves deciding the scope of work, agreeing the quantity of information to be collected and how, clarifying the timescales and identifying who needs to be Step 2: Collect.

The second step of WTfC is to collect the information needed to drive the process, from person-centred or outcomes-focused reviews, or in other ways.

Step 3: Theme

The next stage of WTfC happens at the interactive on line workshops. It is about working with a diverse group of people, including commissioners, providers and people with care and support needs their carers and families, to identify themes (or clusters) in the person-centred information.

Step 4: Understand

The next step of WTfC is for people to think together about what the various reasons might be for the top things that are “not working” for people. We do this to understand the multitude of factors that have played a part in creating the problem.

Step 5: Identify success

The next stage of WTfC involves thinking about what success would look like if the top root causes for the things that are not working for people were put right. We do this by asking people to think about what people would be saying if the issues were addressed from a range of different perspectives.

Step 6: Plan

The next stage of the process is where we begin to stand back from the work people have done together to ask, “what does this mean for us?” and “what are we going to do about it?” The previous stages have helped us to recognise and explore a rich vein of person-centred information that tells us a great deal about peoples’ experiences of support.

Step 7: Implement

The next stage of the process is to do what it takes to respond to your analysis, deliver the action plans developed and move towards your vision of success.

Step 8: Learning and review

The final stage of the process involves evaluating the changes you have made and ensuring you understand, evidence and communicate the impact. A key part of the stage is thinking about what it would take to embed the process and how to adopt WTfC as part of core business.

- 3.7 Coaching sessions for managers will be implemented and check use of the processes and new documentation. This will include using Confirmation Practices in one to one supervisions to check progress in using what people have learned (implementing person centred reviews and using the Outcome and Support Sequence). Due to pressure on managers, rather than more days away from work, they will integrate bite sized practice and problem-solving opportunities that can easily be used with team meetings and in supervision with staff.
- 3.8 To ensure that we have a long term legacy from this Training, we have commissioned a Train the Trainer option, which we have geared at Advanced Practitioner level. This program is designed to provide instruction, support, practice, observation, and feedback to those learning to facilitate and train others. Participants will develop their understanding of what person centred information is required to develop and write effective, strength base, person centred outcomes. Participants will also be able to train others in Embedding strength based practices through using the Outcome and Support Sequence, a seven stage process to enable them to think creatively and explore different

ways to deliver outcomes. The Participants will learn how to deliver the course as either face to face or online training.

- 3.9 All training has been delivered on-line, via Zoom with workbooks for individuals to complete as part of small group work and wider sessions. There will be a total of 250 people in total over 2 cohorts, who will receive the training. The first cohort was completed, with a review and tweaks made before the second cohort undertook their training last week. Accreditation will be provided for Train the Trainer staff. This training is supporting the change in Adult Social Care front door, with a greater emphasis on prevention and well-being.

4.0 POLICY IMPLICATIONS

- 4.1 All Care Management Policy & Procedures to be reviewed.

5.0 SAFEGUARDING IMPLICATIONS

- 5.1 None.

6.0 FINANCIAL/RESOURCE IMPLICATIONS

- 6.1 Funding for the Training was provided from slippage in the Care Management staffing budget 2023/24.

7.0 OTHER IMPLICATIONS

- 7.1 This approach will be supported by the Transfer from Care First 6 to Eclipse and the Roll out of the Helen Sanderson, Strengths Based Training Programme.

8.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

8.1 Children & Young People in Halton

None identified at this stage.

8.2 Employment, Learning & Skills in Halton

None identified at this stage.

8.3 A Healthy Halton

None identified at this stage.

8.4 A Safer Halton

None identified at this stage.

8.5 Halton's Urban Renewal

None identified at this stage.

9.0 RISK ANALYSIS

- 9.1 To be continuously monitored.

10.0 EQUALITY AND DIVERSITY ISSUES

10.1 An Equality Impact Assessment (EIA) is not required for this report.

11.0 CLIMATE CHANGE IMPLICATIONS




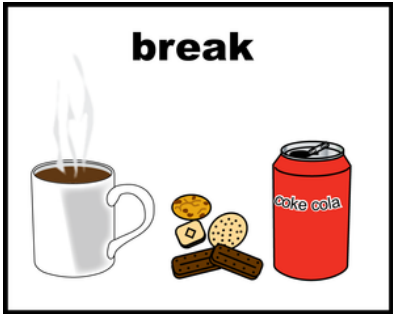
11.1 None identified.

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


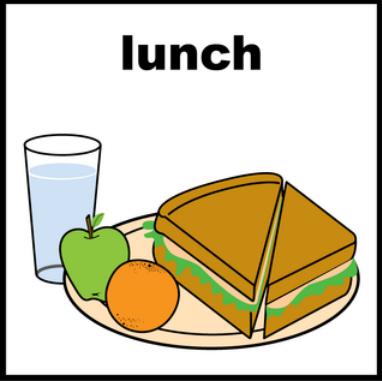

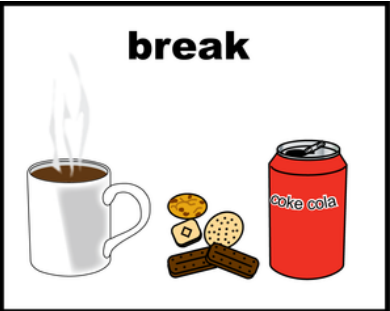
12.1 None under the meaning of the Act.

Agenda Session 2 Monday 18th September

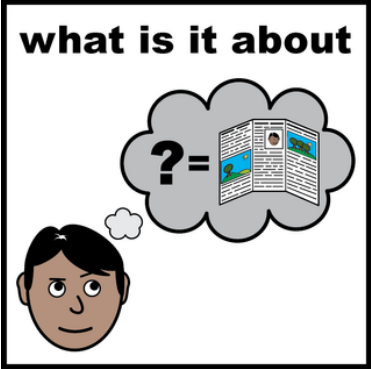

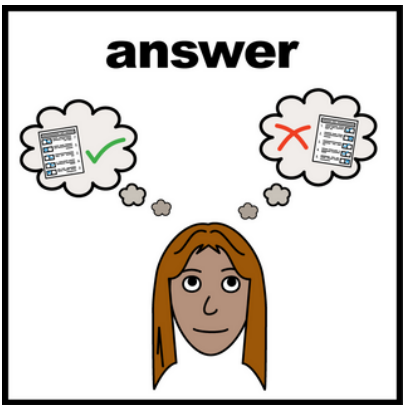

From what is working and not working to best practice

	Time	Agenda Item
<p>welcome</p> 	10.20 am	Arrival on Zoom
<p>welcome</p> 	10.30 am	Hello
<p>working well</p> 	11.10 am	What is going well?
<p>break</p> 	11.45am	Break

Agenda Session 2

	Time	Agenda Item
<p>worried about what</p> 	12.00 pm	What is not working?
<p>lunch</p> 	12.40 pm	Lunch Break
	1.25 pm	How can we make things better?
<p>break</p> 	2.40 pm	Break

Agenda Session 2

	Time	Agenda Item
<p>what is it about</p>  <p>A cartoon illustration of a person's head with a thought bubble containing a question mark and a document icon.</p>	3.00 pm	What does this mean for paperwork?
<p>question</p>  <p>A cartoon illustration of a person sitting on a chair and asking a question to a professional standing behind a desk.</p>	3.15 pm	What questions need to be answered?
<p>answer</p>  <p>A cartoon illustration of a person's head with two thought bubbles: one with a green checkmark and a checklist, and another with a red X and a checklist.</p>	3.35pm	What will happen to your questions?
<p>thank you</p>  <p>A cartoon illustration of a diverse group of people waving their hands.</p>	4.30pm	Close

REPORT TO:	Health and Wellbeing Board
DATE:	20th March 2024
REPORTING OFFICER:	Tom Knight – Head of Primary Care NHS Cheshire and Merseyside
PORTFOLIO:	Health and Wellbeing
SUBJECT:	Dental Services in Halton
WARD(S)	Borough Wide

1.0 PURPOSE OF THE REPORT

1.1 To update the Health and Wellbeing Board on dental services in Halton, local dental improvement plan progress and the publication of the national dental recovery plan.

2.0 RECOMMENDED: That the Board note the report.

3.0 Supporting Information

3.1 Access to NHS dental services is a local, regional, and national issue impacting negatively on patients. Many performers on NHS contracts have switched from providing NHS care to private care resulting in national workforce challenges. This is due to the NHS contract no longer being an attractive option both professionally and financially.

3.2 The NHS contractual payments were agreed in 2006 following a baseline assessment of provision of care over a period of a year. No review has been undertaken and only DDRB uplift annually has been applied (normally around 3%) so effectively given costs of equipment, energy, staff wages etc the contract payments are no longer sustainable for providers and they can only offer a percentage of the UDA value to a performer (13/14£) this is very low if you compare private remuneration and is not attractive to dentists.

3.3 Dental Improvement Plan 2023

The NHS Cheshire and Merseyside Dental Improvement Plan 2023/24 was approved in June 2023. Developed to facilitate an increase in access from 2023/24 this led to a number of providers offering urgent care and urgent care plus. In addition a pathway was created for looked after children and vulnerable patients such as those receiving cancer treatment.

3.4 Running in parallel to these initiatives was the requirement for NHS dentists to recover activity to pre COVID levels.

3.5 Based on regularly reported data collected by the Dental Advice and Triage Helpline the demand for urgent care has increased by approximately 40% since COVID with

many patients repeatedly attending. An urgent care appointment is nationally defined as ‘to get a person out of pain’.

