

Public Document Pack

Sefton Council 

MEETING: OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

DATE: Tuesday, 5th January 2021

TIME: 6.30 p.m.

VENUE: Remote Meeting

Member

Councillor
Cllr. Mhairi Doyle, M.B.E. (Chair)
Cllr. Diane Roscoe (Vice-Chair)
Cllr. Anthony Carr
Cllr. Linda Cluskey
Cllr. Christine Howard
Cllr. David Irving
Cllr. Terry Jones
Cllr. Greg Myers
Cllr. Dr. John Pugh
Cllr. Carran Waterfield
Brian Clark, Healthwatch
Roger Hutchings, Healthwatch

Substitute

Councillor
Cllr. Clare Carragher
Cllr. Sean Halsall
Cllr. Nina Killen
Cllr. Anne Thompson
Cllr. Michael Roche
Cllr. Pat O'Hanlon
Cllr. Tony Brough
Cllr. Paul Tweed
Cllr. Iain Brodie - Browne
Cllr. Veronica Webster

COMMITTEE OFFICER: Debbie Campbell, Senior Democratic Services Officer
Telephone: 0151 934 2254
Fax: 0151 934 2034
E-mail: debbie.campbell@sefton.gov.uk

If you have any special needs that may require arrangements to facilitate your attendance at this meeting, please contact the Committee Officer named above, who will endeavour to assist.

We endeavour to provide a reasonable number of full agendas, including reports at the meeting. If you wish to ensure that you have a copy to refer to at the meeting, please can you print off your own copy of the agenda pack prior to the meeting.

AGENDA

1. Apologies for Absence

2. Declarations of Interest

Members are requested at a meeting where a disclosable pecuniary interest or personal interest arises, which is not already included in their Register of Members' Interests, to declare any interests that relate to an item on the agenda.

Where a Member discloses a Disclosable Pecuniary Interest, he/she must withdraw from the meeting, by switching their camera and microphone off, during the whole consideration of any item of business in which he/she has an interest, except where he/she is permitted to remain as a result of a grant of a dispensation.

Where a Member discloses a personal interest he/she must seek advice from the Monitoring Officer or staff member representing the Monitoring Officer, by 12 Noon the day before the meeting, to determine whether the Member should withdraw from the meeting during the whole consideration of any item of business in which he/she has an interest or whether the Member can remain in the meeting or remain in the meeting and vote on the relevant decision.

3. Minutes of the Previous Meeting (Pages 5 - 12)

Minutes of the meeting held on 13 October 2020.

4. Care Homes in Sefton (Pages 13 - 20)

The Executive Director of Adult Social Care and Health to give the attached presentation.

5. Sefton Clinical Commissioning Groups - Update Report (Pages 21 - 24)

Joint report of NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group.

6. Sefton Clinical Commissioning Groups - Health Provider Performance Dashboard (Pages 25 - 32)

Joint report of NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group.

7. Cabinet Member Reports (Pages 33 - 54)

Report of the Chief Legal and Democratic Officer.

- 8. Executive/Scrutiny Protocol** (Pages 55 - 70)
Report of the Chief Legal and Democratic Officer
- 9. Work Programme Key Decision Forward Plan** (Pages 71 - 90)
Report of the Chief Legal and Democratic Officer.

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THIS SET OF MINUTES IS NOT SUBJECT TO "CALL IN".

Overview
& Scrutiny



OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

REMOTE MEETING HELD ON
TUESDAY, 13TH OCTOBER 2020

PRESENT: Councillor Doyle (in the Chair)
Councillor Roscoe (Vice-Chair)
Councillors Cluskey, Howard, Irving, Jones, Myers,
Pugh and Waterfield

ALSO PRESENT: Mr. B. Clark, Healthwatch Representative
Mr. R. Hutchings, Healthwatch Representative
Councillor Cummins, Cabinet Member – Adult Social
Care
Councillor Moncur, Cabinet Member – Health and
Wellbeing

8. APOLOGIES FOR ABSENCE

No apologies for absence were received.

9. DECLARATIONS OF INTEREST

In accordance with Paragraph 9 of the Council's Code of Conduct, the following declarations of personal interest were made, and the Members concerned remained in the meeting during the consideration of the items:

Member	Minute No.	Nature of Interest
Councillor Doyle	Minute No. 12 – Winter Plan	Her daughter is the population health consultant working for Graphnet on the CIPHA project;
Councillor Roscoe	Minute No. 11 – Integrated Care Teams	She is an Administrative and Support Officer for the British Lung Foundation.

10. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

That the Minutes of the meeting held on 1 September 2020, be confirmed
as a correct record.

11. INTEGRATED CARE TEAMS

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The Committee received a presentation from Pat McGuinness, Deputy Director of Integration, Mersey Care NHS Foundation Trust; and Alisa Nile, Interim Head of Service, Sefton Adult Social Care, on Integrated Care Teams that consolidated existing resources. The presentation outlined the following:

- What are Integrated Care Teams?
- Developing Team 100 for each Network.
- Where we left off...
- Timeline of Covid Drivers and Response.
- Integrated Care Teams (ICTs).
- Integrated Care Teams – Learning.
- Case Studies.
- Care Homes Update – Supporting Enhanced Care in Care Homes (EHCH).
- EHCH Model Summary.
- Care Home Plan on a Page Covid-19 and Beyond – Liverpool and Sefton Model.
- Context – Meeting NHS England Requirements.
- Personalised Care Planning.
- Weekly Check-ins - Progress and Learning.
- Dashboard Development.
- CHAMP/EHCH Next Steps.
- Our Aspiration by Working Together.
- Integrated Mersey Palliative Care Team (IMPACT) Update.
- IMPACT Summary Model.
- IMPACT Implementation Timeline – Next Steps.
- Hubs and Referrals.

