

Health Policy & Performance Board Priority Based Report

Reporting Period: Quarter 4 – Period 1st January 2024 – 31st March 2024

1.0 Introduction

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

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

2.0 Key Developments

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

Adult Social Care

Halton Floating Support Service

Halton Floating Support Service was re-tendered during Q3/Q4. The contract was awarded to Plus Dane, the incumbent provider of the service. The mobilisation period will take place from 1st April – 30th June 2024 with the new contract commencing on 1st July 2024. A contract extension is in place to ensure continuity of service during the three-month mobilisation period.

Integrated Sensory Support Service

The service has run for six years as a collaboration between Vision Support and the Deafness Resource Centre. The current contract runs to 30th June 2024. In March a report was taken to Executive Board to look at continuation of the service for a further five years. This was agreed and work will now take place to amend the service specification to reflect objectives over the period.

Halton Home Based Respite Service

Care at Home Group Limited (CHAG) has been delivering the Home-Based Respite Service since April 2023, following Crossroads Care North-West exiting the market in March 2023. A report was taken to Executive Board in March to seek approval to award CHAG an 18-month contract to continue to deliver the service in Halton from April 2024; this was agreed. During this period, we aim to commence a new procurement process for the supply of the Service.

Adult Social Care Commissioning Strategy

The Commissioning Strategy for Care and Support outlines our commissioning intentions over the next three years and went through its final stages of formal approval during Q4, being approved at Executive Board on 18th January 2024.

Dementia Delivery Group meetings to determine priorities going forward. Delivery Plan to be presented to April 2024 One Halton Board for approval and agreement on practical implementation.

Q4

Immigration Impact upon Homelessness

The Home Officer have confirmed that there will be approximately 3000 asylum seekers that have experienced the delay in the move on process and will be served 7-day notice. Not all of these clients will be in Halton as they will be dispersed across the country, and numbers have not yet been released.

As part of the Asylum process many of the clients placed within the Initial Assessment centres are families, which will have a vast impact upon homelessness and temporary accommodation provision. Presently, we are seeing an increase in families presenting as homeless and reviewing the temporary accommodation available, however, the concerns remain on the high increase in numbers and the impact this will have upon the homelessness team and the financial costs incurred.

Public Health

The highly contagious Measles outbreak that started in London and spread to the West Midlands reached the North West. A total of 49 cases as of the time of writing this report had been identified across the region, the majority in people who were not fully immunised. Partners have worked together to ensure those most at risk were offered support and vaccination in an effort to prevent further spread. Measles will be transmitted to individuals who are un-immunised or partially immunised and vulnerable persons. Measles will impact the health of infants age <1 more severely, un-immune pregnant women and their babies and people who are immunocompromised.

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, however, we do know men can be impacted very differently to women in terms of how they cope. 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 working with individuals with lived experience. [Calm your mind | Get back to a better place](#) 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 Public Health Directorate continues to work on a wide range of issues linked to tackling the causes of ill health and improving health in Halton.

3.0 Emerging Issues

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

Adult Social Care

Domiciliary Care Tender

Work commenced in Q4 to re-tender the Domiciliary Care Service. At the time of writing, the tender opportunity is currently a live tender via The Chest procurement portal. The new contract is expected to commence in the Autumn. The tender is expected to increase the diversity of provision within the borough.

Independent Mental Capacity Advocate (IMCA) Cases

Discussions are scheduled to take place between Commissioners and advocacy representatives across Halton and Warrington to discuss responsibility for IMCA advocacy for Halton residents temporarily resident in Warrington, e.g. due to hospital admission. Historically, Halton Advocacy hub has provided the advocacy in such cases even though Warrington are effectively the host authority for cases within their locality. Due to current resource constraints and demands on the service, Halton Advocacy hub has stated is unable to continue to provide the advocacy for all Halton residents placed in Warrington.

Halton Carer's Strategy

The One Halton all-age carers strategy has now been signed off by the Halton's Carers Strategy Group and is due to be taken for ratification to the One Halton Place Based Partnership Board in April.

Co-Production

The Coproduction Charter and associated report is due to be taken for ratification to the One Halton Place Based Partnership Board in April, prior to implementation.

Public Health

The Tobacco and Vapes Bill, which was laid before the House of Commons on 20th March 2024, raises the age of sale for all tobacco products one year every year from 2027 onwards. This means that tobacco can never be legally sold to anyone born on or after 1st January 2009.

The Bill will also allow local Council officers to issue £100 on the spot fines to retailers that sell tobacco and vapes to those who are underage. This is in addition to the maximum £2,500 fine, which local authorities can impose on shops and other traders. It will also be illegal to give out free samples of vapes to under-18s.

Over 5.3 million adults in England are smokers, and the harm caused by smoking is the largest preventable cause of death in England, estimated to account for 64,000 deaths annually. Two in three smokers will die because of long-term smoking, with one in four hospital beds in the country currently being occupied by a smoker.

Research shows that most smokers start before they are 20 years old, and that the earlier someone starts, the more likely they are to smoke in later years. It has also been found that teenagers are nearly three times more likely to smoke if their caregivers or friends do.

The Procurement Act 2023 overturning the current public procurement regime in the UK, attained Royal Assent on 26 October 2023. The government has indicated that the Act will go live from October 2024, as several contracts are due for review and update in the next 2-year period it's likely that they will be reprocured under the new Act. Key considerations and objectives will include delivering value for money, maximising public benefit, and acting and being seen to act with integrity.

4.0 Risk Control Measures

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

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

5.0 Progress against high priority equality actions

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




6.0 Performance Overview




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

Commissioning and Complex Care Services

Adult Social Care

Key Objectives / milestones

Ref	Milestones	Q4 Progress
1A	Monitor the Local Dementia Strategy Action Plan, to ensure effective services are in place.	
1B	The Homelessness strategy be kept under annual review to determine if any changes or updates are required.	
1C	Monitor the effectiveness of the Better Care Fund pooled budget ensuring that budget comes out on target.	

1D	Integration of Health and social care in line with one Halton priorities.	
1E	Monitor the Care Management Strategy to reflect the provision of integrated frontline services for adults.	
1F	Continue to establish effective arrangements across the whole of adult social care to deliver personalised quality services through self-directed support and personal budgets.	

Supporting Commentary

1A The Dementia Delivery Plan approval and implementation (or whether further work is required) is dependent on the outcome of the April 2024 One Halton Board meeting at which it is being presented.

1B Homelessness Forum took place March 24 and consultation will form part of homelessness Strategy, which is presently under review. Draft strategy to be presented to Management Team July/August 2024

1C Budget projected to come in on target.

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

1E Halton Borough Council applied for additional funding from DHSC for the Streamlining of assessments, support with post covid waiting times for reviews, Occupational Therapy and DOLS assessments.