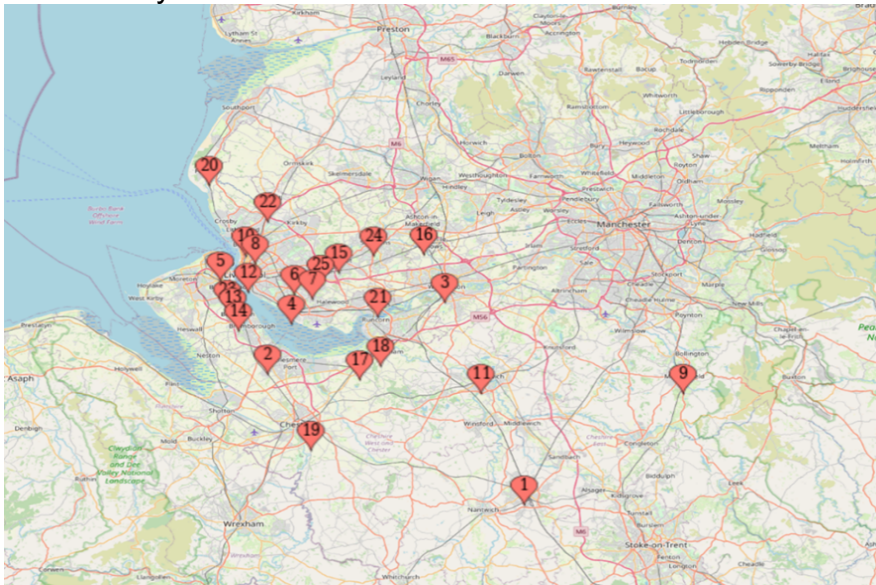
3.6 Working in collaboration the Local Dental Network and Dental Public Health, the dental team created an extension to the urgent care pathway, allowing patients who have attended an urgent care appointment to attend a separately commissioned session where they are offered a full examination and any substantive treatment to get them dentally fit.

3.7 **Urgent Care**

A rapid evaluation of the urgent dental care clinical activity within Cheshire and Merseyside was undertaken in January 2024 by the NHS England North West Dental Public Health Team.

3.8 There is one Urgent Care Dental Centre (UDC) in Halton and there are currently a total of 25 dental practices commissioned in total to deliver Urgent Dental Care activity across Cheshire and Merseyside.

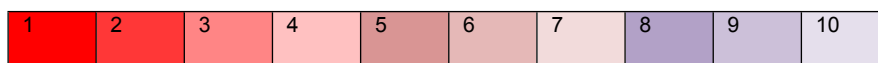
3.9 The map below shows locations of the Urgent Dental Care Centres across Cheshire and Merseyside.



Map no	Dental Practice IMD*	Dental Practice Local Authority
4	1	Liverpool
8	1	Liverpool
10	1	Sefton
15	1	Knowsley
21	1	Halton
24	1	St Helens
3	2	Warrington
5	2	Wirral
7	2	Liverpool
13	2	Wirral
23	2	Wirral
1	3	Cheshire East
12	3	Liverpool
9	4	Cheshire East
25	4	Knowsley
14	5	Wirral
16	6	St Helens

6	7	Liverpool
11	7	Cheshire West and Chester
19	7	Cheshire West and Chester
22	7	Sefton
17	8	Cheshire West and Chester
2	9	Cheshire West and Chester
18	9	Cheshire West and Chester
20	9	Sefton

Key Dental Practice Index of Multiple Deprivation Decline 1 = most deprived 10% nationally, 10 = least deprived 10% nationally



- 3.10 Currently, the Advice Triage Dental Helpline refers a maximum of 3 patients per day (Mon-Friday) to each UDC practice for treatment. From September to December 2023, there were 5,993 appointments offered through the C&M Dental Helpline, of which 5,795 (96.7%) were booked. There was a consistent number of bookings across the area over the 4-month period, with between 1369 – 1502 patient appointments booked.
- 3.11 Urgent dental care plus is an access initiative which was established to enable patients who have attended the UDC for urgent dental treatment to return for a full course of NHS treatment. Currently, there are 49 practices who provide definitive courses treatment to patients via the UDC plus programme.
- 3.12 There are 2 Urgent Care Plus practices in Halton allowing for 3 extra sessions per week. Each session is 3.5 hours in duration and dependant on clinical presentation, there is an expectation that between 4-6 patients can be seen per session, per week.
- 3.13 Evaluation of the UDC plus scheme has been taken from September 2023 – December 2023 and overall, there is a consistent number of appointments used within this service, with an increase over time. On average over the 4 months, 986 patients have received treatment through this service, of which 95.1% were deemed by the UDC plus providers to be appropriate for the pathway. More adults (3602, 91.4%) than children (364, 9.2%) were treated. Using this pathway, 2,116 patients have had a full course of dental treatment to restore their dentition within NHS primary dental care.
- 3.14 Overall recommendations from the evaluation report were as follows:
- Ensure helpline is adequately funded and monitored to enable smooth transition of patients through the system.
 - Ensure future funding mechanism for longer term stability of both UDC and UDC plus initiatives.
 - Maintain network approach for providing urgent dental care across Cheshire and Merseyside.
 - Review expanding the referral mechanisms to allow health and social care professionals to refer vulnerable patients with urgent dental needs into the UDC / UDC plus system
 - Review future funding to expand the network for shared care initiatives with patients who have required specialist dental care (e.g., adults with additional needs)

3.15 Primary care performance overview

The following information relates to the provision of primary care dental provision in Halton



Indicator	Halton
Number of practices	13
Contracted UDAs	226,959
UDAs in 2022/23	188,566
Average of 2022/23 achievement pass mark 90%	85%
Average of IMD Decile (1 being most deprived)	2.2
Number of practices in 20% most Deprived	9
Percentage of practices in 20% most deprived areas	69%
Percentage of Children population seen (06/20)	33%
Percentage of Adult population 18-64 seen (06/20)	45%
Percentage of 65years and above population seen (06/20)	46%
Percentage of Children population (06/23)	49%
Percentage of Adult population 18-64 seen (06/23)	51%
Percentage of 65years and above population seen (06/23)	50%

Of all practices in Halton, 69% are situated in a deprived area

Children seen **increased** by 16%
 Adults (under 65) seen **increased** by 6%
 Adults (65 and over) seen **increased** by 4%

3.16 Cheshire and Merseyside Dental Improvement Plan 2024-26

Subject to NHS Cheshire and Merseyside Board approval in March the System Primary Care Committee recently recommended a new ambitious plan.

3.17 Will build upon the current programmes in place and align to the delivery of the national dental recovery plan - Our plan to recover and reform NHS dentistry published on 4 February 2024

3.18 The plan will utilise the dental underspend available to the ICB up to the value of £9.985 million. £4.8 million was previously approved in June 2023 so the total investment available will be around £14.85 million.

3.19 In addition we hope to maintain and create workforce development opportunities within existing practices and wider within health and social care. Maximise the opportunity of flexing contracts to take into account the altered contracting mechanisms outlined in the dental recovery plan and previous contract reforms.

3.20 It should also be noted that an oral health improvement programme has also been agreed as part of the funding identified equating to £600k for the next three years.

3.21 The plan will focus on five key pathways

- **Pathway 1** Access to urgent dental care for those in immediate need of support, such as dental pain, or specific medical/statutory requirement
- **Pathway 2** Urgent Care Plus -- Definitive treatment following urgent care, if required/requested
- **Pathway 3** Routine care for patients who require a check up and any follow up care to make sure they are orally fit
- **Pathway 4** Access for children, with additional preventative/treatment needs
- **Pathway 5** Access for "cared for" frail vulnerable adults

- 3.22 Pathways 1 and 2 are already up and running and will continue. The focus of the commissioning team will be establishing Pathway 3 Routine care for patients who do not have a dentist.
- 3.23 To complement our existing plans we are seeking to develop at least 3 Dental Access and Workforce Development Centres across Cheshire and Merseyside in areas of highest need.
- 3.24 We will use the national contracting flexibilities announced recently and are seeking to find creative solutions. We envisage that the centres will be accessed for new patients with no dentist via existing referral routes and want to avoid the unacceptable vision of long queues of patients trying to access a service.
- 3.25 The centres could offer both undergraduate and post graduate workforce opportunities, but we expect to see a skill mix model in operation. Centres could offer a mix of Pathways 1 to 5.
- 3.26 The centres will offer bookable appointments 7 days a week and this would be via NHS 111 or the local dental advice triage helpline.
- 3.27 The focus for commissioners will be on ensuring our most vulnerable populations are able to access NHS dental services as an integral element of the ICB ambitions regarding population health management.

4.0 **POLICY IMPLICATIONS**

4.1 None

5.0 **FINANCIAL IMPLICATIONS**

5.1 None

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

6.1 **Children & Young People in Halton**

Contributes to the requirement to ensure that in Halton children and young people are safeguarded, healthy and happy, and receive their entitlement of high quality services that are sensitive to need, inclusive and accessible to all.

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

Will assist in creating and maintaining a healthier workforce

6.3 **A Healthy Halton**

By improving access to dental treatment the improvement plan will help to create a healthier community and work to promote well-being, a positive experience of life with good health (not simply an absence of disease), and offer opportunities for people to take responsibility for their health with the necessary support available.

6.4 **A Safer Halton**

None identified.

