

## HEALTH AND WELLBEING BOARD

*At a meeting of the Health and Wellbeing Board on Wednesday, 8 October 2025 at the DCBL Stadium, Widnes*

Present: Councillor Wright (Chair)  
Councillor T. McInerney  
Councillor Woolfall  
J. Adamson – Halton Borough Council  
K. Anderson – Public Health  
K. Butler – Democratic Services  
K. Graham – Halton Borough Council  
C. Gregory – Public Health  
M. Hancock – Public Health  
I. Onyia, Public Health  
McPhee, Mersey Care NHS Foundation Trust  
A. Leo, Integrated Commissioning Board  
Hughes  
D. Nolan, Adult Social Care  
S. Patel, Local Pharmaceutical Committee  
M. Roberts – NHS Cheshire & Merseyside  
J. Sanderson - Integrated Commissioning Board  
J. Wallis – Bridgewater Community Healthcare  
D. Wilson – Healthwatch Halton  
S. Yeoman, Halton & St Helens VCA

*Action*

### HWB11 APOLOGIES FOR ABSENCE

Apologies had been received from Wayne Longshaw – St. Helens & Knowsley Hospitals, David Wilson - St. Helens & Knowsley Hospitals and Lisa Windle – Halton Housing.

### HWB12 MINUTES OF LAST MEETING

The Minutes of the meeting held on 9 July 2025 having been circulated were signed as a correct record.

### HWB13 STRONGER FOR LONGER SERVICE

The Board considered a report which informed them about the launch of a new service called “Stronger for Longer”, which was aimed at supporting adults in Halton, over the age of 55.

The free 12-week programme combined services and community support to help participants stay mentally, socially, and physically active. It provided 1:1 support, early intervention, and a focus on prevention to help older adults

improve their quality of life and maintain their independence. The report outlined how the programme was developed and how it differed from the previous 1:1 service.

Following a referral to the service, clients would undertake an initial assessment which would help identify the appropriate level of support needed and there were 3 different tiers:

- Tier 1 – Information and Advice
- Tier 2 – Practical Support
- Tier 3 – Coaching & Confidence-Building

Over the course of the programme, individuals would be reviewed with adjustments being made if necessary. Following completion of the course, clients would be re-assessed including the improvements that had been made to reduce their social isolation. The report included a case study which demonstrated an example of a success story.

To promote the new service, a launch event was held at the DCBL Stadium in July 2025 where information was available on how local groups and individuals could refer into the service. The event was attended by a range of organisations and services, which included representatives from Halton Borough Council, the NHS and the Third Sector.

**RESOLVED:** That the Board agree to promote the new service and identify partnership working opportunities to work with the older population of Halton.

#### HWB14 HEALTHWATCH HALTON ANNUAL REPORT 2024-25

The Board received the 2024-25 Annual Report for Healthwatch Halton which highlighted key activities, themes and impact from the past year.

During the past 12 months Healthwatch Halton had spoken to over 5,900 people and delivered 276 outreach sessions. It had supported more than 16,900 people through feedback collection and signposting, which included 15,104 who received tailored information and advice. 15 reports had been published on various matters, which included GP access, pharmacy services, care homes children's accident and emergency and community diagnostics. Healthwatch Halton had also targeted support to the underserved communities such as LGBTQ+ residents, veterans, the homeless and those who were digitally

excluded. Through their input, they had improved clearer signage and letters at Whiston Hospital, improved communication at Warrington Hospital and helped to provide additional staffing in the children's accident and emergency department.

Their statutory funding for 2024-25 from Halton Borough Council totalled £131,251 which was supplemented by additional income from Integrated Care Systems funding projects of £3,472.

The report also outlined the future priorities which included:

- Access to primary care;
- Women's health and maternity services; and
- Improving quality and dignity in care homes.

RESOLVED: That the Board:

- 1) receive the report; and
- 2) continues to support Healthwatch Halton in promoting patient voice and co-production across local health and care services.

The Board gave thanks to Healthwatch Halton and the valuable work they do to support residents of the Borough and help drive future improvements across health services.

## HWB15 ONE HALTON NEIGHBOURHOOD PROGRAMME UPDATE

The Board received a report and accompanying presentation from the NHS Director – Halton which provided an update on the Neighbourhood Health Implementation Programme: Health and Social Care, and local development plans within Halton.

One Halton Partnership comprised a wide range of members, which included NHS bodies, local authority representatives from Children's Services, Adult Services and Public Health, and non-statutory bodies. The Partnership was the vehicle for delivery of national and local priorities and Halton's Joint Health and Wellbeing Strategy.

The Neighbourhood Health Model was intended to join up services in the community in a more effective way,

particularly for people with more complex health and care needs, helping children thrive and supporting adults to stay independent for longer, improve health and wellbeing, and reduce avoidable pressures on health, social care and other public services.

Neighbourhood Health had a 10 Year Health Plan priority and its ambition was to shift care from hospitals to community; move from analogue to digital; and sickness to prevention.

The presentation provided the latest overview of progress and outlined the work that had been undertaken with partners.

RESOLVED: That the report and presentation be noted.

#### HWB16 MODEL ICB UPDATE

The Board considered a report from the NHS Director – One Halton, which provided an update on the Model Integrated Care Board (ICB) Blueprint.