Firstly we have funded additional dedicated support for front door referrals and Deprivation of Liberty Safeguards (DoLS) This has enabled us to clear the backlog 'at the front door' and allocate the correct support for those being referred within 24 hours. The additional resource includes increasing the number of first assessors (x 3) to reduce initial triage waiting lists and reallocate resources to more complex cases. Therefore, they have granted an additional 135 authorisations since receiving the funding, bringing the waiting time for subsequent allocation of support down to less than 12 months.

Overall, the implementation a First Assessor model has led to a waiting list fall from 1,000 to 250 days to have a review between Q4 22/23 and Q4 23/24.

Secondly, Halton has established a Prevention and Wellbeing Service with the support of a redesign of adult social Care, placing outreach support with a Wellbeing approach at the front door. This team is focusing on people accessing community support before requiring support from adult social care where appropriate, and initial findings have identified a reduced demand and associated pressures upon ASC staff:



Although the implementation of a First Assessor model and a prevention-focussed front door service were already planned in Halton, this approach has enabled us to progress these redesigns more quickly and allocate more resources to the team of first assessors, which has improved both the speed and impact of this work: We are presently allocating all new referrals within 24/48 hours.











1F 250 staff across Adult Social Care have now completed, The Helen Sanderson Person Centred Planning Training, jointly with people of lived experience and providers/Voluntary Sector. This was completed in conjunction with Co-Production events led by TLAP. Presently Training is underway to 'Train the Trainer' and Management support to ensure a longer-term legacy.

















The changes to ways of working have led to a more productive workforce who can focus on meaningful tasks...staff have more time to speak to clients, reviews are more informed. Assessment work is more outcomes-focussed.





The Social Care IT systems will be changing in June 24 from Care First 6 to Eclipse, with newly developed Person-Centred Documentation.

Key Performance Indicators

Older People:						
Ref	Measure	22/23 Actual	23/24 Target	Q4	Current Progress	Direction of travel
ASC 01	Permanent Admissions to residential and nursing care homes per 100,000 population 65+ <i>Better Care Fund performance metric</i>	347.50	600	NA	NA	NA
ASC 02	Total non-elective admissions in to hospital (general & acute), all age, per 100,000 population. <i>Better Care Fund performance metric</i>	Q2 22/23 actual = 4,286	No plan set	4283	NA	NA
ASC 03	Proportion of Older People (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF 2B) <i>Better Care Fund performance metric</i>	84.2%	85%	NA	NA	NA
Adults with Learning and/or Physical Disabilities:						
ASC 04	Percentage of items of equipment and adaptations delivered within 7 working days (VI/DRC/HMS)	97%	97%	96%		

ASC 05	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 1) SDS	79.4%	80%	73.6		
ASC 06	Proportion of people in receipt of SDS (ASCOF 1C – people in receipt of long term support) (Part 2) DP	38.7%	45%	47.6		
ASC 07	Proportion of adults with learning disabilities who live in their own home or with their family (ASCOF 1G)	91.6%	89%	90%		
ASC 08	Proportion of adults with learning disabilities who are in Employment (ASCOF 1E)	7.6%	5.5%	6.1%		
Homelessness:						
ASC 09	Homeless presentations made to the Local Authority for assistance In accordance with Homelessness Act 2017. Relief Prevention Homeless Advice	NA	2000	756 290 163 121 201		NA
ASC 10	LA Accepted a statutory duty to homeless households in accordance with homelessness Act 2002	NA	200	121		NA
ASC 11	Number of households living in Temporary Accommodation Hostel Bed & Breakfast	NA	NA	148 38 30 Singles 8 Families	NA	NA
Safeguarding:						

ASC 12	Percentage of individuals involved in Section 42 Safeguarding Enquiries	39%	30%	34%		
ASC 13	Percentage of existing HBC Adult Social Care staff that have received Adult Safeguarding Training, including e-learning, in the last 3-years (Previously PA6 [13/14] change denominator to front line staff only.	62%	85%	76%		
ASC 14	The Proportion of People who use services who say that those services have made them feel safe and secure – Adult Social Care Survey (ASCOF 4B)	78.8%	89%	79.1		
Carers:						
ASC 15	Proportion of Carers in receipt of Self Directed Support.	98%	99%	99		
ASC 16	Carer reported Quality of Life (ASCOF 1D, (this figure is based on combined responses of several questions to give an average value. A higher value shows good performance)	7.5% (2021-22)	8%	7.0		
ASC 17	Overall satisfaction of carers with social services (ASCOF 3B)	39.3% (2021-22)	52%	44.4		
ASC 18	The proportion of carers who report that they have been included or consulted in discussions about the person they care for (ASCOF 3C)	69.5% (2021-22)	80%	77		
ASC 19	Social Care-related Quality of life (ASCOF 1A). (This figure is based on combined responses	18.9%	20%	18.9		

	of several questions to give an average value. A higher value shows good performance)					
ASC 20	The Proportion of people who use services who have control over their daily life (ASCOF 1B)	78.4%	80%	72.9		
ASC 21	Overall satisfaction of people who use services with their care and support (ASCOF 3A)	70.4%	71%	68.7		

Supporting Commentary

Older People:

ASC 01 Figures are being collated for year-end and will not be available until the next meeting.

ASC 02 Q4 data not yet available, this will not be published until at least the middle of May. The latest position available shows the number of admissions in the three-month period Dec 23 to Jan 24. Whilst non-zero LOS admissions have remained unchanged the number of 0-day LOS admissions has fallen slightly, however this does not tell the full picture, the number of 0 day LOS has fallen from 670 to 214 at WHHFT (-456) due to the implementation of the new A&E type 5 process. This means that increasing numbers of patients are now categorised as being treated as a category 5 A&E attendance as opposed to a short stay (0 day) admission. The process is not yet happening at MWL. In contrast the number of 0 day NEL admissions at MWL has increased from 1203 to 1558 (+355) nearly offsetting the whole of the decrease seen at WHHFT.

ASC 03 Annual collection only to be reported in Q1.

Adults with Learning and/or Physical Disabilities:

ASC 04 Q4 figure is marginally below target.

ASC 05 The latest figure has not met the Q4 target and is slightly lower than the same quarter last year.

ASC 06 The Q4 figure has exceeded the target and is higher than the same period last year.

ASC 07 The figure for Q4 has exceeded the target, although slightly lower in comparison to Q4 last year.