6.5 **Halton's Urban Renewal**

No implication on Urban Renewal

7.0 **RISK ANALYSIS**

7.1 None

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 In light of the COVID-19 pandemic updated local oral health needs assessments have been completed for the 9 Places across Cheshire and Merseyside and will identify the needs of vulnerable groups. The Dental Improvement Plan will be underpinned by the Cheshire and Merseyside ICB Joint Forward Plan in terms of improving population health and tackling health inequalities.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 No climate change implications identified at this time.

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

None under the meaning of the Act.

REPORT TO:	Health & Wellbeing Board
DATE:	20 th March 2024
REPORTING OFFICER:	Director Adult Social Services
PORTFOLIO:	Adult Social Care
SUBJECT:	Better Care Fund (BCF) – Quarter 2 & 3 Update 2023/24
WARD(S):	Borough-wide

1.0 **PURPOSE OF REPORT**

1.1 To update the Health and Wellbeing Board on the Quarter 2 (Q2) & Quarter 3 (Q3) BCF 2023/24 following their submission to the National BCF Team.

2.0 **RECOMMENDATION: That the Board note the report and associated appendices.**

3.0 **SUPPORTING INFORMATION**

3.1 Following submission of the 2023/25 plan in June 2023, quarterly monitoring has been mandated from Q2 2023/24 onwards. Attached are copies of the Q2 and Q3 reports which have been submitted.

3.2 **Q2 & Q3 Returns: Tab 3 – National Conditions**

There are four national conditions which we have confirmed we are meeting: -

- That we have a jointly agreed plan in place;
- We are implementing the BCF Policy Objective in respect to enabling people to stay well, safe and independent at home for longer;
- We are implementing the BCF Policy Objective in respect to providing the right care in the right place at the right time; and
- We are maintaining the NHS's contribution to Adult Social Care and investment in NHS commissioned out of hospital services.

The Board should note that when Q2 was returned, although the Section 75 has been finalised and agreed at Halton Place, it hadn't formally been signed off at NHS Cheshire & Merseyside Board level. The Section 75 has now been signed off and this fact is reflected within the Q3 return.

3.3 **Q2 & Q3 Returns: Tab 5 – Metrics**

There are five national metrics. We are on track to meet the avoidable admission

and falls targets. We are not on track to meet discharge to usual place of residence with a projected gap of 1%. The remaining 2 metrics are annual data collection and will be reported at Q4.

3.4 Q2 Return (Only): Tab 5.1 – 5.3 Capacity and Demand Plans

There have been minimal changes to the capacity and demand plan since it was submitted in June 2023. Where additional data has subsequently been made available, this has been utilised to review and update the plan. Particular attention has been made to areas where a deficit in capacity had been identified.

3.5 Q3 Return (Only): Tab 5 – Spend and Activity

For Q3 we have had to report on spend and activity linked to those schemes identified within the plan where we had identified anticipated output/deliverables.

Information has been completed outlining incurred expenditure and actual numbers of outputs delivered to the end of the third quarter (1st April 2023 – 31st December 2023).

All expenditure is planned to be spent by the end of the financial year and associated outputs achieved; no areas of concern have been identified.

4.0 POLICY IMPLICATIONS

4.1 None identified at this stage.

5.0 FINANCIAL IMPLICATIONS

5.1 The Better Care Fund sits within the wider pooled budget arrangement and the financial context of the local health and social care environment. The pooling of resources and integrating processes and approach to the management of people with health and social care needs continues to support effective resource utilisation.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

None identified.

6.2 Employment, Learning and Skills in Halton

None identified.

6.3 A Healthy Halton

Developing integration further between Halton Borough Council and the NHS

Cheshire & Merseyside will have a direct impact on improving the health of people living in Halton. The plan that has been developed is linked to the priorities identified for the borough by the Health and Wellbeing Board.

6.4 A Safer Halton

None identified.

6.5 Halton's Urban Renewal

None identified.

7.0 RISK ANALYSIS

7.1 Management of risks associated with service redesign and project implementation are through the governance structures outlined within the Joint Working Agreement.

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.

Question Completion - when all questions have been answered and the validation boxes below have turned green you should send the template to england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. This does not apply to the ASC Discharge Fund tab.

Complete

	Complete:
2. Cover	Yes
3. National Conditions	Yes
4. Metrics	Yes
5. Spend and activity	Yes

[<< Link to the Guidance sheet](#)

^^ Link back to top

Question Completion - when all questions have been answered and the validation boxes below have turned green you should send the template to england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. This does not apply to the ASC Discharge Fund tab.

Complete

	Complete:
2. Cover	Yes
3. National Conditions	Yes
4. Metrics	Yes
5.1 C&D Guidance & Assumptions	Yes
5.2 C&D Hospital Discharge	Yes
5.3 C&D Community	Yes

[<< Link to the Guidance sheet](#)

[^^ Link back to top](#)

REPORT TO:	Health & Wellbeing Board
DATE:	20 March 2024
REPORTING OFFICER:	Executive Director, Adults
PORTFOLIO:	Adult Social Care
SUBJECT:	Halton Safeguarding Adults Board (HSAB) Annual Report
WARD(S):	Borough-wide

1.0 PURPOSE OF REPORT

1.1 To present the Board with the HSAB Annual Report 2022/23.

2.0 RECOMMENDATION: That the Board note the report.

3.0 SUPPORTING INFORMATION

3.1 Under the Care Act 2014, all Safeguarding Adults Boards are required to produce an annual report which summarises all of the key achievements and priorities the Safeguarding Adults Board has been working towards over the last twelve months. The report sets out the national and local developments on safeguarding adults at risk.

3.2 Development of the Annual Report

3.3 All members of Halton Safeguarding Adults Board, which includes representation from the Police, ICB, ambulance service, fire service, probation and third sector organisations, were invited to contribute to the annual report and share the priorities and achievements in safeguarding for their organisation.

3.4 As well as partner updates, the annual report also summarises key pieces of work and events which have occurred over the last 12 months to help keep people safe in the Borough. This includes work undertaken to support asylum seekers and refugees; supporting National Safeguarding Week and hosting a strategic planning event for Board members to agree key priorities for the Safeguarding Board going forward.

3.5 The Annual Report will be published widely and shared with HSAB member organisations.

4.0 POLICY IMPLICATIONS

4.1 None identified

5.0 FINANCIAL IMPLICATIONS

5.1 None identified.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

None identified at this stage.

6.2 Employment, Learning and Skills in Halton

None identified at this stage.

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

None identified at this stage.

6.5 Halton's Urban Renewal

None identified at this stage.

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 safeguard vulnerable adults in our community.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 None identified at this stage.

9.0 CLIMATE CHANGE IMPLICATIONS

9.1 None identified at this stage.

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

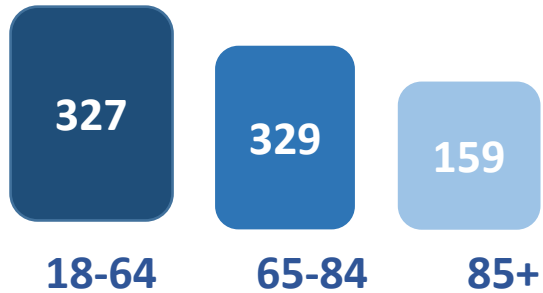
436 became S42 enquiries

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

Main SAB Objective	To assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who meet the safeguarding adult criteria
3 Core Duties	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?

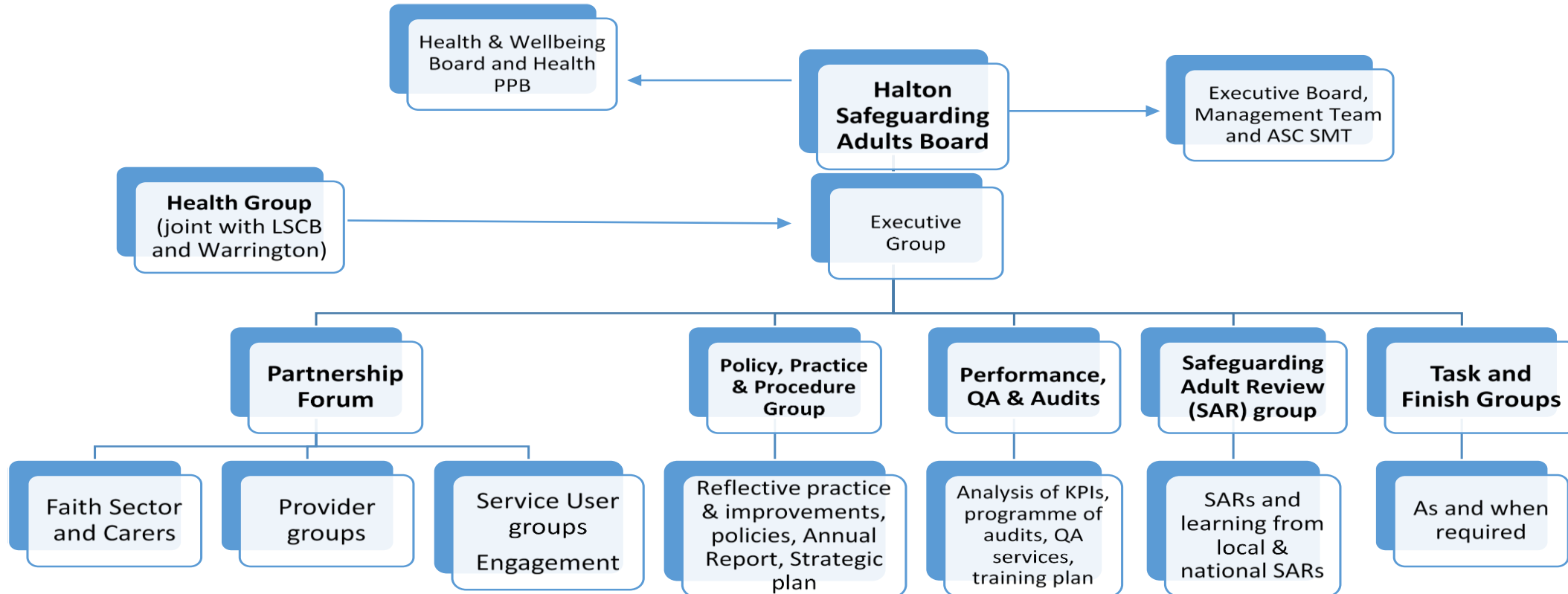
Safeguarding adults means stopping or preventing abuse or neglect of adults with care and support needs.