A Member of the Committee asked questions/raised matters on the following issues:

- How to identify different gaps in different areas and how to plug them. Further information could be provided to the Member concerned.

RESOLVED: That

- (1) the presentation be noted;
- (2) Pat McGuinness and Alisa Nile be thanked for their informative presentation;
- (3) the Chief Officer of the Sefton Clinical Commissioning Groups be requested to provide information on addressing gaps to the Member concerned.

12. WINTER PLAN

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OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 13TH OCTOBER, 2020

The Committee considered two documents submitted by the Executive Director of Adult Social Care and Health on the Southport and Ormskirk System Winter Plan 2020/21 and the North Mersey System Winter Plan 2020-2021. The Winter Plans had been developed collaboratively between a number of different health partner organisations, with contributions from Adult Social Care providers. The Plans were a response to unplanned care over the winter period and were dynamic in nature. Contents included the evidence base used; the additional challenges presented by the Covid-19 pandemic; together with risks, including the risks and impact of Covid-19. Monitoring of the performance and impact of the Plans would take place through the relevant A&E Delivery Boards. Additional beds and capacity had been built into the Winter Plans and it was anticipated that local pressures were likely.

Members of the Committee asked questions/raised matters on the following issues:

- The current position regarding initiatives/schemes intended to provide community-based services.
- Support in place for staff and staffing levels for front-line services.
- Clarification of the Paediatric Virtual Emergency Department (ED). Further information could be provided.
- Quality assurance concerns regarding training of call handlers on the NHS 111 First initiative.
- Concerns that older people would not be able to access digital support services.
- Waiting times for diagnostic and elective care.
- Capacity and access to mental health services, together with the need to consider innovative solutions.
- The range of mental health support available, including services provided by the voluntary sector.

RESOLVED: That

- (1) the documents on the Winter Plan, together with the information provided, be noted; and
- (2) the Chief Officer for the Sefton Clinical Commissioning Groups be requested to explore the possibility of providing a briefing session on the Paediatric Virtual Emergency Department (ED) to Members of the Committee.

13. ADULT SOCIAL CARE VISION

The Committee considered the report of the Executive Director of Adult Social Care and Health presenting the draft Adult Social Care Vision document for review and comment, as part of the consultation process. The document would be a key document underpinning the delivery of Social Care for Adults in Sefton over the following five-year period and the report indicated that it should be read alongside the draft Market Position

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Statement for Adult Social Care. The final version of the document would be submitted to both the Health and Wellbeing Board and the Cabinet for approval.

The report indicated that the Adult Social Care Vision document would assist the Council in continuing to meet the demand for care and support in the most effective and efficient way; together with meeting the needs and achieving the outcomes of the most vulnerable residents. The report set out details of the development of the draft Adult Social Care Vision document. Both the Draft Adult Social Care Vision and the Draft Adult Social Care Market Position Statement were attached to the report.

A Member of the Committee raised matters on the following issue:

- Respite care available for carers during the current Covid-19 pandemic.

RESOLVED: That

- (1) the draft Adult Social Care Vision document be noted; and
- (2) the final approval process for the document be approved

14. CENTRE FOR PUBLIC SCRUTINY - 10 QUESTIONS TO ASK IF YOU ARE SCRUTINISING CLIMATE CHANGE

The Committee considered the report of the Chief Legal and Democratic Officer providing information contained within a document produced by the Centre for Public Scrutiny (CfPS) entitled “10 questions to ask if you are scrutinising climate change”. The report set out the contents of the document, together with the 10 questions posed, indicating that the Overview and Scrutiny Management Board had requested the CfPS document to be circulated to all Overview and Scrutiny Committee Members for information.

RESOLVED:

That the Centre for Public Scrutiny document entitled “10 questions to ask if you are scrutinising climate change”, be noted.

15. CLIMATE EMERGENCY PROGRESS REPORT

Further to Minute No. 54 of 25 February 2020, the Committee received a presentation from Stephanie Jukes, the Section Manager Energy and Environmental Management, Corporate Resources; and Julia Thorpe, Project Officer – Climate and Environment, reporting on Climate Emergency progress by the Council. The presentation outlined the following:

- Purpose of the presentation.
- Background – Climate Emergency.

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- Carbon footprint for Sefton.
- Strategy and Implementation Plan.
- Implementation Plan - Phase 1.
- How will progress be monitored?
- Communications Plan.
- Climate Assembly UK.
- Impact of the Covid-19 pandemic and lockdown restrictions.
- Summary and next steps.
- Contact details.

Members of the Committee asked questions/raised matters on the following issues:

- Engagement with citizens and work with the Liverpool City Region Combined Authority.
- the possibility of extending the anti-engine-idling campaign to level crossings within the Borough. Merseytravel could be approached regarding this matter.

RESOLVED: That

- (1) the presentation be noted;
- (2) Stephanie Jukes and Julia Thorpe be thanked for their informative presentation; and
- (3) the Section Manager Energy and Environmental Management, Corporate Resources, be requested to approach Merseytravel regarding the possibility of extending the anti-engine-idling campaign to level crossings within the Borough.

16. SEFTON CLINICAL COMMISSIONING GROUPS - UPDATE REPORT

The Committee considered the joint update report of the NHS South Sefton Clinical Commissioning Group and the NHS Southport and Formby Clinical Commissioning Group (CCG), providing an update about the work of the Clinical Commissioning Groups (CCGs). The report outlined details of the following:

- Covid-19 and the phase 3 response.
- Winter preparedness.
- Annual flu vaccination campaign.
- Community services in Southport and Formby.
- Talking therapies in Sefton.
- GP out of hours service.
- Primary care networks.
- Successful funding bid for Mental Health Support Teams in Sefton
- Governing Body meetings.