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

Homelessness:

- ASC 09** There continues to be an increase in homelessness presentations, due to relationship breakdown, affordability and changes in immigration process. We anticipate an increase in presentations from families during the next quarter and working with Home Office to process applications. The team are working tirelessly to source accommodation and save tenancies, using the prevention incentives available to reduce and relieve homelessness.
- ASC 10** Due to the work the team are undertaking to prevent homelessness prior to decision making stage, this has contributed to the low statutory acceptance decisions.
- ASC 11** There continues to be an increase in the demand for temporary accommodation, resulting in the use of hotels. There are concerns that there will be an increase in families presenting as homeless forcing the LA to increase hotel usage

Safeguarding:

- ASC 12** This is a relatively new indicator, a lower percentage is better. Although we have not reached the target for Q4 the figure has decreased compared to the same period the previous year.
- ASC 13** Although the 23/24 target has not been met; the performance each quarter has been increasing and Q4 has exceeded the actuals from last year.
- ASC 14** Although the target has not been met for Q4 it has increased by 0.3 per cent compared to the same quarter last year.
The figure may be subject to change following weightings being completed.

Carers:

- ASC 15** The Q4 figure has reached target and is higher than the same period last year. Survey measures are reported annually for service users and bi-annually for carers.
- ASC 16** (ASC16) (1D) responses show a 0.5 per cent decrease in the overall carer reported quality of life and a 2.1 per cent decrease in the proportion of carers who reported that they had as much social contact as they would like
- ASC 17** (ASC 17)The Overall Satisfaction of Carers with Social Services has increased by 5.1 per cent and those who report that they have been included or consulted in discussions about the person they care for has increased by 5.7 per cent.
- ASC 18** (ASC18) (3C) Carers who consulted in discussions about the person they care for has increased by 5.7 per cent.
- ASC 19** (ASC19) (1A) This measure is just 0.1 per cent below the target for this measure and has remained the same as 2022/23

ASC 20






Q4

(ASC20) (1B) This measure has seen a reduction of 6.1 per cent in the past year. This will need further analysis to see if there are areas of specific concern.

ASC 21

(ASC21) (3A) A reduction of 1.7 per cent and below the current target.

Public Health**Key Objectives / milestones**

Ref	Objective 1: Child Health	Q4 Progress
	Milestones	
PH 01	Working with partner organisations to improve the development, health and wellbeing of children in Halton and to tackle the health inequalities affecting that population.	
Ref	Objective 2: Adult weight and physical activity	
	Milestone	
PH 02	Reduce levels of adult excess weight (overweight and obese) and adult physical inactivity	
Ref	Objective 3: NHS Health Checks	
	Milestone	
PH 03	Ensure local delivery of the NHS Health Checks programme in line with the nationally set achievement targets and locally set target population groups.	
Ref	Objective 4: Smoking	
	Milestone	
PH 04	Reduce smoking prevalence overall and amongst routine/manual and workless groups and reduce the gap between these two groups.	
Ref	Objective 5: Suicide reduction	
	Milestone	
PH 05	Work towards a reduction in suicide rate.	
Ref 05	Objective 6: Older People	
	Milestone	

PH 06	Contribute to the reduction of falls of people aged 65 and over and reduction in levels of social isolation and loneliness.	<input checked="" type="checkbox"/>
Ref	Objective 7: Poverty	
	Milestone	
PH 07	To increase awareness of fuel poverty and drive change to tackle the issue through better understanding of services available across Halton (staff and clients).	<input checked="" type="checkbox"/>
Ref	Objective 8: Sexual health	Q4 Progress
	Milestone	
PH 08	To continue to provide an easily accessible and high quality local sexual health service, ensuring adequate access to GUM and contraceptive provision across the Borough, whilst reducing the rate of sexually transmitted infections and unwanted pregnancies.	<input checked="" type="checkbox"/>
Ref	Objective 9: Drugs and alcohol	
	Milestone	
PH 09	Work in partnership to reduce drug and alcohol related hospital admissions.	<input checked="" type="checkbox"/>

PH 01 Supporting commentary

Regular performance contract meetings in place with the 0-19 service. The 0-19 service are supporting the development of the Family hubs model and local offer, and the SEND priority action plan.

The infant feeding offer continues to expand, now with 4 weekly drop-in support groups, in addition to home visits and telephone support in the postnatal period:

Women supported with breastfeeding via home visits	52
Women supported with breastfeeding via telephone	134
Women supported with formula feeding via telephone	108
Attendances at infant feeding support groups	96

Engagement with the Healthy Schools offer: 47 out of 64 schools (73%) have engaged with the programme so far this school year.

7 young carers completed the RSPH Young Health Champions Award; delivering health messages to their peers and developed skills to promote health and wellbeing

PH 02 Supporting commentary

Halton continues to support weight management objectives.

Objective	Outcome
Started Service (Q4)	397
Completed 12 weeks (Q3)	33%
Completed 6 months (Q2)	16%

Halton continues to support physical activity through the 'exercise on referral' program. This service provides bespoke physical activity support for those with health conditions.

Objective	Outcome
Started Service	102
Completed 6 week review	44%
Completed 12 week review	60%

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

- PH 03** Throughout quarter 1 and 2 HIT have been rolling out the new Health Diagnostics IT system. This is not fully embedded yet, which means NHSHC data from GP practice data is not currently available.

Outcome	Q1	Q2	Q3	Q4
Invites	994	6175	6136	2756
Completed by HT in Practice	472	652	519	571
Completed in Community	13	59	68	199
Completed in Workplace	133	59	82	123
Referrals Onward	191	362	332	403

- PH 04** **Supporting commentary**
Quitting data from Q1-Q4 2023/2024:

Total Referrals	1,204
Total Set a Quit Date	926
Engagement Rate	77%
Total Quit	417
Total Still Awaiting 4 Week Quit Outcome	103
Unemployed/Never worked Set a Quit Date	138
Unemployed/Never worked Quit	50
Awaiting 4 Week Quit Outcome	16
Routine/Manual Set a Quit Date	156
Routine/Manual Quit	76
Awaiting 4 Week Quit Outcome	15

- PH 05** **Supporting commentary**
We continue to work closely with partners and Champs on the Zero Suicide Agenda and consistently drive Halton's action plan to drive reduction in suicides. Work currently taking place on long term conditions, Dual Diagnosis and Gambling harms. Work continues to take place at a regional level to reduce Self-Harm in children and young people via the Beyond Transformation programme. Work taking place locally to support education settings with self-harm and suicide attempts.

- PH 06** **Supporting commentary**
The EoR Programme which includes falls has been rolled out in some GP practices to target common health conditions such as hypertension and falls. We have had 23 new starters enrolled on the fall prevention exercise class this quarter.

PH 07 Supporting commentary

Targeted paid for advertising via Global media to create an online ad campaign between Jan-Mar. Campaign covered visual ads on social media and audio ads on Radio and Spotify where possible targeted at demographics and areas of the Borough most in need. Campaign created 100,000 impressions for links to the cost of living page and all available support for fuel poverty.