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

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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

Learning & Professional development



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


- ❖ 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

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


HSAB Achievements 2022/23

Priority	What we said we'd do	What we did
Quality Assurance 	Ensuring internal quality assurance frameworks are in place	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.
	Share identified learning	The Safeguarding Policy, Procedure & Practice Sub Group ensures that any lessons learned or areas of good practice are shared and adopted where possible.
	Review of the safeguarding adults audit processes within Halton	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.
	Sharing of information across HSAB members and provider services	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.


HSAB Achievements 2022/23

Priority	What we said we'd do	What we did
Co Production & Engagement	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.
	Consistency and standardisation of safeguarding practice across Halton	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
	All agencies to promote a Making Safeguarding Personal approach	Making Safeguarding Personal is at the centre of all safeguarding practice in Halton, with a survey completed at the end of each S42 enquiry.

HSAB Achievements 2022/23

Priority	What we said we'd do	What we did
Co Production & Engagement	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 & 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 & 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>Learning & Professional Development</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 & Engagement Strategy.</p>

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 1st 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

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

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**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

ADULTS

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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

HALTON

SAFEGUARDING

ADULTS

BOARD

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

HALTON

SAFEGUARDING

ADULTS

BOARD

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

HALTON

SAFEGUARDING

ADULTS

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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

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 25-29th 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 15th 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

HALTON

SAFEGUARDING

ADULTS

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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

SAFEGUARDING

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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

HALTON

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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

HALTON

SAFEGUARDING

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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

SAFEGUARDING

ADULTS

BOARD

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

ADULTS

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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

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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 1st 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 21st – 27th 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:

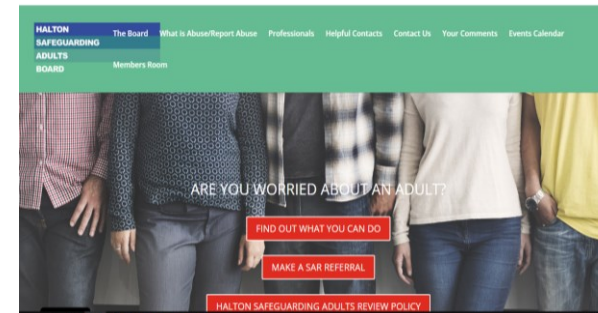
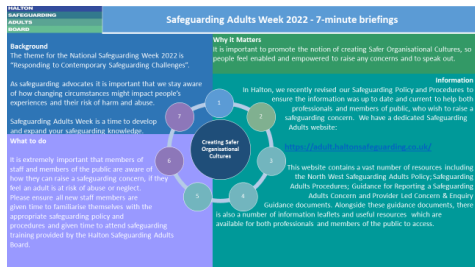
The aim of the campaign this year was *“Responding to Contemporary Safeguarding Challenges”*. Each day during National Safeguarding Week focuses on a key theme, the daily themes for this year were as follows



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

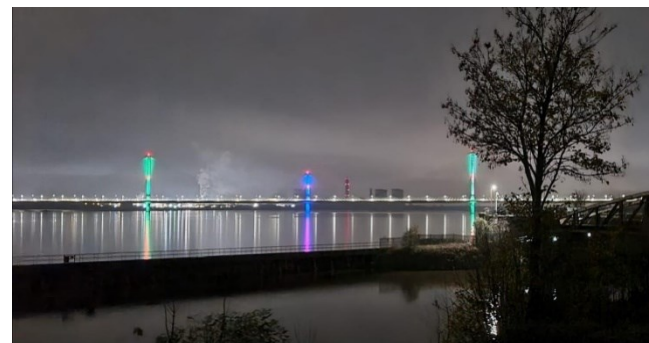
A 7 minute briefing for each daily theme cascaded to all HSAB partners to distribute Within their own organisations



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



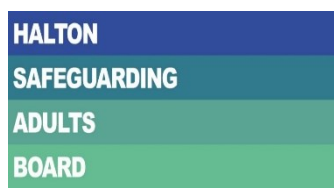
Mersey Gateway Bridge lit up in HSAB colours to mark the start of National Safeguarding Week

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 29th June 2022 and the second event was held at Runcorn Shopping City on 7th 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

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

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

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?

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?

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?

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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

REPORT TO:	Health & Wellbeing Board
DATE:	20 March 2024
REPORTING OFFICER:	Executive Director, Adult Social Care
PORTFOLIO:	Adult Social Care (ASC)
SUBJECT:	Adult Social Care Annual Report 2022-2023
WARD(S)	Borough Wide

1.0 **PURPOSE OF THE REPORT**

1.1 To provide the Health and Wellbeing Board with the ASC Annual report for 2022-2023.

2.0 **RECOMMENDATION: That the Board note the contents of the report**

3.0 **SUPPORTING INFORMATION**

3.1 Attached to this report is the ASC Annual Report for 2022-2023, also known as 'the local account'.

3.2 As agreed by Adults SMT in Spring 2023, the theme of this year's report is 'making a difference'. As well as context as to what the local provision of ASC looks like and the direction of ASC during the report period, the report also looks at how ASC has made a difference to people through the services we deliver, through our workforce and through innovative thinking.

3.3 The report looks at some examples of where services, staff and innovation have positively impacted on people who use our services. Sections contain feedback from people and staff as to how this has made a difference.

3.4 The report also contains high level data on service usage, spend, customer care and safeguarding.

3.5 In previous years the report has been published around springtime of the year following the report period. This year a decision was made to bring publication forward to autumn.

3.6 This is available on the HBC ASC website.

4.0 **POLICY IMPLICATIONS**

4.1 The Annual Report serves as a review mechanism for Adult Social Care to consider as part of ongoing continuous service improvement measures.

4.2 Whilst the report is not mandatory it is good practice, as endorsed by ADASS, and supports communication, information sharing and transparency between adult social care, the people who use our services and our stakeholders.

5.0 **FINANCIAL IMPLICATIONS**

5.1 The Annual Report is published online, incurring no print costs.

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

6.1 **Children & Young People in Halton**

None identified at this stage.

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

None identified at this stage.

6.3 **A Healthy Halton**

The report highlights the work of the Division.

6.4 **A Safer Halton**

None identified at this stage.

6.5 **Halton's Urban Renewal**

None identified at this stage.

7.0 **RISK ANALYSIS**

7.1 As the report will be a publicly available document this may prompt challenge, comment or enquiry from the community and stakeholders.

7.2 As part of the publication process, once it has been presented to Health PPB and Health and Wellbeing Board, Service Development will inform HBC Communications team to let them know that the document is available in advance of public publication.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 None.

9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 None.

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

None under the meaning of the Act.



Adult Social Care Annual Report 2022-2023



Foreword

The UK Government's 2021 People at the Heart of Care white paper identified innovation as key to delivering 'outstanding quality' in adult social care in England. Whilst Adult Social Care in Halton has long prided itself on working in new and exciting ways to achieve better outcomes for people with care and support needs, during 2022-2023 there were a number of key innovations in the way in which we deliver services: from how we develop our work force to investment in new ways of working - all of which contribute to making a difference to the lives of the people who use adult social care services in Halton.

Actively working with partner agencies, Adult Social Care is achieving outcomes that people themselves have determined will make a difference to their lives. This Adult Social Care Annual Report focuses on *how* adult social care in Halton is making a difference, illustrating just some of the type of work that adult social care undertakes, and *what difference it makes to peoples' lives*.

Thank you to all the partners who have contributed to and supported the work of adult social care in Halton throughout 2022-2023.

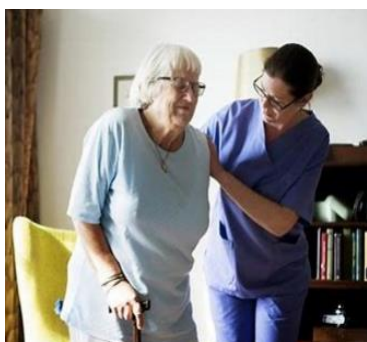
I hope that you find this Adult Social Care Annual Report informative and that it gives you just a flavour of the breadth of work that is going on in Halton.