On 1 April 2025, Sir Jim Mackey, Chief Executive of NHS England, wrote to all ICB's and NHS Trusts to provide further detail on the Government's Reform Agenda for the NHS. The letter highlighted the significant progress made in planning for 2025/26 and outlined a move to a medium-term approach to planning, which would be shaped by a 10 year Health Plan and the outcome of the Spending Review.

In order to achieve the ambitions it was noted that:

- ICB's would need to reduce their management costs by an average of 50%;
- ICB's would need to commission and develop Neighbourhood Health Models; and
- NHS providers would need to reduce their corporate cost growth by 50% by quarter 3 of 2025/26, with the savings to be reinvested locally to enhance frontline services.

On 2 May 2025 the first draft Model ICB Blueprint was shared with all ICB's, which outlined the future role and functions of ICB's as strategic commissioners within the NHS. The Blueprint set out a number of expectations and in order to respond effectively, NHS Cheshire & Merseyside had identified a programme of work to help meet the requirements of the document. They had also established a

Transition Task and Finish Group to oversee the organisational change and duties transfer.

RESOLVED: That the report be noted.

#### HWB17 JOINT STRATEGIC NEEDS ASSESSMENT SUMMARY

Members of the Board considered a report from the Director of Public Health which provided an update on the Joint Strategic Needs Assessment (JSNA).

The Board were updated on the Joint Strategic Needs Assessment (JSNA) which analysed the health needs of the population to inform and guide commissioning of health, well-being and social care services within local authority areas. The JSNA underpinned the Health and Wellbeing Strategy and commissioning plans. The main goal of a JSNA was to assess the health needs of a local population in order to improve the physical and mental health and wellbeing of individuals and communities.

Since the first executive summary of the JSNA in 2012, the approach had continued to receive good feedback from various partnerships and stakeholders. As a consequence, the revised annual summary had used broadly the same approach to provide updated data and information since the previous version.

The report set out the key changes since the previous summary and the developments for the JSNA during 2025/26. It was noted that the process for agreeing and developing a work plan for the remainder of 2024/25 and into 2025/26 would be managed in collaboration with key stakeholders and members of the Health and Wellbeing Board.

Healthwatch Halton suggested that it would have been useful to include some real life experiences, however, the statistics were very helpful. It was confirmed that although the voices of local people were always explored when the full JSNA document was produced, consideration would be given to including them in future summaries.

Members of the Board were encouraged to share the JSNA within their respective teams.

RESOLVED: That the report be noted and the draft summary document be approved for publication.

#### HWB18 HALTON CARE HOME DEVELOPMENT GROUP

The Board considered a report which provided an update on the work and progress of the Halton Care Home Development Group over the past 18 months. It also provided an overview of forthcoming plans.

The Care Home Development Group was established to promote a collaborative, system-wide approach to enhance the care and support provided to care home residents across Halton. The groups focus was to improve standards, outcomes and experiences within the sector.

The report described the key initiatives and developments which were overseen by the group. The aim of the initiatives were to support care home staff to improve the health and wellbeing of residents.

It was noted that Millbrow Care Home received a “Good” CQC rating in the Summer and a case study outlining the journey undertaken in order to achieve this result was attached as an appendix to the report. A presentation with further examples was also delivered to the Board.

RESOLVED: That the report be noted.

#### HWB19 END OF LIFE

The Board received a report which provided an overview on the continued work regarding End of Life (EOL) services in Halton.

Halton was currently the worst performing area within Cheshire and Merseyside for EOL services. Under the direction of the One Halton Ageing Well Delivery Group, several projects were underway to develop an EOL system and meet NHS England targets relating to advance care planning, Gold Standards Framework meetings and cardiopulmonary resuscitation (CPR) decisions. A wide variety of stakeholders participate in the projects, including GP’s, Hospital Trusts, Community Services, Halton Borough Council and representatives from the Voluntary, Community, Faith and Social Enterprise Sector.

In 2024, a Locality Group completed the “Getting to outstanding” self-assessment toolkit and the findings informed the Palliative and End of Life Care Local Improvement Plan for Halton.

The report also outlined a number of areas of focus

for 2025-26 and these were set out in section 3.4 of the report. Engagement work had been undertaken with “Dying Matters” to try and change people’s opinions on death and dying and encourage them to talk to family and friends about their wishes. It was agreed that although this might be sensitive subject, it was an important matter and therefore it was suggested that a NHS marketing campaign would be helpful to get the message out to encourage people to start talking about it.

There was also some discussion regarding recent changes regarding “do not resuscitate” (DNR) orders. Key changes included making it mandatory for healthcare professionals to have honest and timely conversations with patients, improved documentation of decisions, and to ensure that policies were understood across all settings. The goal was to empower patients and their families to make informed choices about their care in difficult conversations.

RESOLVED: That the report be noted.

#### HWB20 BETTER CARE FUND PLAN 2025/26 - QUARTER 1 UPDATE

The Board received a report from the Executive Director – Adult Services, which provided an update on the Quarter 1 Better Care Fund (BCF) Plan 2025/26, following its submission to the National Better Care Fund Team.

In line with the national requirements, the quarter 1 report focussed on reporting on the spend and activity funded via the discharge funding allocated to the local authority and NHS Cheshire and Merseyside (Halton Place).

The Board noted that the schemes funded via the discharge funding were:

- Oakmeadow Intermediate Care Beds;
- Reablement Service;
- Halton Intermediate Care and Frailty Services; and
- Halton Integrated Community Equipment Service.

RESOLVED: The Board note the report.

*Meeting ended at 4.00 p.m.*