PH 08 Supporting commentary

Axess hold weekly clinics in both Runcorn & Widnes, including evening, walk in, a dedicated 'Axess4u' young person's clinic as well as outreach clinics for certain targeted groups. The service has been working to improve its digital front door and accessibility and are now able to offer online booking for some appointments. Work has started on preparing for the new contract, which will be starting in October 2025, with the sexual health JSNA. We are also working closely with the ICB around the development of Women's Health Hubs in Halton, which will focus initially on improving access to LARC.

PH 09 Supporting commentary

CGL continues to delivery drug and alcohol services, working closely with other partners across the system – including Cheshire Police and the HBC Early Help Team. The Halton Drugs Strategy for 2023-26 has been finalised, and the Combatting Drugs Partnership (CDP) has produced an annual report which details progress which the CDP has made over the past 12 months. The borough will receive Individual Placement Support (IPS) funding from DHSC starting in April 2024. This new IPS funding will enable people in drug and alcohol treatment who are not currently in work to access employment, helping to break the cycle of addiction.

Audit C screenings are delivered during Health Checks and Stop Smoking consultations to clients across Halton.

During Q1-Q4 Health Trainers/Health Check Officers have delivered 2,947 Audit C screenings















Audit C screenings in workplaces, GP practises and in the community.












During Q1-Q4 the Stop Smoking Service have delivered 566 Audit C screenings with clients wishing to stop smoking





Total combined Audit C screenings delivered = 3,513

Key Performance Indicators

Ref	Measure	22/23 Actual	23/24 Target	Q4	Current Progress	Direction of travel
PH 01a	Healthy life expectancy at birth: females (years)	58.0 (2018-20)	58.0 (2019-21)	NA		
PH 01b	Healthy life expectancy at	61.4	61.4	NA		

	birth: males (years)	(2018- 20)	(2019- 21)			
PH 02	A good level of child development (% of eligible children achieving a good level of development at the end of reception)	60.1% (2021/22)	N/A	62.2% (2022/23)		
PH 03	Health Visitor new births visits (% of new births receiving a face to face visit by a Health Visitor within 14 days)	80.4% (2022/23)	90%	83.5% (Q1-Q3 2023/24)		
PH 04	Prevalence of adult excess weight (% of adults estimated to be overweight or obese)	65% (2020/21)	64.7% (2021/22)	71.2% (2021/22)		
PH 05	Percentage of physically active adults	65.5% (2020/21)	65.5% (2021/22)	63.1% (2021/22)		
PH 06	Uptake of NHS Health Check (% of NHS Health Checks offered which were taken up in the quarter)	104.6% (2022/23)	76.5% (2023/24)	30.5% (Q1-3 2023/24)		
PH 07	Smoking prevalence (% of adults who currently smoke)	13.2% (2021)	13.1% (2022)	13.3% (2022)		
PH 08	Deaths from suicide (directly standardised rate per 100,000 population)	10.1 (2019- 21)	10 (2020- 22)	9.3 (2020-22)		

PH 09	Self-harm hospital admissions (Emergency admissions, all ages, directly standardised rate per 100,000 population)	282 (2021/22)	280.6 (2022/23)	263.6 (2022/23 provisional)		
PH 10	Emergency admissions due to injuries resulting from falls in the over 65s (Directly Standardised Rate, per 100,000 population; PHOF definition)	2,676 (2021/22)	2,663 (2022/23)	2,279 (2022/23 provisional)		
PH 11	Social Isolation: percentage of adult social care users who have as much social contact as they would like (age 18+)	40% (2022/23)	NA	30.2%		
PH 12	Fuel poverty (low income, low energy efficiency methodology)	13.8% (2020)	13.7% (2021)	12.4% (2021)		
PH 13	New sexually transmitted infections (STI) diagnoses per 100,000 (excluding chlamydia under 25)	225 (2021)	220 (2022)	383 (2022)		
PH 14	Long acting reversible contraception (LARC) prescribed as a proportion of all contraceptives	58% (2022/23)	58% (2023/24)	50% (Q1-3 2023/24)		n/a

PH 15	Admission episodes for alcohol-specific conditions (Directly Standardised Rate per 100,000 population)	908 (2021/22)	900 (2022/23)	872 (2022/23 provisional)		
PH 16	Successful completion of drug treatment (non opiate)	21.2% (2022/23)	25% (2023/24)	17.2% (Q3 2023/24)		

Supporting Commentary

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

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

PH 02 - The percentage of children achieving a good level of development has improved in Halton in 2022/23 to 62.2%. However, this is still below the England average of 67.2%.

PH 03 - 2022/23 data and Q1-3 2023/24 data saw an increase from 2021/22 but failed to meet the target of 90%. However, it did meet the performance standard of 75%.

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

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

PH 06 - Please note that there was an issue with the coding of invites during Q1 and Q2 which resulted in an uptake of over 100% for 2022/23. There has been a reduction in uptake during Q2 2023/24 as there were a large number of invites sent out and a transition in data collection systems.

PH 07 – Smoking levels increased very slightly in 2022 and did not quite meet the target. Data is published annually.

PH 08 - The suicide rate has decreased in 2018-200, 2019-21 and 2020-22. The rate is similar to the England average.

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

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

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

PH 11 - The proportion of adult social care users having as much social contact as they would like, has fallen year on year since 2012/13. Data was updated retrospectively in 2024 and so previous target is not applicable. (Data is published annually)

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

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

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

PH 14 – Data for 2022/23 covers Halton & Warrington but has been split for Halton from 2023/24. Therefore the 2023/24 data is not directly comparable to 2022/23.

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

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

PH 16 - Data does fluctuate year on year but in 2022/23, the Halton proportion of successful completions was worse than the England average. The figure has continued to reduce in 2023/24.

APPENDIX 1 – Financial Statements

ADULT SOCIAL CARE DEPARTMENT**Adult Social Care****Revenue Operational Budget as at 31st March 2024**

	Annual Budget	Actual Spend	Variance (Overspend)
	£'000	£'000	£'000
Expenditure			
Employees	15,593	15,919	(326)
Premises	695	679	16
Supplies & Services	1,426	1,396	30
Aids & Adaptations	38	39	(1)
Transport	228	386	(158)
Food Provision	201	202	(1)
Agency	734	726	8
Supported Accommodation and Services	1,205	1,211	(6)
Emergency Duty Team	110	163	(53)
Contacts & SLAs	577	575	2
Housing Solutions Grant Funded Schemes			
Homelessness Prevention	356	355	1
Rough Sleepers Initiative	157	167	(10)
Total Expenditure	21,320	21,818	(498)
Income			
Fees & Charges	-804	-760	(44)
Sales & Rents Income	-453	-478	25
Transfer from Reserves	-435	-435	0
Reimbursements & Grant Income	-1,953	-2,131	178
Capital Salaries	-121	-121	0
Housing Schemes Income	-506	-540	34
Total Income	-4,272	-4,465	193
Net Operational Expenditure	17,048	17,353	(305)
Recharges			
Premises Support	583	583	0
Transport Support	575	727	(152)
Central Support	3,667	3,667	0
Asset Rental Support	205	205	0
Recharge Income	-112	-112	0
Net Total Recharges	4,918	5,070	(152)
Net Departmental Expenditure	21,966	22,423	(457)

Comments on the above figures

Net Department Expenditure, excluding the Community Care and Care Homes divisions, is £0.457m above budget at the end of the of the 2023/24 financial year.