Councillor Joan Lowe

Portfolio Holder for Adult Social Care

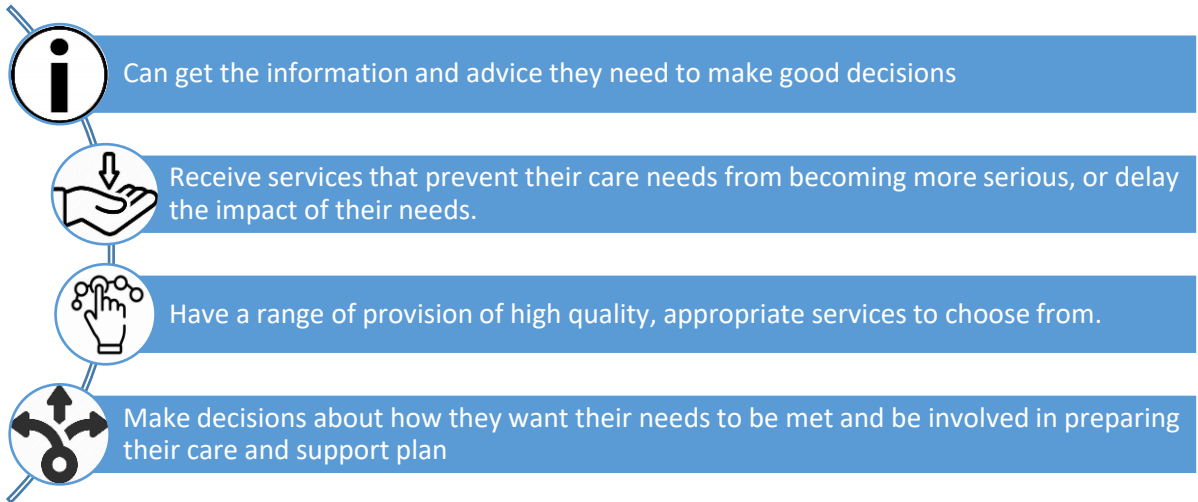
1.0 Adult social care – making a difference to people in Halton.

- 1.1 Adult social care in Halton offers practical support to enable people to live independently and achieve the outcomes they want to be able to live a good life.
- 1.2 A 'good life' looks different for every person – an active social life, involvement in their community, maintaining relationships with friends and family, living a healthy lifestyle, improving wellbeing, living independently. The knowledge and expertise that Halton's adult social care workers have is used to help people to achieve *their* good life.
- 1.3 Adult social care continues to make a difference to people at a time when the sector is under intense pressure. National trends in relation to funding pressures, increasing demand and more complex needs, impacted further by the legacy of the COVID-19 pandemic, are largely reflected locally.
- 1.4 Halton's Adult Social Care directorate is constantly looking to mitigate the impact of these demands to continue to make a positive difference to people's lives. This report gives examples of how we went about this in the period 2022-2023 by:
- ✓ Making a difference through our **services**
 - ✓ Making a difference through our **workforce**
 - ✓ Making a difference through **innovation**.
- 1.5 The areas highlighted in this report represent just a small amount of the variety of work undertaken by the directorate. For more information on the areas covered in this report or on the work adult social care more generally please contact ASCServiceDevelopment@Halton.gov.uk.




2.0 What does social care in Halton look like?

2.1 Halton’s Adults Directorate is responsible for assessing the needs of adults with care and support needs in-line with the Local Authority duties of the [Care Act 2014](#). Under the Care Act, local authorities have responsibility to make sure that people who live in their areas:



2.2 Adult social care in Halton is made up of several services offering a wide range of interventions to make a positive difference to people’s lives. Working closely with partners such as health, education, housing providers and voluntary and community organisations people are connected to information and help within their neighbourhoods. A summary of the council’s key adult social care services is shown below.

<p>Care Management </p> <p>Registered Social Workers, Occupational Therapists, and other care staff work with individuals and families to help people maintain a good quality of life. Through connecting people to support in their communities or arranging appropriate social care support because of frailty, illness, disability or mental health condition, people’s needs can be met in a holistic way.</p>	<p>Mental Health </p> <p>Services offer prevention, identification of mental ill health, early intervention, and access to support, treatments and recovery. Working closely with local partners such as health, education and employers, our mental health teams look to improve the determinants of poor mental health, creating a place-based approach to improving mental wellbeing.</p>	<p>In House Care Homes </p> <p>The Council has a portfolio of four residential care/nursing homes and a community support centre. In our care homes people with a disability, health condition or long-term support need because of frailty, receive 24-hour care and support.</p>
<p>Halton Intermediate Care and Frailty Service (HICaFS) </p> <p>Integrated with health, this service supports the hospital discharge process and reablement of patients after a hospital stay. It also supports people through social care, occupational therapy, and nursing where they can be cared for at home, avoiding unnecessary hospital admission or re-admission.</p>	<p>Independent Living Services (ILS) </p> <p>ILS Services helps people maintain their dignity and independence to remain living in their own home. The Housing Solutions Service helps people who are homeless or threatened with homelessness under the Council’s statutory duties. The Halton Integrated Safeguarding Unit works with services, providers, and the public to ensure that people are safeguarded against abuse.</p>	<p>Community Services </p> <p>This service area aims to help people live a fulfilling life, retain their independence, learn new skills, and avoid social isolation through undertaking meaningful activities that they choose. The service offers a wide range of opportunities for people with health conditions, learning or physical disability to engage in voluntary work, training, and social activities.</p>

3.0 The direction of adult social care during 2022-2023

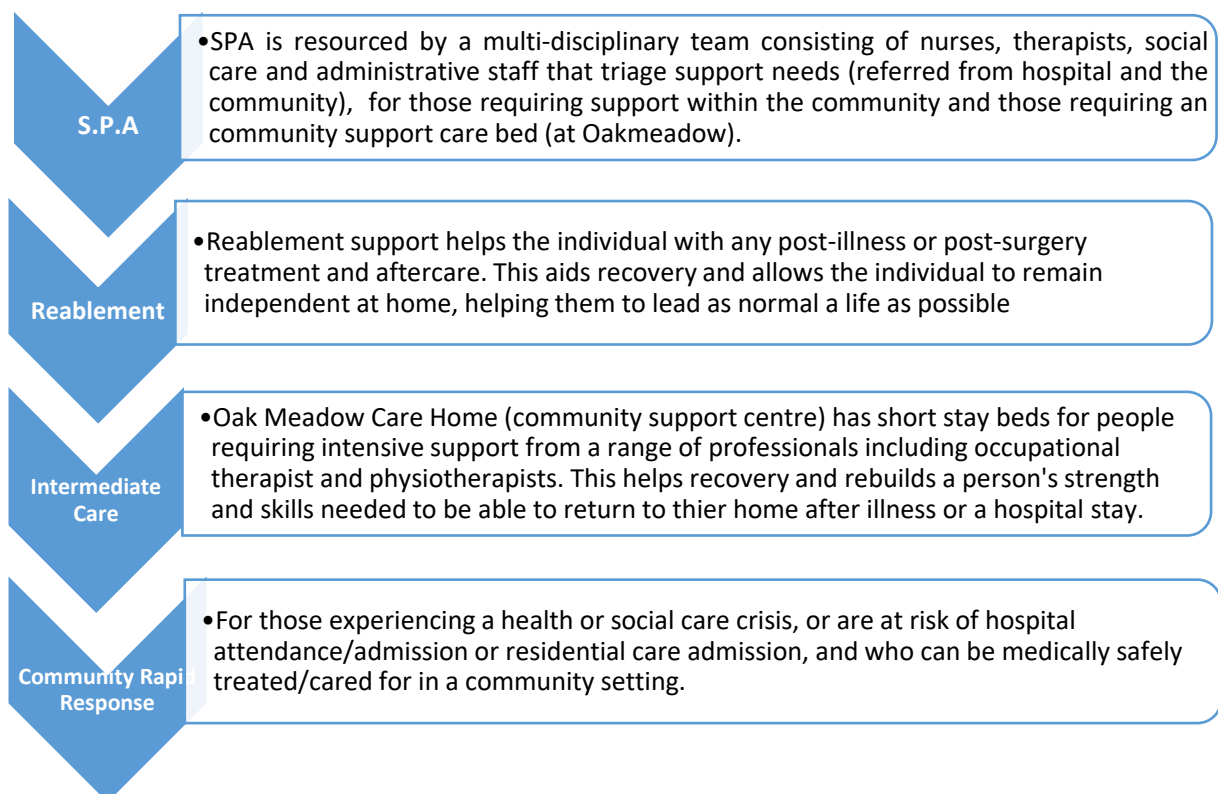
3.1 Adult social care in Halton is driven not only by national policy, but also a local health and wellbeing agenda. The Halton Borough Council Health Policy and Performance Board priorities for 2022/23 are shown below with a summary of progress achieved during that time frame.

Priority	Progress made during 2022-2023
Funding	<ul style="list-style-type: none"> ✓ Reforms in the Government White Paper: People at the Heart of Care were put on hold, along with associated funding. However, proposed changes to Government policy in relation to the lifetime 'Care Cap', were closely examined in Halton prior to the 2 year delay announcement. A group was established to look at the implications of these legislative amendments and, specifically, the associated costs to the Council. The work of this group provides a foundation for any further move towards a cap on care. ✓ Whilst the adult social care budget was stretched, it was used effectively in our proactive approach to prevention and delay of care needs through minor adaptations, social prescribing effective reablement and commissioning appropriate in-borough provision. ✓ Our Quality Assurance team have conducted benchmarking of hourly rates across the sector and continue to advocate a living wage rate.
Managing demand for services	<ul style="list-style-type: none"> ✓ The demand for adult social care services was ever-increasing and Halton adult social care responded through the Transforming Domiciliary Care Programme, adopting a 'home first' approach to hospital discharge and investing in a significant increase of domiciliary care hours.
Workforce	<ul style="list-style-type: none"> ✓ Provision for workforce development, progression and career recognition, where there is a strong emphasis on staff ability, motivation and opportunity is a priority in Halton. This has been evidenced in our professional progression policies for social work, occupational therapy and care home nursing preceptorship, supervision and caseload management policies and adult social care induction framework.
Quality	<ul style="list-style-type: none"> ✓ The Council's adult social care Quality Assurance and Contracts team have been working closely with providers of services to ensure that expected standards are met through the implementation of quality improvement actions plans. ✓ The intention is to move more towards provider self-assessment of quality and a greater level of trust to identify emerging issues. This has been partially implemented through the Provider-Led Concerns and Enquiries model led by the Integrated Adult Safeguarding Unit. ✓ HBC itself will be subject to Care Quality Commission inspection from 2023. In readiness for this work has been undertaken to prepare including developing a performance dashboard, incorporating all the current measures captured across services.