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Further to Minute No. 6 (2) of 1 September 2020, the Chief Officer, Sefton Clinical Commissioning Groups, reported on progress regarding the merger of CCGs across the Cheshire and Merseyside Healthcare partnership area. She indicated that that a joint committee would be established by 1 April 2021 where there would be delegated decision making; that there would be one CCG across the partnership area by April 2022; and that a roadmap setting out the strategy to achieve the merger was currently being developed and should be available by the end of October 2020.

RESOLVED:

That the update report submitted by the Clinical Commissioning Groups, together with the information provided at the meeting, be received.

17. SEFTON CLINICAL COMMISSIONING GROUPS - HEALTH PROVIDER PERFORMANCE DASHBOARD

The Committee considered the joint report of NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group (CCG), that provided data on key performance areas, together with responses for the Friends and Family Test for both Southport and Ormskirk Hospital NHS Trust and Aintree University Hospital NHS Foundation Trust. Information on the monitoring of the new 7-day GP extended access scheme for both CCGs was included within the data.

A Member of the Committee raised matters on the following issue:

- Clarity regarding the information provided on the 7-day GP Extended Access scheme. Updated information would be requested.

RESOLVED: That

- (1) the information on Health Provider Performance be noted.
- (2) the Chief Officer of the Sefton Clinical Commissioning Groups be requested to obtain updated data regarding the information provided on the 7-day GP Extended Access scheme.

18. DRAFT EXECUTIVE/SCRUTINY PROTOCOL

Further to Minute No. 27 (3) of the meeting of the Cabinet held on 30 July 2020, the Committee considered the report of the Chief Legal and Democratic Officer presenting a draft Executive/Scrutiny Protocol to the Committee for consideration and comment. The development of an Executive/Scrutiny Protocol aimed to improve the quality of relationships between Cabinet and Scrutiny Members; clarify respective roles; and contribute towards more effective scrutiny in Sefton. The draft Protocol was attached to the report.

RESOLVED:

That the draft Executive/Scrutiny Protocol, as attached to the report, be endorsed and submitted to the Cabinet for approval, in due course.

19. CABINET MEMBER REPORTS

The Committee considered the report of the Chief Legal and Democratic Officer submitting the most recent update reports from the Cabinet Member – Adult Social Care, and the Cabinet Member – Health and Wellbeing, whose portfolios fell within the remit of the Committee. Councillors Cummins and Moncur were present at the meeting to respond to any questions or issues.

RESOLVED:

That the update reports from the Cabinet Member – Adult Social Care and the Cabinet Member – Health and Wellbeing be noted.

20. WORK PROGRAMME KEY DECISION FORWARD PLAN

The Committee considered the report of the Chief Legal and Democratic Officer reviewing the Committee's Work Programme for the remainder of the Municipal Year 2020/21; reporting on progress of the scrutiny review identified by the Committee; identifying any items for pre-scrutiny by the Committee from the latest Key Decision Forward Plan; receiving an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; noting the outcome of the informal briefing session for Members of the Committee regarding NHS 111 First.; and noting the intention to hold a virtual visit organised by Mersey Care.

The Work Programme for 2020/21 was set out at Appendix A to the report, to be considered, along with any additional items to be included and agreed.

There was just one Decision within the latest Key Decision Forward Plan, attached to the report at Appendix B, that fell under this Committee's remit, and the Committee was invited to consider items for pre-scrutiny.

The report outlined recent activity undertaken by the Liverpool City Region Combined Authority Overview and Scrutiny Committee; indicated that an informal briefing session for Members of the Committee regarding NHS 111 First had taken place; and indicated that a virtual tour of a Mersey Care NHS Foundation Trust facility for Members of the Committee was likely to be organised.

RESOLVED: That

- (1) the Work Programme for 2020/21, as set out in Appendix A to the report, be agreed;

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- (2) the progress made on the scrutiny review agreed by the Committee be noted;
- (3) the contents of the Key Decision Forward Plan for the period 1 November 2020 – 29 February 2021, be noted.
- (4) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted;
- (5) the outcome of the informal briefing session for Members of the Committee regarding NHS 111 First, be noted; and
- (6) the intention to hold a virtual visit organised by Mersey Care, be noted.

Care Homes Sefton



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Background

131 CQC registered homes across Sefton

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	Residential Beds	Nursing Beds
North	1460	936
South	731	590

	Residential Homes	Nursing Homes	LD
North	1460	936	
South	731	590	

LD 28, Residential 65, Nursing 31, R/N 7

CCGs typically commission around 500 beds, Local Authority around 1,500. Remaining utilised beds are Private funded and other CCGs / LA funded.



Support to Care Homes

- Joint working between CCG's/LA
- Capacity Tracker/Shared/NHS Net Account
- Equipment
- Smart Phones with ACCuREX and Attend Anywhere
- Weekly 'check in' by named HP/MDT as required
- Aligned with PCN's
- Education & Training (PPE/Equipment) LA Web page/Zoom/6 steps
- Fortnightly strategic meetings
- Regular bulleting's
- Joint weekly letter from LA/CCG's
- Medication supply to care homes including EOL medication
- Updated Guidance i.e. Visiting
- Supported by IPC/PH