Employee costs were £0.326m above budget profile. This reflects the unbudgeted additional cost of the 2023/24 pay award (£1,925 plus on-costs per FTE, less the budgeted 4% overall). Total unbudgeted pay award costs are £0.451m for the year, and the staff turnover saving target above target was £0.125m for the year.

The overspends on transport and transport recharges are currently under review, expenditure is significantly above budget on both headings, costs have increased steadily over recent years.

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





Overall income is above target for the year, although there is an under-achievement of £62,000 in respect of transport income charged to service users. This is reflected in the overall under-achievement of £44,000 in respect of Fees & Charges income.

Adult Social Care

Progress Against Agreed Savings

	Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value			Current Progress	Comments
				23/24 £'000	24/25 £'000	25/26 £'000		
ASC1	Housing Solutions	474	Remodel the current service based on good practice evidence from other areas.	0	0	125	✓	Expected to be achieved in 2025/26 budget year
ASC2	Telehealthcare	680	Explore alternative funding streams such as Health funding or Disabled Facilities Grants.	0	170	0	✓	Expected to be achieved in 2024/25 budget year
			Increase charges / review income.	0	170	0		
			Cease the key safe installation service.	0	15	0		
ASC11	Dorset Gardens Care Services	471	Cease onsite support and transfer to the domiciliary care contract.	275	0	0	U	To be achieved in current year, but only effective from September 2023 onwards
ASC17/18	Quality Assurance Team	395	Review the activities of the Quality Assurance Team, given there are fewer providers for domiciliary care and the transfer of four care homes into the Council.	35	0	0	✓	Current year savings achieved, and 2024/25 savings on target
			Merge the service with the Safeguarding Unit.	0	50	0		

ASC12	Meals on Wheels	33	Increase charges to ensure full cost recovery. A procurement exercise will also be completed for the provision of food.	33	0	0	<input checked="" type="checkbox"/>	Charge increase implemented
ASC16	Shared Lives (Adult Placement Service)	115	Engage with an external agency currently operating Shared Lives to take over the running of this service. It is anticipated that this would provide an improved service.	0	58	0	<input checked="" type="checkbox"/>	Expected to be achieved in 2024/25 budget year
ASC19	Voluntary Sector Support	N/A	Review the support provided by Adult Social Care and all other Council Departments, to voluntary sector organisations. This would include assisting them to secure alternative funding in order to reduce their dependence upon Council funding. A target saving phased over two years has been estimated.	0	200	100	<input checked="" type="checkbox"/>	Expected to be achieved in the relevant budget years
ASC4	Positive Behaviour Support Service	349	Increase income generated in order to ensure full cost recovery, through increased service contract charges to other councils.	0	100	0	<input checked="" type="checkbox"/>	Expected to be achieved in 2024/25 budget year

			Review the Integrated Care Board contribution for Adults, to ensure the full recovery of related costs.	0	150	0		
ASC6	Bridge Builders	250	Restructure and incorporate within the Care Management front door service, introducing the services currently offered by Bridge Builders to all new referrals.	120	0	0		To be achieved in current year, although full-year savings not realised
ASC5	Mental Health Outreach Team	376	Streamline the service and focus on higher needs requiring joint funding from the Integrated Care Board.	140	0	0		Currently under review, it does not seem probable that the savings will be achieved this year
ASC21	Mental Health Team Carers Officer	38	Commission the Carers Centre to complete all Carers assessments or undertake the function through the Initial Assessment Team.	38	0	0		Currently under review, it does not seem probable that the savings will be achieved this year
ASC15	Learning Disability Nursing Team	424	Cease provision of this service. The service is a Health related function rather than Adult Social Care, but this is a historical arrangement. The Integrated Care Board would	0	424	0		Expected to be achieved in 2024/25 budget year

			need to consider how they want to provide this function.					
ASC14	Care Management Community Care Budget	18,982	Attract £500k investment from the pooled budget (BCF) from 2024/25. Undertake work in years 1 and 2 to reduce reliance upon contracted services from 2025/26. Services are currently in the process of being redesigned on a “Strengths Based Approach” ie. focused upon prevention.	0	500	1,000	<input checked="" type="checkbox"/>	Expected to be achieved in the relevant budget years
Total Adult Social Care Department				641	1,837	1,225		

Care Homes Division**Revenue Budget 23-24 Outturn**

	Annual Budget	Actual	Variance (Overspend)
	£'000	£'000	£'000
Expenditure			
<u>Madeline Mckenna</u>			
Employees	672	784	(112)
Other Premises	122	127	(5)
Supplies & Services	16	16	0
Food Provison	43	45	(2)
Reimbursements & Other Grant Income	-35	-35	0
Total Madeline Mckenna Expenditure	818	937	(119)
<u>Millbrow</u>			
Employees	2,084	2,265	(181)
Other Premises	151	203	(52)
Supplies & Services	43	66	(23)
Food Provison	75	80	(5)
Reimbursements & Other Grant Income	-101	-101	0
Total Millbrow Expenditure	2,252	2,513	(261)
<u>St Luke's</u>			
Employees	2,740	2,906	(166)
Other Premises	208	237	(29)
Supplies & Services	46	73	(27)
Food Provison	118	121	(3)
Reimbursements & Other Grant Income	-76	-76	0
Total St Luke's Expenditure	3,036	3,261	(225)
<u>St Patrick's</u>			
Employees	1,824	2,246	(422)
Other Premises	191	192	(1)
Supplies & Services	43	65	(22)
Transport	0	0	(0)
Food Provison	112	130	(18)
Reimbursements & Other Grant Income	-121	-121	0
Total St Patrick's Expenditure	2,049	2,512	(463)
<u>Care Homes Divison Management</u>			
Employees	285	250	35
Supplies & Services	0	3	(3)
Care Home Divison Management	285	253	32
Net Operational Expenditure	8,440	9,476	(1,036)
Recharges			
Premises Support	285	285	0
Transport Support	0	0	0
Central Support	890	890	0
Asset Rental Support	291	291	0
Recharge Income	0	0	0
Net Total Recharges	1,466	1,466	0
Net Departmental Expenditure	9,906	10,942	(1,036)

Comments on the above figures**Financial Position**

The care home division is made up of the following cost centres, Divisional Management Care Homes, Madeline Mckenna, Millbrow, St Luke's and St Patrick's.