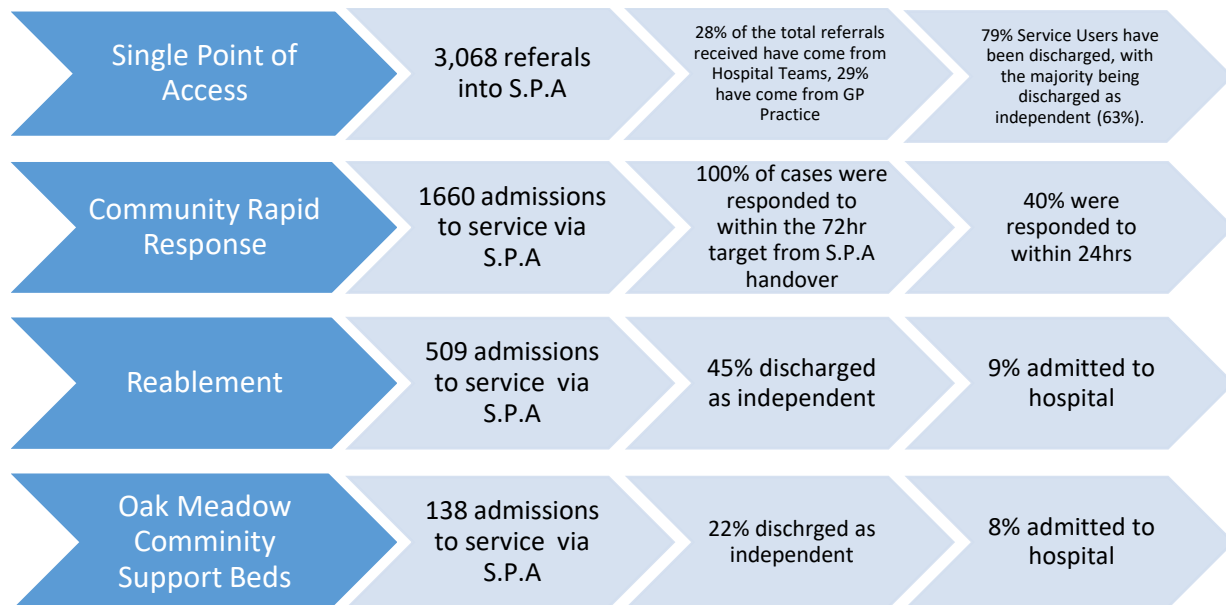
4.0 Making a difference to people through our services

Capacity and Demand

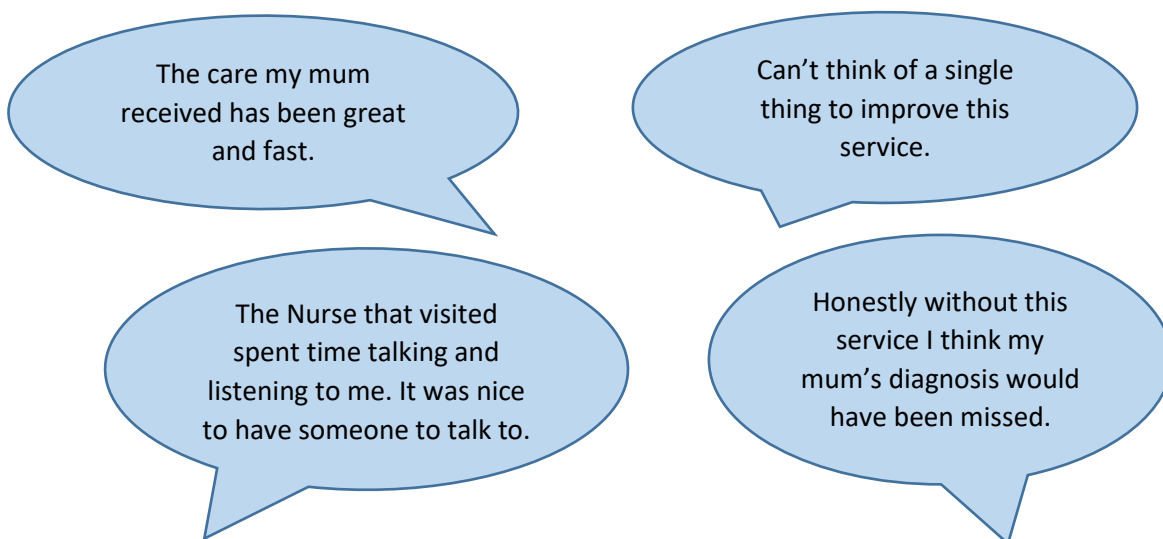
- 4.1 Responding to capacity in Halton across hospitals, therapies and care homes was a priority during 2022-2023. The launch of the [Halton Integrated Care and Frailty Service](#) (HICaFS) in December 2021 replaced the services previously provided separately in Halton by the Rapid Access Rehabilitation Service, the Capacity & Demand Team and the Halton Integrated Frailty Service.
- 4.2 By bringing together the functions of each of the services and developing a new single point of access (SPA), HICaFS manages capacity across both health and social care through seamless, safe management of referrals for people requiring Adult Community Services, potentially preventing hospital admission, supporting early discharge from hospital, promoting independence, and coordinating care closer to home for those needing rehabilitation after a hospital stay or illness.
- 4.3 HICaFS is made up of the 4 service elements, shown below:



- 4.4 During the first full 12 months of the service's operations the service has been able to help people receive the care and support they need to remain independent in the community, and in most cases, avoid a hospital admission.



Examples of feedback from people who have used the service...



In House Care Homes Clinical Development

4.5 Halton Borough Council has a [portfolio of owned and operated care homes](#):

- 1 residential care home
- 1 community support centre
- 3 nursing homes with specialist nursing care and for people living with dementia.

4.6 In early 2023 a seconded post was introduced to the HBC Care Homes Division for a Clinical Lead Nurse, undertaking 4 core functions across the HBC Care Homes:

1. Providing expert practice support
2. Providing professional leadership and consultancy.

3. Identifying and undertaking education, training, and development of staff.
 4. Involvement in research, evaluation, audit, and service development.
- 4.7 The role actively promotes personalised care and provides accessible and timely advice to the care home nurses, supporting their professional practice and development within their role, resulting in improved resident experience. The Lead Nurse is visible within the homes and is an additional channel to obtain views and any concerns of residents, respond to any emerging issues quickly.

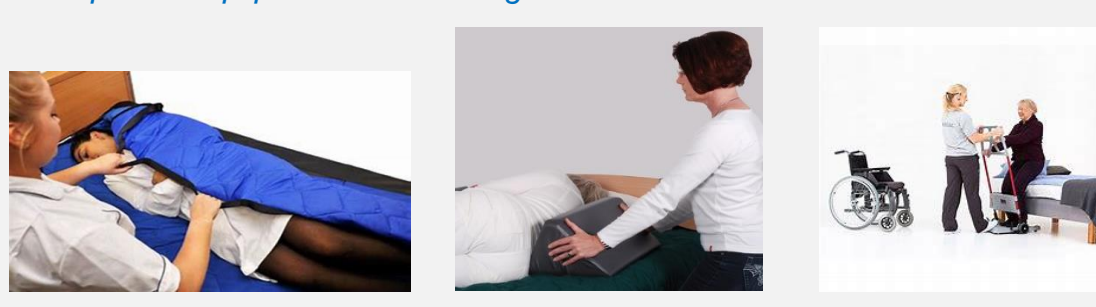
The difference this has made...

- ✓ Improved clinical effectiveness, through access to training and mentoring, of our nursing team leading to better resident experience of nursing care.

Occupational Therapy Single-Handed Care

- 4.8 Traditionally, care requiring the use of moving and handling equipment would involve the use of two carers. Single handed care involves the use of equipment and techniques to reduce the number of carers needed to safely care for people who need assistance to transfer, from chair to bed for example. This can aid capacity within teams.
- 4.9 Adult social care has invested in equipment and training to adopt this approach and single-handed care in Halton is now well embedded into practice. It is part of the assessment process, considered in the way we commission care and runs right through to how care rotas are developed. Our investment in single handed care is a means to providing services which promote dignity and independence.

Examples of equipment used in single handed care:



- 4.10 Developing and using this approach has enabled social care to have greater flexibility in the provision of care and greater responsiveness, for example in supporting quicker hospital discharge.

The difference this has made...