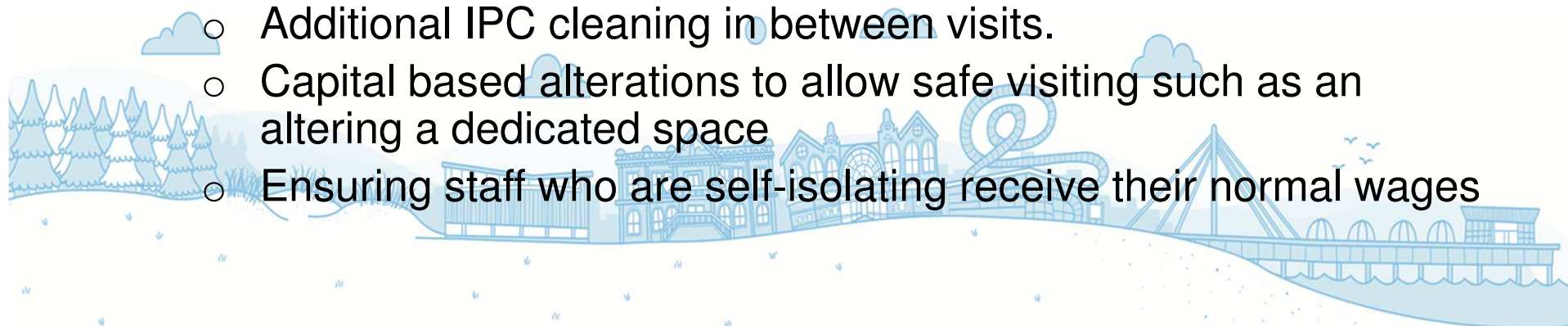
Cont..

- Dedicated sessions with professionals on safely facilitating visiting have been held and support to maintain social contact through partnership working with the community and voluntary sector have been facilitated
- Care Homes are supported with provider forums and weekly updates on guidance and training opportunities, this has included support around maintaining the health and wellbeing of residents and wrap around support from Health and Social Care professionals
- Additional training offers have also been provided to care homes to ensure that their staff continues to meet the needs of their residents.



Cont...

- Additional financial support to care homes which can be used to meet additional costs (all placement types, not just those commissioned by CCGs and LA) and work such as supporting safe visiting arrangements
- Emergency supplies of PPE
- Capital funding programme – to support care homes with initiatives to make homes more dementia friendly
- Allocations from the national Infection Control Fund
 - support safe visiting
 - Dedicated staff to support and facilitate visits.
 - Additional IPC cleaning in between visits.
 - Capital based alterations to allow safe visiting such as an altering a dedicated space
 - Ensuring staff who are self-isolating receive their normal wages



Cont....

- Implementation of actions arising from End of Life, Intermediate Care and Care Home Strategies (once strategies have been ratified)
 - **End of Life Strategy** – (joint CCG/LA) aim - identify patients, development of personalised care plans, training & education, fully integration
 - **Intermediate Care Strategy** – aim of increasing independence and supporting more people in their own homes, expansion of community based services
 - **Care Home Strategy** – joint CCGs and LA approach to future commissioning, market management, quality and compliance work, engagement.



Future Plans

- **Workshops with S&O Trust/CH/LA/CCG**
 - Discharge
 - OOH
 - DNACPR
- 72 hour Rapid Response Scheme – linked to escalation policy, exploration of dedicated staff team to go into homes to provide additional staffing support when capacity issues arise
- Roll out of Safe Steps
- Continue with the roll out of RESTORE2
- My Home Life – Care Home Leadership Programme
- EMIS – pilot in two Sefton homes



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Scrutiny Briefing Report to: Overview and Scrutiny Committee
(Adult Social Care and Health)

Date of Meeting: 5 January 2021

Subject: Update Report of Fiona Taylor, Chief Officer

Organisation: NHS South Sefton CCG and NHS Southport and Formby CCG

Contact Officer: Lyn Cooke

Tel: 0151 317 8456

Email: lyn.cooke@southseftonccg.nhs.uk

Purpose/Summary

To provide Members of the Committee with an update about the work of NHS South Sefton CCG and NHS Southport and Formby CCG.

Recommendation(s)

Members of the Overview and Scrutiny Committee (Adult Social Care and Health) are requested to receive this report.

Update for Overview and Scrutiny Committee (Adult Social Care) January 2021

If you would like more information about any of the items contained in this update, if you have any questions about local health services, or any particular issues you would like to raise, please call 0151 317 8456.

Community based COVID-19 vaccination programme

Sefton's community based COVID-19 immunisation programme, run by local GP practices began on Tuesday 15 December as part of the biggest vaccination programme in NHS history. Nurses, paramedics, pharmacists, GPs and other NHS staff from across Sefton have been working together to vaccinate those aged 80 and over, identified as a priority group. Primary care teams worked rapidly to set up local vaccination centres and put in place safe processes to meet the tough logistical challenges of offering the Pfizer/BioNTech vaccination. GP practices have been contacting their eligible patients when it is their turn to receive the vaccine. Sefton's community COVID-19 vaccination programme is being run by groups of practices, known as primary care networks, working together with NHS Southport and Formby CCG and NHS South Sefton CCG. Community based primary care centres are in addition to hospital hubs, which began vaccinating patients on Tuesday 8 December. Residents are reminded that the NHS will contact people in the priority groups when it is their turn to receive the vaccine, and they should not drop in to community centres or contact their GP practice or other healthcare team about receiving a vaccination. For more information about the COVID-19 vaccine, including answers to a range of frequently asked questions, go to www.nhs.uk/CovidVaccine

Medicines management team highlighted in national awards

Chief officer, Fiona Taylor will be representing the work of the CCGs medicines management team in the national finals of this year's Parliamentary Awards, after being named a regional winner following nomination by Southport MP, Damien Moore. Fiona has been nominated for the leadership she has shown in fostering innovative and patient-centred work around medicines management. This has been particularly significant in the response to the coronavirus pandemic, which has seen the medicines team providing direct support to some of Sefton's most vulnerable patients, as well as care homes, GP practices and community pharmacies. This work has gained national and regional recognition and some of the best practice developed by the Sefton team to improve patient care has been adopted in other areas. The work of the CCGs medicines management team was also named a finalist in the national PCPA Excellence in General Practice Pharmacy Awards in late November 2020.

