

## HEALTHY HALTON POLICY AND PERFORMANCE BOARD

*At a meeting of the Healthy Halton Policy and Performance Board on Tuesday, 11 September 2007 in the Civic Suite, Town Hall, Runcorn*

Present: Councillors E. Cargill (Chairman), Loftus (Vice-Chairman), Gilligan, Higginson, Horabin, C Inch, Lloyd Jones, J. Lowe, Marlow and Wallace

Apologies for Absence: Councillor Swift

Absence declared on Council business:

Officers present: M. Loughna, A. Villiers, C. Halpin, M. Chaplin, M Mahmood, L Gladwyn, D. Johnson and P. McWade

Also in attendance: Councillor Gerrard, J. Bennett, C. Beardshaw and J. Wilson and two members of the public.

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

	<i>Action</i>
HEA13 MINUTES	
The Minutes of the meetings held on 12 June 2007 having been printed and circulated were signed as a correct record.	
HEA14 PUBLIC QUESTION TIME	
It was confirmed that no public questions had been received.	
HEA15 EXECUTIVE BOARD MINUTES	
The Board considered the Minutes of the meetings of the Executive Board Sub Committee relevant to the Healthy Halton Policy and Performance Board.	
RESOLVED: That the minutes be noted.	
(NB: Councillor Lloyd Jones declared a personal interest in the following item of business due to her husband being a Primary Care Trust Non Executive Director).	

## HEA16 UPDATE ON THE RECONFIGURATION OF THE NORTH CHESHIRE HOSPITAL NHS TRUST

The Board received a presentation from Catherine Beardshaw which updated the Board on the reconfiguration of the North Cheshire Hospital NHS Trust. The presentation outlined the changes and improvements made:

- under the 'better care, sustainable services';
- to emergency medical care;
- to planned surgery;
- to the minor injuries unit; and
- to diagnostic services.

The presentation also outlined;

- developments at Halton;
- developments at Warrington;
- the impact on staff; and
- the future.

The Board raised a number of issues and received responses as detailed below;

- if Foundation Trust status was achieved how the membership would be decided, in particular whether it would be per head of the population as this would mean that membership would be weighted in Warrington's favour. In response it was noted that meetings were taking place between Officers of the Trust and the Electoral Commission to decide on the best way to constitute the Membership, once this was decided the process would be shared with stakeholders;
- what happened to funding for the Endoscopy development that was detailed as part of the consultation. In response it was noted that the Trust had failed to gain this investment, but that capital funding would be used to pump prime what was needed to secure the development;
- the lack of wheel chair access on the bus service between the hospital sites. In response it was noted that this had been identified as an issue which would be resolved in the near future, as tenders were currently out for a new bus. In the meantime patients had been given alternative transport and this had been widely publicised;

- what processes were in place to reduce MRSA cases and risks. In response it was noted that a traffic light system for prescribing antibiotics had been put into place, along with a rapid response cleansing team and a report was being submitted to the Trust's Board suggesting a Cohort Ward be established to provide better care for patients, which would also reduce the risk of contamination to other patients. In addition screening of patients at high risk of MRSA was being undertaken.
- the impact of the reconfiguration on staff and the number of redundancies. In response it was noted that a number of vacant posts were being held and the majority of staff at risk had been redeployed. However, for a small group of staff this had not been possible and these staff would be made redundant. Staff morale had been low due to there being two restructures within a short space of time and this was attributed to poor planning of business structures. It was felt that this was being resolved as contingency plans were being put in place should further changes be needed and all staff would be clear about future staffing options.

RESOLVED: That the presentation be received.

(NB: Councillor Lloyd Jones declared a personal interest in the following item of business due to her husband being a Primary Care Trust Non Executive Director).

#### HEA17 IMPROVING HEALTHCARE ACCESS IN HALTON CONSULTATION ON: A HEALTHCARE CAMPUS MODEL

The Board received a presentation from John Bennett from Halton PCT, on the process for the consultation on improving access in Halton: a healthcare campus model. The presentation outlined:

- the background to the process and the changes happening at Halton Hospital;
- the implications and what this meant for residents of Halton;
- the drivers for change;
- the strategic vision and mission project;
- the five stages and what each one would involve; and
- primary care access and what it could mean for the residents of Runcorn and Widnes.

The Board raised a number of issues and received

responses as detailed below;

- concerns that this would be seen as a winding down towards closing the hospital or that the hospital wouldn't be classified as a hospital anymore. In response it was noted that the proposal being put forward was to look at the process of working towards opening out the prospects of the hospital to ensure its future and that the vision for the future would be linked to local health needs;
- whether the ownership of the hospital site would be an issue. However, the presentation on the update on the reconfiguration of the North Cheshire NHS Trust had given a positive outlook on the future of Halton hospital. Furthermore it was noted that by being involved in the process from the start would enable the Members to mitigate such issues.
- that a wider consultation process should take place with all Members of the Council. It was suggested that a seminar could be held for all Members in October and the outcome would be reported to the next meeting of the Board in the future.

RESOLVED: That

- (1) the presentation be received; and
- (2) support the process outlined in the presentation and this be reported to the Council's Executive Board for consideration and explore ways of engaging the Council and engaging with Elected Members;
- (3) Additional information be presented to future Boards in a variety of forms; and
- (4) If appropriate consider the possibilities of organising an Elected Members Seminar.

#### HEA18 MULTI AGENCY TRANSITION STRATEGY FOR YOUNG PEOPLE WITH COMPLEX NEEDS

The Board received a report on proposed consultation on the draft Multi Agency Transition Strategy for Young People with Complex Needs.

The report gave details of the 'Growing Up Matters –

Better Transition Planning for Young People with Complex Needs paper which outlined the experience of young people with complex needs and their families as they moved from Children's to Adults services and the six pre-requisites for successful transition. This resulted to the Chief Inspector of CSCI writing to all Directors of Adults and Children's services strongly recommending an urgent review of local arrangements and outcomes. In addition the current situation within Halton was detailed within the report.

RESOLVED: That the consultation phase of the Strategy be endorsed.

#### HEA19 ADULT PROTECTION IN HALTON

The Board received a report which sought approval of the draft topic brief on Adult Protection in Halton.

RESOLVED: That

- (1) the Board agreed the draft topic brief; and
- (2) the following Members be appointed to the scrutiny working group:

Councillors Wallace, Loftus and Higginson

#### HEA20 STANDING ORDER 51

The Board was reminded that Standing Order 51 of the Council's Constitution stated that meetings should not continue beyond 9.00 pm.

RESOLVED: That Standing Order 51 be waived for ten minutes.

#### HEA21 BEST VALUE REVIEW OF HEALTH IMPROVEMENT & AUDIT COMMISSION'S PERFORMANCE SUMMARY REPORT 2006

The Board was updated on the progress in implementing the recommendations of the Best Value Review of Health Improvement and the Audit Commission's Performance Summary report for 2006.

RESOLVED: That

- (1) the contents of the report be noted; and
- (2) that the Improvement Plan had now been implemented and that future monitoring of the

areas be considered through the Local Area Agreement and the White Paper Project Group be endorsed.

## HEA22 QUARTERLY MONITORING REPORTS

The Board considered a report of the Strategic Director – Healthy Halton Policy and Performance Board regarding the First Quarter Monitoring Reports for the Older People's and Physical and Sensory Impairment Services, Adults of Working Age and Health and Partnerships.

RESOLVED: That the first quarter year-end performance monitoring reports be received.

*Meeting ended at 9.03 p.m.*