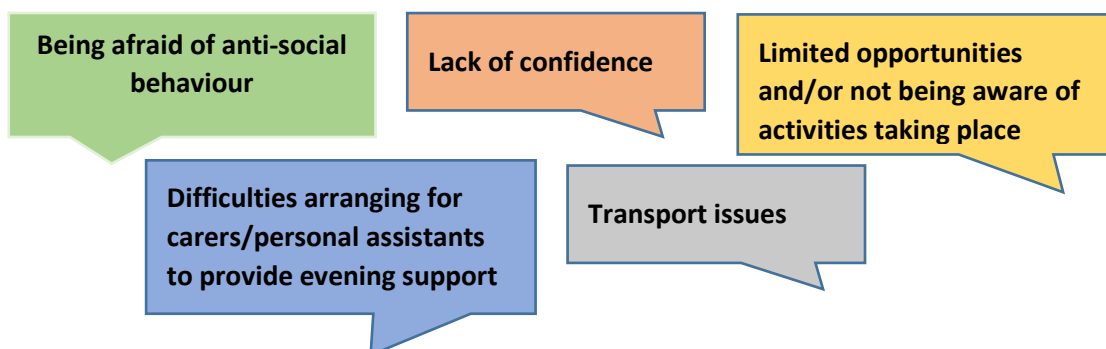
- ✓ Potentially a safer system of working
- ✓ Enhances people's choice and control
- ✓ Greater dignity and privacy
- ✓ Less handling and increased comfort
- ✓ People able to stay at home for longer

Stay up late

4.11 In support of the national 'Stay up Late' campaign, adult social care in Halton believes that all people with learning disabilities, and autistic people, should be able to lead full and active social lives – including a social life in the evening if they so wish. Working with partners such as care providers, people who use services and carers, inflexible support that prevented people with learning disabilities or autism from staying up late was challenged. Working together we explored the following to better understand the needs of people:

- what night-time activities take place in Halton
- timings of available activities
- why people feel they can't, or don't want to, 'stay up late'
- what benefits and risks there are to people 'staying up late'

4.12 Working with people who use services, adult social care was able to find out what the issues were and how they could be overcome to stay up late if people wish to do so. Some of the reasons that people quoted for not wanting to go out in the evening were:



4.13 Individual choice is key. It was clear from speaking to people that not everyone wants to stay out late and recommendations for action reflected this freedom of choice. Some of the work to improve the choices around staying up late has already been undertaken, some is ongoing and some will happen in the future, and includes:

- A local publicity campaign around stay up late.
- An event for adults with learning disabilities to promote engaging in social activities (including staying up late).

- Events that ceased during the pandemic should be encouraged to re-start again.
- Establish a service user group to ensure that sustained progress is made in relation to enabling adults with learning disabilities to live the life they want.
- Providers to continue exploring the benefits of shared transport.
- Further explore how to help adults with learning disabilities to feel safe when going out, particularly at night.
- Explore the use of technology.
- Explore the use of funding and its flexibility to support innovate support to stay up late.

The difference this has made...

- ✓ Adults with learning disabilities feel heard, having the opportunity to talk about their fears and their wishes and contribute to service development.
- ✓ Adults with learning disabilities will have the same opportunities as everyone else to live a full and active social life, if they wish.
- ✓ Services in the future will be designed to support them to live the life they want to live, removing barriers and improving choice and control.

5.0 Making a difference through our workforce

- 5.1 Acknowledgement has been made on a national level that the adult social care workforce makes a substantial contribution to how our communities function and how individuals with care and support needs are enabled to access social care, leisure, education, employment, housing, meaningful occupation etc.

Workforce Planning

- 5.2 During 2022/23, the adult social care implemented a programme of workforce planning, ensuring that adult social care careers are seen as rewarding, with opportunities to develop and progress, and access a fair living wage. To achieve this, work got under way to look at effective recruitment, attracting new workers into the sector and increasing diverse representation; defining career pathways with opportunity to undertake associated qualifications; continued personal and professional development; and recognition of individual achievements.
- 5.3 Our in-house care home services offered 'test bed' sites for taking forward innovation around workforce approaches and the Cheshire and Merseyside Local Workforce Action Board (CMLWAB) funded work looking at 'Enhancing Quality in the Care Home Sector'. Nursing Care has a critical role to play in this. The project work implemented a 'grow our own' approach.

The difference this has made...

- ✓ Establishing new Nurse Associate and Assistant Practitioner roles, both of which and offer accompanying learning towards formal qualifications and act as a steppingstone to further progression.
- ✓ Close working with a local further education college (Riverside College) to promote recruitment into the wider social care workforce in Halton amidst a difficult national social care recruitment backdrop.

Developing HBC Care Home Nurses

- 5.4 With the introduction of the Care Home Clinical Lead post supporting the continuous the clinical quality process, focus was also given to developing progression pathways and specific inductions for our care home nurses to make Halton's care homes an attractive place to work.
- 5.5 Developing the induction and a 12-month programme of specific support for new nurses to help them translate their knowledge into everyday practice (Preceptorship) aims to support recruitment and retention as it is rolled out. The policies and supporting tools support care home managers and nurses, along with a progression pathway for employees who wish to progress, as part of the council's commitment to recognising and supporting this valuable workforce.

The difference this has made...

It is anticipated that the work underway will:

- ✓ Support our staff with recognition, retention and progression adding value to care home nursing roles.
- ✓ Provide care home nurses with a clear progression pathway that supports workforce development outcomes.
- ✓ Encourage new, innovative roles to enhance care delivery and resident experience.

Adult Social Care Training and Social Work Professional Development

- 5.6 During 2022 a new post was established to give particular focus to adult social care training and social work professional development. As a result of this new post the following has been achieved during 2022/23:



Development of a structured Assessed and Supported Year in Employment (ASYE), a 12-month, employer led and employment-based programme of support and assessment for newly qualified social workers. Nine newly qualified social workers are on the programme and 2 more due to start.



Coordinating and oversight of student social worker placements. Since March 2022 seven students have been recruited from placements.



Three experienced Halton Community Care Workers were recruited onto the Council's Social Worker Apprenticeships Programme. Three further Community Care Worker have been selected to put forward for the training in 2024.



In order to support the apprentices, the student social workers and the new qualified social worker, coordinated monthly support sessions across the year have been introduced. These sessions focus on a relevant subject identified through meeting with team managers and ASYE assessors and utilising their knowledge and skills to each facilitate a session.



Working with Cheshire and Merseyside Social Work Partnership and University of Central Lancashire, Halton is maximising the opportunities for experienced social workers to train as Practice.

Educators, increasing the council's capacity to supervise, teach and assess social work students on practice learning placements.

The difference this has made...

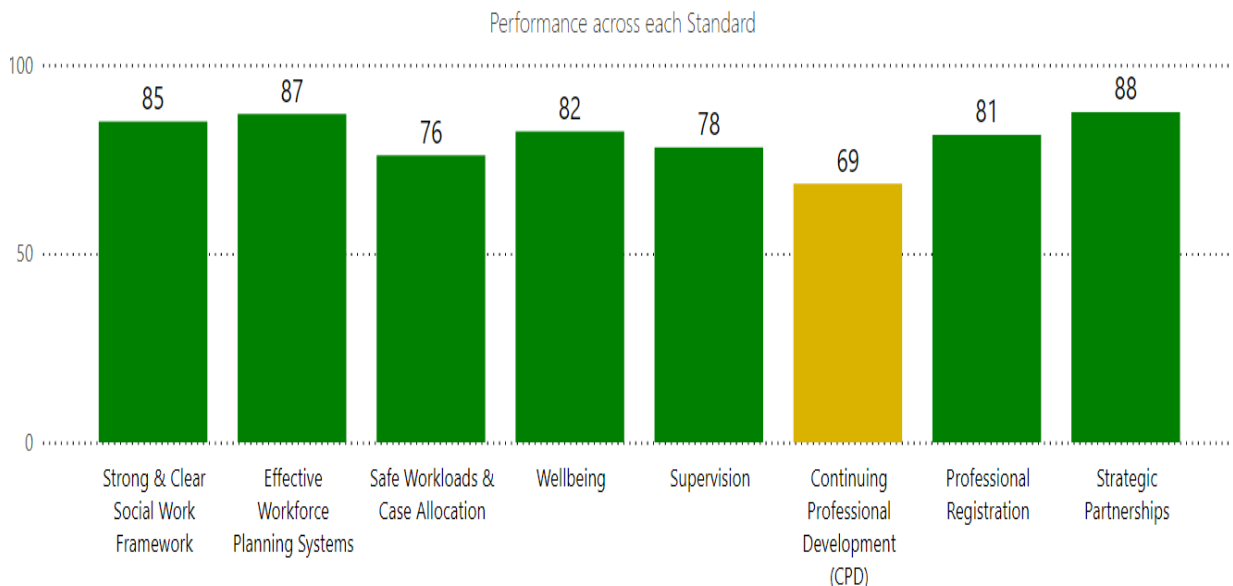
- ✓ Investment in workforce development improves recruitment, retention and job satisfaction, making careers in social work and social care more attractive.
- ✓ Links with education establishments, regional and national social work/care partners provides opportunity to promote Halton has a desirable location to start and continue careers in social work and social care.

Social Care Health Check

- 5.7 Every year a 'Social Work Health Check' is undertaken nationally by the Local Government Association. It aims to assess how areas are performing against the [Standards for Employers of Social Workers](#).
- 5.8 Halton participates in this annual survey as just one of the ways to help keep a check on how supported the workforce feel and it can help identify how to further support workforce, which in turn helps the provision of quality social care in Halton and improve recruitment and retention.
- 5.9 For this annual survey there was a response rate of 33% overall (41% for mental health social workers and 32% for adults' social workers).