The net departmental expenditure across the division is over budget for 2023-24 financial year by £1.036m.

Recruitment and retention of staff at all levels continue to place pressures across the care homes. This has resulted in the use of expensive agency staff and overtime to cover vacancies. A proactive rolling recruitment process is taking places across the care homes.

Employee Related expenditure

Employee related expenditure is over budget at the end of 2023-24 financial year by £0.846m.

Recruitment and retainment of staff is a continued pressure across the care homes and is therefore reliant on the use of overtime and agency staff to cover vacancies. At the end of financial year 2023/24 total agency spend across the care homes reached £3.6m, the cost of this has partially been offset by staff vacancies.

Whilst the spend remains high, there has been a reduction of £0.5m from the £4.1m spend in the previous financial year. This is due to a combination of all care homes now using the Matrix booking system, and some of the vacancies being filled.

Throughout the year a number of residents within the care homes were identified as needing 1:1 care in addition to the support the care homes provide on a day to day basis. The staffing budget has been revised to take this into consideration., The revised budget helped support agency spend:

In Year Revised Agency Budget	
MMK	£5,399
Millbrow	£115,031
St Lukes	£18,190
St Patricks	£75,031
Total	£213,651

In addition to the above, a Market Sustainability and Improvement Fund grant contribution was received and made available to the care homes to be spent in financial year 23-24, this further supported the cost of agency staff:

Workforce Grant	
MMK	£30,375
Millbrow	£72,001
St Lukes	£72,001
St Patricks	£80,077
Total	£254,454

A proactive rolling recruitment exercise is ongoing within the care homes and is supported by HR and the Transformation team.

Premises Related Expenditure

At the end of financial year 2023-24 premises costs were over budget by £0.087m.

Premises related expenditure covers both repairs, maintenance and utilities. The budget was increased significantly for utilities in 2023/24 due to increases in costs in previous years. Due to this, there is a large under spend for utilities which has masked overspend for repairs and maintenance significantly.

Repairs and maintenance continue to be a budget pressure across all the care homes. The recruitment of a facilities manager would help to support the reduction in these costs. Budget for a facilities manager has been made available and this position has been advertised.

Supplies and Services Expenditure

Supplies and Services expenditure is over budget at the end of 23-24 financial year by £0.072m.

Food Provision Expenditure

Food Provision expenditure is over budget at the end of 23-24 financial year by £0.028m.

Approved 2023/24 Savings

There are no approved savings for the care home division in financial year 2023/24

Risks/Opportunities

Recruitment and retention of care and nursing staff within care homes remains the significant risk to the budget. Work through the transformation programme, HR and the managers and staff have significantly reduced these pressures in year and continues.

COMMUNITY CARE**Revenue Budget as at 31st March 2024**

	Annual Budget	Actual Spend	Variance (Overspend)
	£'000	£'000	£'000
Expenditure			
Residential & Nursing	13,579	13,928	(349)
Domiciliary Care & Supported living	12,357	12,643	(286)
Direct Payments	12,218	12,969	(751)
Day Care	375	535	(160)
Total Expenditure	38,529	40,075	(1,546)
Income			
Residential & Nursing Income	-12,059	-11,865	(194)
Community Care Income	-2,381	-2,402	21
Direct Payments Income	-956	-1,003	47
Income from other CCGs	-126	-131	5
Market Sustainability & Improvement Grant	-1,497	-1,497	0
Adult Social Care Support Grant	-4,357	-4,357	0
Market Sustainability Workforce Grant	-718	-718	0
LA UEC Grant	-156	-156	0
War Pension Disregard Grant	-67	-56	(11)
Other Income	-515	-867	352
Total Income	-22,832	-23,052	220
Net Departmental Expenditure	15,697	17,023	(1,326)

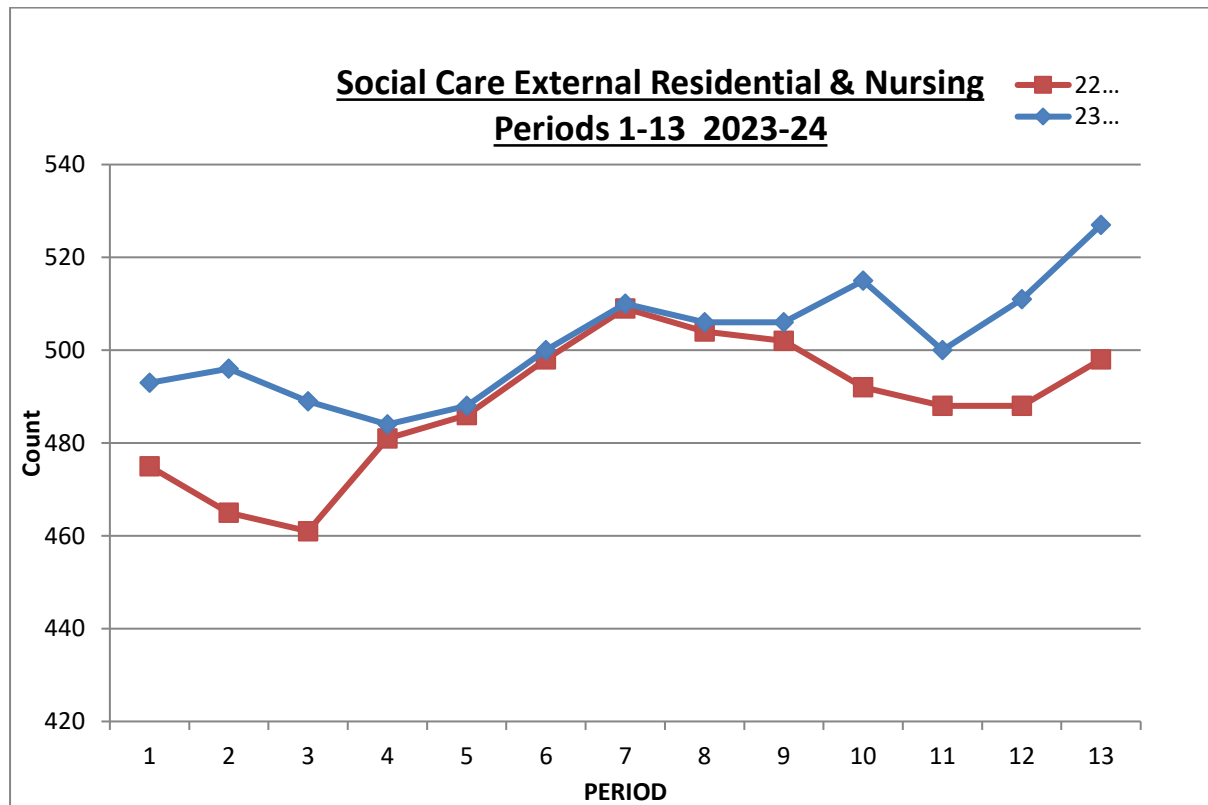
Comments on the above figures:

At the end of the financial year 2023/24, expenditure on Community Care services is over budget profile by £1.326m.