Other local finalists in the Parliamentary Awards include MerseyCare NHS Foundation Trust's Life Rooms and the Paediatric Diabetes Team at Southport and Ormskirk Hospital Trust. National winners are expected to be announced in July 2021.

Changing commissioning landscape

Work is now underway to develop a roadmap that establishes the mechanism for joint decision making for CCG commissioning across the Cheshire & Merseyside Health Care Partnership (HCP). This work responds to the NHSE direction to develop one CCG per Integrated Care System, which reflects local work with partners through the system Sefton2gether plan for health and care to strengthen our collective work in Sefton. The CCGs' two chairs and chief officer are actively involved in the working group of Cheshire and Merseyside CCGs, alongside the HCP chief officer Jackie Bene to co-design the potential options to achieve the changes by April 2022. You can read more about national proposals to strengthen integrated working across health and care from the NHS England [website](#).

Talking Matters Sefton

On 1 January 2021 Access Sefton – Sefton's Improving Access to Psychological Therapies (IAPT) service – became Talking Matters Sefton. The new name for IAPT support in Sefton reflects the change in the service provider to Mental Health Matters (MHM), which took on the running of the IAPT service from the start of the year following a re-procurement exercise carried out ahead of the end date of the former contract. Talking Matters Sefton is designed to help anyone aged over 16 to deal with common mental health difficulties. All existing service users have been informed of this change and can expect continuity of support. The contact number for the service (0300 303 2708) remains unchanged. For more information and to self-refer online from 1 January 2021, please visit www.mhm.org.uk/talking-matters-sefton

Re-procurement of community services draws to a close

NHS Southport and Formby's re-procurement of community services continued on track through the end of 2020. Community health services encompass a range of care and support from blood testing to district nursing. The CCG launched the re-tendering exercise ahead of the current contract with Lancashire and South Cumbria NHS Foundation Trust coming to an end. The trust has indicated it will not be bidding for the new contract. All NHS contracts are awarded for a specified period of time to ensure that services are continually reviewed and continually provide assurance to commissioners that healthcare is the best it can be for the populations they serve. Importantly, there will be no immediate changes to services for patients as a result of the re-procurement. Over time once the new provider is in place, there will be discussions with local partners, the public and the new provider about how services will need to adapt and evolve to best meet the needs of the people of Southport and Formby in line with our Sefton2gether strategy for more integrated health and care. The re-procurement process was expected to conclude by the end of 2020, with a new provider identified to take on the running of services from 1 May 2021.

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Governing Body meetings

The first 2021 Governing Body meetings for Sefton's two CCGs take place in early February. These two meetings continue to be held virtually in line with Covid-19 safe restrictions as the pandemic continues. The meetings will be recorded and available for view later from each CCG website. Although members of the public are not able to attend, questions can be submitted in advance and will be addressed by the governing bodies at the start of the formal session, as they usually would and the responses published after the meetings in the note pack. The meetings take place as follows:

- NHS Southport and Formby CCG - Wednesday 5 February
- NHS South Sefton CCG - Thursday 6 February

Any questions should be submitted by midday on the day of the meetings using the following emails southportandformby.ccg@nhs.net or southsefton.ccg@nhs.net. You can find out more information about governing bodies and view meeting papers from each CCG website using the links at the end of this briefing.

Visit the CCGs' websites for more about their work www.southseftonccg.nhs.uk or www.southportandformbyccg.nhs.uk, follow them on Twitter [@NHSSSCCG](https://twitter.com/NHSSSCCG) or [@NHSSFCCG](https://twitter.com/NHSSFCCG) or see a range of short films on YouTube for [NHSSSCCG](https://www.youtube.com/channel/UC...) or [NHS SFCCG](https://www.youtube.com/channel/UC...)

Main Provider Performance October 2020

The following slides present performance against key strategic, NHS constitution, quality and safety indicators for the main providers the two CCGs commission from.

Time periods vary for the indicators presented, and are indicated in the tables.

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NHS Southport & Formby CCG

Key Performance Area	Time Period	Performance	Target	Trend
A&E 4hour Waits, All Types (Southport & Ormskirk, cumulative YTD)	Oct-20	80.8%	93.0% (Improvement Plan)	
Cancer 2 Week Waits (Southport & Ormskirk, cumulative YTD)	Oct-20	98.6%	93%	
Cancer 62 Day - Screening (Southport & Ormskirk Cumulative YTD)	Oct-20	0.0%	90%	
Cancer 31 Day (Southport & Ormskirk, cumulative YTD)	Oct-20	96.9%	96%	
RTT -18 Weeks Incomplete (Southport & Ormskirk, in month snapshot position)	Oct-20	57.6%	92%	
C.Difficile (Southport & Ormskirk, cumulative YTD)	Oct-20	16	9 YTD 16 (year end)	
MRSA (Southport & Ormskirk, cumulative YTD)	Oct-20	1	0	
Stroke (80% of Pts spending 90% of time on Stroke Unit, Southport & Ormskirk, monthly snapshot position)	Oct-20	27.8%	80%	
% TIA assessed and treated within 24 hours (Southport & Ormskirk, monthly snapshot position)	Oct-20	0.0%	60%	
Ambulance Category 1 Mean 7 minute response time (CCG LEVEL)	Oct-20	00:08:13	<=7 Minutes	
Mental Health: Care Programme Approach (Quarterly)	Qtr 2 Oct-20	95.9%	95%	
Mental Health: IAPT 16.8% Access (CCG LEVEL)	Oct-20	0.88%	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (CCG LEVEL)	Oct-20	50.9%	50%	
Mental Health: IAPT waiting <6 weeks (Quarterly)	Qtr 2 Oct-20	98.1%	75%	
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 2 Oct-20	99.1%	90%	