5.10 The chart below shows that respondents scored 7 out of the 8 domains positively (shown in %), indicating satisfaction in those areas. This provides Managers with a baseline to monitor staff support and take action in the area identified.

5.11 Survey Results across the standards



6.0 Making a difference through innovation

Care Management

6.1 Adult social care in Halton gives staff the freedom to work freely with people to find solutions that enable *that* person to live *their* good life, often trying new and unique approaches. Here, a social worker gives an example as to how this works in practice, and the benefits it brings to the people they work with.

“ *I was working with a young adult who has Autism. They were motivated to have a social life and explore the world of work. However, initial support that we had explored together, such as travel training, had not been successful due to the person feeling very anxious when in public places and requiring emotional support and reassurance. The person felt that they were losing their independence.*

Through getting to know the person, understanding their barriers to independence and what they felt could help them, a Direct Payment was agreed to get them a support dog. This required research to understand how this could work for the person and the benefits it could bring. Whilst not an ‘everyday solution’, it was a perfect solution for this person. The benefits of having a support animal are well documented, and for adults with autism, service dogs can be a vital bridge to independent living. Having the dog in place gave the

person the confidence to take up work experience placement - help them gain the independence they desired and opportunity to learn skills for their future. ””

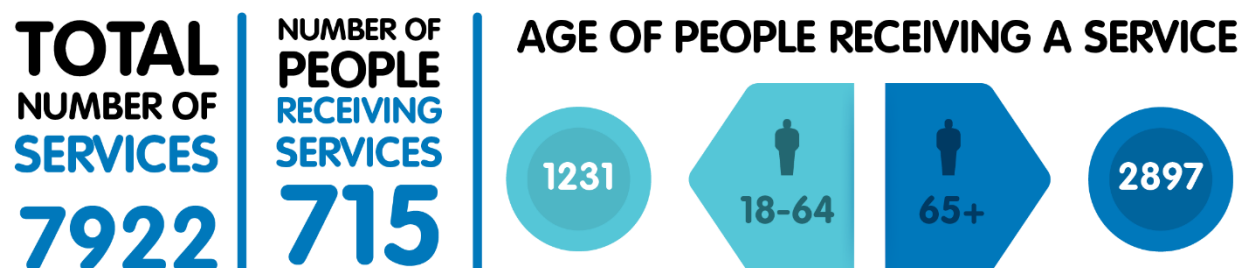
7.0 Key figures

7.1 Collecting and analysing data helps adult social care services in Halton to monitor capacity, pick up on changes in demand for services, provides evidence to direct future service developments and helps allocate resources across the range of interventions we offer. The figures below illustrate the demand for adult social care and across which services. It also includes data from our Adult Social Care Customer Care function that helps us to act where experiences have fallen short of a person’s expectations.

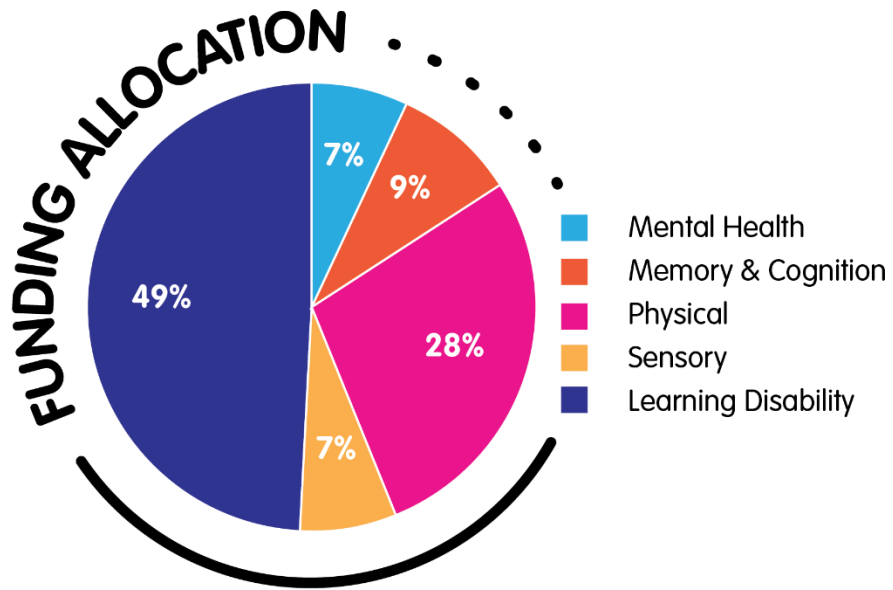
7.2 Assessment of needs



7.3 Services in place



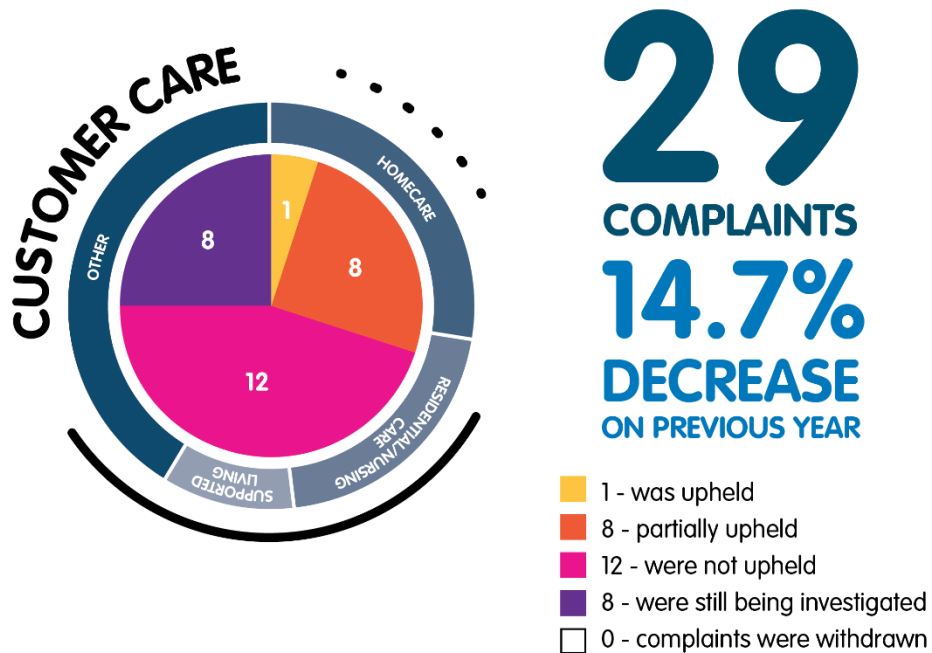
7.4 Percentage of funding allocation by support need



7.5 Safeguarding

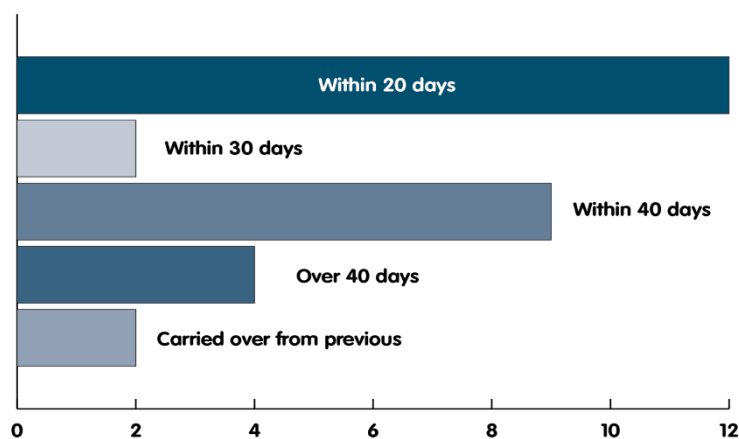


7.6 Adult Social Care Customer Care



Complaints Completion

All complaints are allocated to appropriate team managers by the council’s Adult Social Care Customer Care Team. The council is obliged to provide a response within the 20 days, however, where complaints are complex and require further in-depth investigation, the complainant is notified if an extended period is needed. The table below shows complaints response times.



7.7 Freedom of Information (FOIs) requests made to Adult Social Care

The number of FOIs received relating to adult social care



The table below shows the teams to which the FIO relates to:

Team	2022-23
Care Management	36
Commissioning	18
Independent Living	3
Intermediate & Urgent Care	2
Housing Solutions	34
Mental Health (exc. Housing Solutions)	0
Policy, Performance & Customer Care	0
Finance	3
Quality Assurance Team	0
Complex needs	0
Telehealth	0
Safeguarding	5
PBSS	0
Community	0
Cross cutting	26
Total	127

The table below shows where the request for information came from:

Requester	2022-2023
Business	32
Charity	3
Media	14
Public	69
Trade Union	0
Other inc MP, NHS and student.	9
Total	127

8.0 Talk to us

If you would like further information about any aspect of this report

Please contact ssdcustomer@halton.gov.uk or telephone Halton Borough Council's contact centre on 0303 333 4300 and ask for Adult Social Care Policy, Performance and Customer Care Team.

If you would like to speak to someone about having an assessment for social care

Please ring our dedicated Social Care telephone line or call into one of our [Halton Direct Link 'one-stop shops'](#) and speak directly to one of our staff. Website: www.halton.gov.uk / Telephone: 0151 907 8306 (Halton Adult Social Care 24 hours).

Ever considered a career in care?

There are many diverse and rewarding roles and professions in the care sector. If you would like to know more visit the ['Think Care Careers'](#) website or see Halton Borough Council's [vacancy page](#) on our website for our current opportunities.