The Domiciliary and Supported Living outturn is significantly more than was forecast at quarter 3. This is due to a couple of high cost service users, not previously known to finance. Therefore they were not included in the original forecast.

Individual Services budgets are analysed in more detail below.

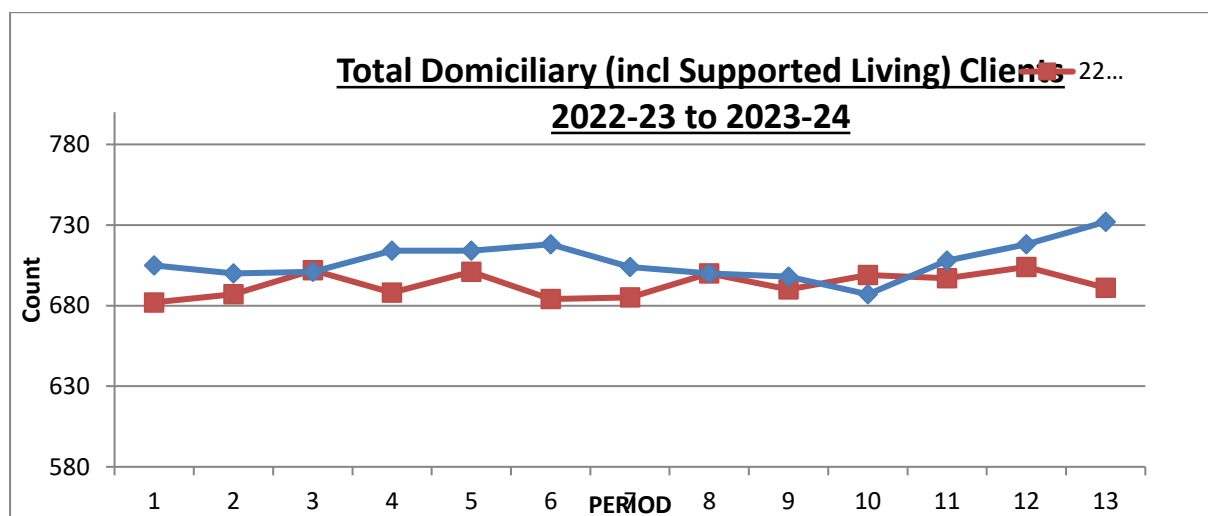
Residential & Nursing Care



Between April 23 and March 24 the number of people in receipt of Residential or Nursing Care increased from 493 to 527, an increase of 6.8%.

The average cost of a package of care has increased 10.6% from £864 in April to £956 in March suggesting an increase in the complexity of care packages.

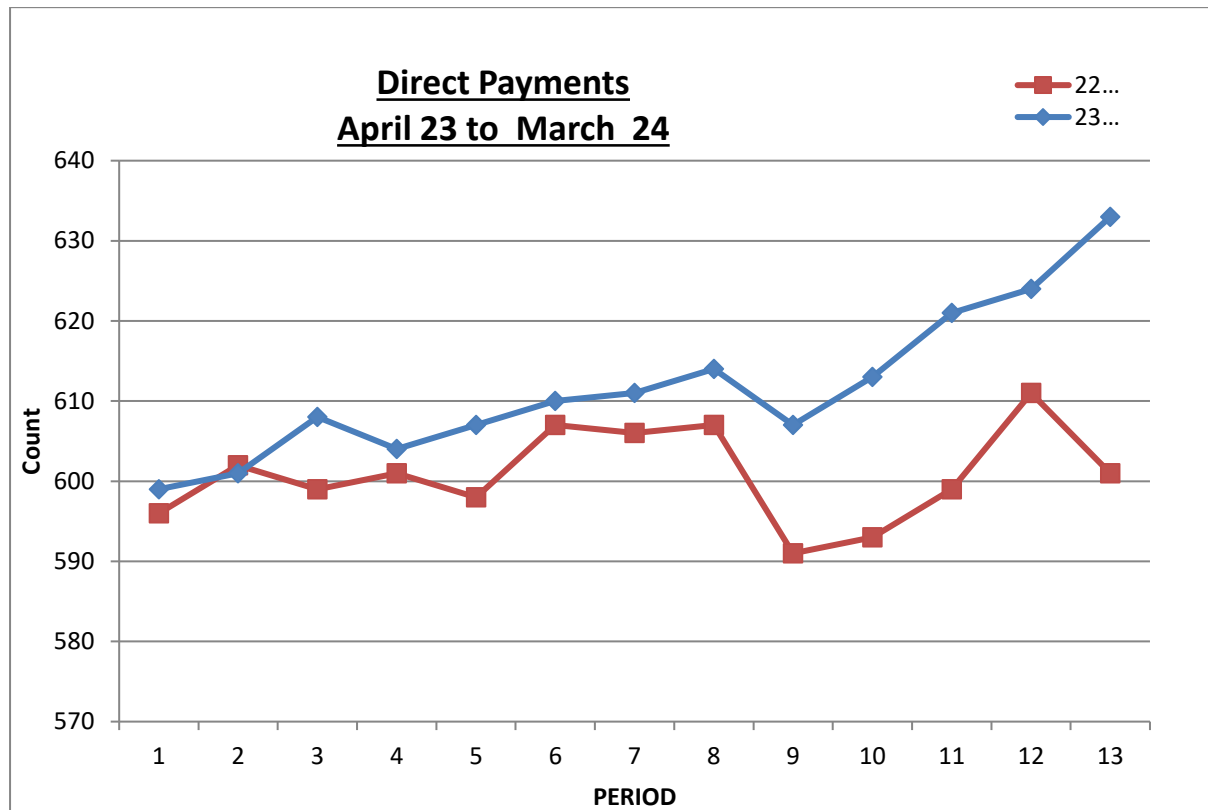
Domiciliary Care & Supported Living



There are currently 732 service users receiving a package of care at home compared to 705 in April, an increase of 3.8%.