Southport & Ormskirk Hospital NHS Trust

Friends & Family

*Friends & Family Data has not been available since February 2020

Measure	Time Period	Southport & Ormskirk	England Average	Trend
Inpatient – response	Feb-20	17.4%	25.0%	
Inpatient Recommended	Feb-20	95.0%	96.0%	
Inpatient Not Recommended	Feb-20	2.0%	2.0%	
A&E – response	Feb-20	24.9%	12.2%	
A&E Recommended	Feb-20	90.0%	84.0%	
A&E Not Recommended	Feb-20	6.0%	10.0%	



NHS Southport & Formby CCG

7 Day GP Extended Access

*Data is missing due to COVID-19

South Sefton	Appointments Available	Booked	DNA	Utilisation
Apr-20	1519	215	5	13.82%
		14.2%	2.3%	
May-20	1564	391	5	24.68%
		25.0%	1.3%	
Jun-20				
Jul-20				
Aug-20				
Sep-20				
Oct-20	1885	1510	130	73.21%
		80.1%	8.6%	

Month	GP	Advanced Nurse Practitioner	Practice Nurse	Physio
Apr-20	65	42	4	0
	30.23%	19.53%	1.86%	0.00%
May-20	82	63	26	0
	20.97%	16.11%	6.65%	0.00%
Jun-20				
Jul-20				
Aug-20				
Sep-20				
Oct-20	375	299	178	262
	24.83%	19.80%	11.79%	17.35%



NHS South Sefton CCG

Key Performance Area	Time Period	Performance	Target	Trend
A&E 4hour Waits, All Types (LUHFT)	Oct-20	77.4%	88% (Improvement Plan)	
Cancer 2 Week Waits (LUHFT)	Oct-20	93.2%	93%	
Cancer 62 Day - Screening (LUHFT)	Oct-20	38.5%	90%	
Cancer 31 Day (LUHFT)	Oct-20	93.8%	96%	
RTT -18 Weeks Incomplete (LUHFT)	Oct-20	61.9%	92%	
C.Difficile (LUHFT)	Oct-20	61	14 YTD 56 (year end)	
MRSA (LUHFT)	Oct-20	3	0	
Stroke (80% of Pts spending 90% of time on Stroke Unit) (LUHFT)	Oct-20		80%	
% TIA assessed and treated within 24 hours (LUHFT)	Oct-20	80.4%	60%	
Ambulance Category 1 Mean 7 minute response time (CCG LEVEL)	Oct-20	00:07:38	<=7 Minutes	
Mental Health: Care Programme Approach (Quarterly)	Qtr 2 Oct-20	95.9%	95%	
Mental Health: IAPT 16.8% Access (CCG LEVEL)	Oct-20	1.03%	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (CCG LEVEL)	Oct-20	46.6%	50%	
Mental Health: IAPT waiting <6 weeks (Quarterly)	Qtr 2 Oct-20	95.7%	75%	
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 2 Oct-20	100.0%	90%	

Liverpool University Hospital site

Friends and Family

*Friends & Family Data has not been available since February 2020

Measure	Time Period	LUHFT	England Average	Trend
Inpatient – response	Feb-20	19.3%	25.0%	
Inpatient Recommended	Feb-20	94.0%	96.0%	
Inpatient Not Recommended	Feb-20	4.0%	2.0%	
A&E – response	Feb-20	17.8%	12.2%	
A&E Recommended	Feb-20	88.0%	84.0%	
A&E Not Recommended	Feb-20	10.0%	10.0%	



NHS South Sefton CCG 7 Day GP Extended Access

*Data is missing due to COVID-19

Southport & Formby	Appointments Available	Booked	DNA	Utilisation
Apr-20				
May-20				
Jun-20	480	296 61.67%	24 8.1%	56.67%
Jul-20	920	587 63.80%	36 6.1%	59.89%
Aug-20	1345	888 66.02%	44 5.0%	62.75%
Sep-20	1314	833 63.39%	33 4.0%	60.88%

Month	GP	Advanced Nurse Practitioner	Practice Nurse	Health Care Assistant	Physio
Apr-20					
May-20					205
Jun-20	133 27.7%	133 27.7%	32 6.7%	0 0.0%	183 38.1%
Jul-20	301 32.7%	292 31.7%	63 6.8%	63 6.8%	70 7.6%
Aug-20	457 34.0%	381 28.3%	131 9.7%	142 10.6%	234 17.4%
Sep-20	428 32.6%	391 29.8%	117 8.9%	137 10.4%	241 18.3%



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Agenda Item 7

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	5 January 2020
Subject:	Cabinet Member Reports – October - December 2020		
Report of:	Chief Legal and Democratic Officer	Wards Affected:	All
Cabinet Portfolio:	Adult Social Care Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

To submit the Cabinet Member – Adult Social Care and the Cabinet Member - Health and Wellbeing reports relating to the remit of the Overview and Scrutiny Committee.

Recommendation:

That the Cabinet Member - Adult Social Care and the Cabinet Member - Health and Wellbeing reports relating to the remit of the Overview and Scrutiny Committee be noted.

Reasons for the Recommendation:

In order to keep Overview and Scrutiny Members informed, the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.

Alternative Options Considered and Rejected:

No alternative options have been considered because the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.

What will it cost and how will it be financed?

Any financial implications associated with the Cabinet Member reports which are referred to in this update are contained within the respective reports.

Agenda Item 7

(A) **Revenue Costs** – see above

(B) **Capital Costs** – see above

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
Legal Implications:
Equality Implications: There are no equality implications.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: None directly applicable to this report. The Cabinet Member updates provides information on activity within Councillor Cummins' and Councillor Moncur's portfolios during the previous three-month period. Any reports relevant to their portfolios considered by the Cabinet, Cabinet Member or Committees during this period would contain information as to how such reports contributed to the Council's Core Purpose.
Facilitate confident and resilient communities: As above
Commission, broker and provide core services: As above
Place – leadership and influencer: As above
Drivers of change and reform: As above
Facilitate sustainable economic prosperity: As above
Greater income for social investment: As above
Cleaner Greener: As above

What consultations have taken place on the proposals and when?

(A) **Internal Consultations**

The Cabinet Member Update Reports are not subject to FD/LD consultation. Any specific financial and legal implications associated with any subsequent reports arising from the attached Cabinet Member update reports will be included in those reports as appropriate

(B) External Consultations

Not applicable

Implementation Date for the Decision

Immediately following the Committee meeting.

Contact Officer:	Debbie Campbell
Telephone Number:	0151 934 2254
Email Address:	debbie.campbell@sefton.gov.uk

Appendices:

The following appendices are attached to this report:

Appendix A - Cabinet Member - Adult Social Care - update report

Appendix B - Cabinet Member – Health and Wellbeing – update report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1 In order to keep Overview and Scrutiny Members informed, the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.
- 1.2 Attached to this report, for information, are the most recent Cabinet Member reports for the Adult Social Care and Health and Wellbeing portfolios.

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CABINET MEMBER UPDATE REPORT

**Overview and Scrutiny Committee (Adult Social Care and Health)
5th January 2021**

Councillor	Portfolio	Period of Report
Paul Cummins	Adult Social Care	December 2020

1. Care Homes and Commissioning

We continue to receive positive feedback about the weekly engagement sessions with Sefton Care Providers, and our improved relationship will continue to influence the ongoing development of a robust integrated Care Home Strategy and ongoing fee setting process.

There is significant ongoing discussion nationally, regionally and locally on the roll out of Lateral Flow Testing in care homes to support visiting, national guidance was released on the 1st December, and the local response to this is still being formulated at this time. This is a difficult area to navigate with our care homes and ongoing support and guidance is being given to homes, as well as the development of a position that looks to support locally where we can, but also balances the care homes' ability to manage this process effectively and safely. The care homes were issued guidance on the 27th November reflecting North West Public Health England guidance to homes, which reflected that the guidance requires care homes to develop a visiting policy which will facilitate a limited amount of visiting for care home residents, wherever it is possible to do so in a risk managed way. Care home visiting policies should clearly set out how staff, residents and visitors will be informed of any changes to visiting at the care home. The letter set out criteria to be met before the risk assessed consideration of visit is made. This includes:

- No active COVID-19 outbreak in the care home
- No more than a single suspected / confirmed case in staff or residents (subject to infection prevention and control risk assessment)
- No staffing shortage, outstanding safeguarding concerns or any other concerns which would compromise the care home's ability to conduct safe visiting.
- No concern in relation to residents' welfare - this includes completing, reviewing and updating: -
 - a risk assessment for visiting assessments of individual resident needs and circumstances to include and ethical implications, ensuring that the residents are treated with respect so that their human rights, personal choices, safety and dignity are upheld;
 - no outstanding care home infection prevention and control concerns or issues.

- All safeguards, infection prevention and control and visiting policies are in place, including clear criteria for suspending visits immediately, for example if more than one staff/resident are suspected of having COVID-19.

We are working with care homes to develop a best practice example policy and to provide further training as required.

Vaccination Update

The Care Home Cell has commenced supporting care homes with a staff and resident vaccination programme. There are logistical issues to overcome, such as ensuring care home staff can access Vaccination Hubs which are being established. This is a very positive development, although subject to more detailed planning.

2. Safeguarding through Covid

Ensuring that we safeguard Sefton people through the pandemic has meant that we have had to develop new ways of working. In practical terms, this has meant adopting virtual platforms for work such as strategy meetings with partners, including the Care Quality Commission (CQC) and CCGs.

The potential to visit care settings has been disrupted, but staff have ensured, with diligent use of Personal Protective Equipment (PPE), that we have continued to achieve an 'eyes-on' ability.

This ability has been vital in supporting the CQC Emergency Support Framework. Whilst CQC continue to inspect where they see evidence of risk of harm, deliberate abuse, systematic neglect or a significant breakdown in leadership, their inspections are more targeted in approach. So, partners have pulled together to ensure we maintain vigilance and share intelligence.

Safeguarding has developed strong new partnerships with Public Health, and has played an intrinsic role in ensuring that care settings have adhered to infection control, and moreover has kept vulnerable people and their families at the centre of Covid responses. In addition to new and improved partnership working, there has been commitment of staff to 'business as usual', as much as practically possible with some staff undertaking alternative duties to ensure that vulnerable people were safe and reassured. Often this took the form of well-being phone contacts.

As we entered 'lockdown', there was a reduction in community referrals, but following a period of reduced contacts and formal safeguarding cases undertaken during the peak 'Covid' period of April/May, referrals and cases have returned to 'normal' levels.

Although there was uncertainty on how a 'second wave' would impact on demand, to date this has been manageable, with no significant increase in referrals noted and given that care homes were prepared given the significant improvements in process and practice in terms of infection control. This has enabled the flow of referrals to be addressed accordingly.

Sefton have participated in the optional production of data to the Local Government Association (LGA) looking at referrals/conversion to s42 and outcomes during the pandemic, and will receive feedback as to the national picture.

(Please see appended Safeguarding Dashboard)

Update on National Safeguarding Adults Week – November

The theme of Diversity was therefore adopted for Sefton’s Adult Safeguarding Week, under the umbrella of Merseyside Safeguarding Adults Board (MSAB).

A pledge was recorded by key personnel across organisations, and this was then shown throughout the week alongside other “Sound Bites” on various aspects of diversity engaging with a range of people.

3. Adult Social Care Budget

The revenue budget position is currently forecasting an overall deficit of £0.657M as at October 2010, however, this position is due to the additional impact of Covid 19 and is anticipated that it would be mitigated by Covid 19 funding made available to Sefton. This forecast includes an assumption that the efficiency programme will deliver £3.3M, and that a level of reimbursement from Health for Covid related expenditure which has been maintained at £1.65M until a reconciliation has been undertaken.