The average cost of a package of care has increased from £417 in April to £475 at the end of the year, an increase of 13.9%. Note, this is inclusive of an in-year uplift of 6% paid to providers from October 2023, funded from the Market Sustainability Grant.

Direct Payments



The number of service users in receipt of a Direct Payment increased from 599 to 633 over the course of the year. The average package of care cost increased from £551 to £591, an increase of £7.25%. This service continues to be a pressure as it is often used as a default position due to the current domiciliary provider being unable to pick up additional care packages.

The Community Care budget is very unpredictable by nature as it is demand driven, with many influential factors such as the ageing population, deprivation within the borough and its links to the health care sector. It will continue to be closely monitored and scrutinised to quantify pressures and, in conjunction with the budget recovery group, we will continue to identify savings in order to achieve a balanced budget at the end of the financial year.

COMPLEX CARE POOL BUDGET**Revenue Budget as at 31st March 2024**

	Annual Budget	Actual Spend	Variance (Overspend)
	£'000	£'000	£'000
Expenditure			
Intermediate Care Services	5,292	5,150	142
Oakmeadow	1,831	1,894	(63)
Community Home Care First	1,530	2,047	(517)
Joint Equipment Store	829	1,014	(185)
HICafs	3,258	3,024	234
Contracts & SLA's	3,321	3,222	99
Carers Breaks	450	345	105
Carers Centre	354	357	(3)
Residential Care	7,393	7,209	184
Domiciliary Care & Supported Living	3,756	3,897	(141)
Total Expenditure	28,014	28,159	(145)
Income			
BCF	-12,762	-12,762	0
CCG Contribution to Pool	-2,864	-2,864	0
ASC Discharge Grant	-979	-979	0
ICB Discharge Grant	-942	-942	0
LA UEC Grant	-144	-144	0
Oakmeadow Income	-6	-2	(4)
Other Income	-25	-27	2
Transfer from Reserve	-193	-193	0
Cfwd from 2022/23	0	-147	147
Total Income	-17,915	-18,060	145
Net Operational Expenditure	10,099	10,099	0
Recharges			
Premises Support	0	0	0
Transport	0	0	0
Central Support	0	0	0
Asset Rental Support	0	0	0
HBC Support Costs Income	0	0	0
Net Total Recharges	0	0	0
Net Departmental Expenditure	10,099	10,099	0

Comments on the above figures:

The pool has achieved a balanced budget at the end of the financial year 2023/24.

The Better Care development £0.428m and other underspends were split equally between the Council and Health to cover pressures in the Health & Social Care Budget. The councils share, £0.275m went to Domiciliary and Supported Living.

Q4

The underspend on Intermediate Care Services and HICafs is due to staff vacancies.

Oakmeadow overspend was due to agency, utility and food costs.

The Community Home Care First overspend of £0.517m is due to an agreement to pay the main homecare provider for all of their agency costs.

The Joint Equipment Service overspend has arisen as the closing stock figure has reduced by £0.185m.

Contracts & SLA's include Inglenook which has had a void for most of the year, hence the underspend.

Expenditure on Carer's Breaks is £0.105m less than anticipated, as demand for services is still lower than pre-pandemic levels.

The pool budget has balanced at the end of the year and as previously mentioned, funds have been diverted to cover Health and Community Care pressures. These pressures continue to rise but it cannot be guaranteed that we can rely on Pool underspends in the future.

Pooled Budget Capital Projects as at 31st March 2024

	2023-24 Capital Allocation £'000	Actual Spend £'000	Total Allocation Remaining £'000
Disabled Facilities Grant	800	771	29
Stair lifts (Adaptations Initiative)	260	259	1
RSL Adaptations (Joint Funding)	170	171	(1)
Telehealthcare Digital Switchover	300	165	135
Millbrow Refurbishment	100	51	49
Madeline Mckenna Refurb.	100	17	83
St Luke's Care Home	100	97	3
St Patrick's Care Home	100	44	56
Total	1,930	1,575	355

Comments on the above figures:

Allocations for Disabled Facilities Grants/Stair Lifts and RSL adaptations are consistent with 2022/23 spend and budget, and expenditure across the 3 headings are broadly within budget overall.

The £0.4m Telehealthcare Digital Switchover scheme was approved by Executive Board on 15 July 2021. Significant capital investment is required to ensure a functional Telehealthcare IT system is in place prior to the switchoff of existing copper cable based systems in 2025. Procurement commenced in 2022/23 with an initial purchase to the value of £100,000. It is anticipated that the scheme will be completed early in the 2024/25 financial year, fully funded from the residual capital allocation of £0.3m.

On 16th June 2022 Executive Board approved a £4.2M refurbishment programme in respect of the four Council owned care homes, to be completed withing a three year timescale. Halton purchased the homes, with the exception of Madeline McKenna, when it was evident that the

buildings had been neglected. £0.419m was spent on refurbishment across the 4 homes in the previous financial year, and £0.209m in 2023/24. Unspent funding at year-end will be carried forward to the 2024/25 financial year to enable the scheme's completion.

PUBLIC HEALTH & PUBLIC PROTECTION DEPARTMENT

Revenue Budget as at 31 March 2024

	Annual Budget	Actual Spend	Variance (Overspend)
	£'000	£'000	£'000
Expenditure			
Employees	4,913	4,365	548
Premises	6	6	0
Supplies & Services	280	252	28
Contracts & SLA's	7,088	7,071	17
Transport	4	2	2
Other Agency - Port Levies	23	23	0
Transfer to Reserves	51	51	0
Total Expenditure	12,365	11,770	595
Income			
Fees & Charges	-152	-173	21
Reimbursements & Grant Income	-422	-480	58
Transfer from Reserves	-842	-484	(358)
Government Grant Income	-11,509	-11,509	0
Total Income	-12,925	-12,646	(279)
Net Operational Expenditure	-560	-876	316
Recharges			
Premises Support	156	156	0
Transport	19	19	0
Central Support	2,340	2,340	0
Asset Rental Support	0	0	0
HBC Support Costs Income	-482	-482	0
Net Total Recharges	2,033	2,033	0
Net Departmental Expenditure	1,473	1,157	316

Comments on the above figures

The net Department spend for the year ending 31st March 2024 is £0.315m under the approved budget.




£0.484m was transferred from reserves to balance the public health budget, however this was £0.358m lower than the contribution of £0.842m that was expected for the year.

Employee's cost for the year was £0.548m lower than the approved budget, this is due to vacancies and temporary reduction in hours across the department. All saving targets approved for 2023/24 were achieved

Expenditure on supplies and services was kept to essential items only throughout the year and has achieved a small underspend of £0.027m.




APPENDIX 2 – Explanation of Symbols

Symbols are used in the following manner:

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

Direction of Travel Indicator

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

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