As Central Government have now announced the increase to the National Living Wage, work on proposals for **2021/22 fee increases** can now commence, with a view to consulting with Providers in a timely manner to then set fees prior to April 2021.

For the **Infection Control Fund**, a paper will be submitted to January 2021 Cabinet on the use of the remaining 20% of the fund. Early proposals are that further support to care homes be made to facilitate the implementation of the Lateral Flow Testing of visitors etc.

4. Challenges for Care Homes

There are significant voids in homes across the Borough, but an improving picture from nearly 700 at its peak. Providers are raising the issue of the lack of referrals, including those from ‘private’ residents. This issue is mirrored across the region and at national level, and we are anticipating that some care homes will close as a result of being unable to address the number of vacancies. Pre-Covid Sefton had an oversupply of care home beds compared to other similar Councils, and so we will be working with care homes to address viability issues in the New Year.

In order to respond to the viability challenge, and also to set out plans to support the quality in our care homes, a Sefton Care Homes Strategy has been developed, and will be launched in the New Year. It will address the challenges faced by our care homes, but also how we want the market to operate in the future to best meet needs, and further integration with Health to manage the market jointly. Ongoing transparent communication and engagement with providers will also be a key element of the strategy.

We launched a programme of Capital Care Home Grants on the 23rd November. We worked with care homes to develop a programme whereby they can apply for grants

to support innovation, supporting residents with Dementia, or any other developments that will improve quality of care and life experience for the residents, and cannot be funded through other streams. Applications will be considered by a panel of representatives across the Sefton Social Care Health and Voluntary sector. I will be chairing this panel.

5. Hospital Discharge Teams

As reported on the last update, new guidance in respect of hospital discharge pathways established at the start of pandemic in March was issued on the 20th August.

To update from an operational perspective, the number of COVID positive patients has decreased in the Liverpool University Foundation Trust, but remain high in Southport and Ormskirk Trust. Both Critical Care Units are still experiencing ongoing pressure, and the Acute Hospital Trusts are still facing challenges, with wards remaining closed owing to infection control purposes. We are supporting the Trusts as per statutory guidance, by providing both Trusts with support at weekends to facilitate discharge, therefore ensuring patient flow. Across both systems, Sefton Adult Social Care have input into the Winter Plans which have been submitted to NHS England, outlining the need for a growth in the Rapid Response and Reablement Services run by New Directions, if we are to continue supporting high numbers of expected patient discharges during the Winter months.

6. Mental Health

Mersey Care NHS Foundation Trust/YMCA

Mersey Care NHS Foundation Trust have commissioned YMCA to provide 20 step-down beds to facilitate discharge from an acute setting for individuals who are medically optimised, but require a period of reablement before moving into independent accommodation.

Nightingale House which is located on Balliol Road, went live in mid-October, and is now currently operating at 50% occupancy with further referrals planned over the next few weeks. At present this service is operating smoothly with no issues encountered at present, and we are maintaining ongoing dialogue with the service.

Whitham House which YMCA were proposing as a move on service, which is located next door to Nightingale House has now been paused, as the owner of the property is seeking planning permission. This will be vigorously opposed, as a wholly unsuitable development. It is worth noting that Nightingale House was created without consultation with this local authority or the Clinical Commissioning Group.

Ongoing updates will be provided regarding both these developments.

Alternatives to Hospital Admissions for People in Crisis

Sefton Council in partnership with Sefton CCGs and Mersey Care Foundation Trust, have submitted a bid for funding that has been made available via the Cheshire and Merseyside STP. The bid consists of the following:

1. Enhance Sefton's Mental Health Recovery Team by recruiting 2 additional Support Worker posts.

2. Establish Mental Health Crisis Cafes in Sefton, in partnership with Sefton CVS. Southport café to be prioritised in Year 1, with outreach sessions being delivered during the evening time across the borough, and South Sefton Café to be developed in Year 2. Sefton CVS will act as the lead agency. Service delivery will be supported by members of a Mental Health Voluntary Sector Alliance, that will be established to underpin this collaborative development.

The North Sefton Café will be supported by Rethink and Real Talk CIC, and will embrace a wider cross referral network that will include Citizens Advice Bureau, Brighter Living Partnership, Parenting 2000, Living Well Sefton, Southport Foodbank, High Intensity Users Project, Community Connectors and North Sefton Social Prescribers.

An open referral process will apply with individuals over the age of 18 being able to self-refer into the café.

The crisis café will provide two core functions:

- A place of safety and support for those at high risk of self-harm or suicide who would otherwise attend A&E.
- Facilitation of a Mental Health Champions' Network of experts by experience.

The Crisis Café Hub will be easily accessible by public transport in an off high street, town centre location.

Staffing will be a combination of both paid staff and volunteer support.

Sessional activities will be drawn in from the wider Alliance to complement the offer available from the core team.

Volunteers will include individuals looking to start a career in health and social care, as well as experts by experience working within the café and facilitating the Champions' Network.

All volunteers will be supported under the Sefton Volunteer Centre good practice guidance; all will have a role specification as well as individual supervisions. Formal guidance and training for volunteers will be provided.

Volunteers will be recruited through the Sefton Volunteer Centre, and through direct contact with the café's Volunteer Support Worker.

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Adult Social Care Performance Dashboard

Safeguarding

Updated: December 2020

Roger Robinson
Commissioning Support & Business Intelligence Service
Data, Insight, Business Intelligence, & Performance



Sefton
2030
Ready for the future

Document Control

Version	Date of Issue	Reason for Issue
V0	16/12/2019	Final for Regular Update

Document Ownership

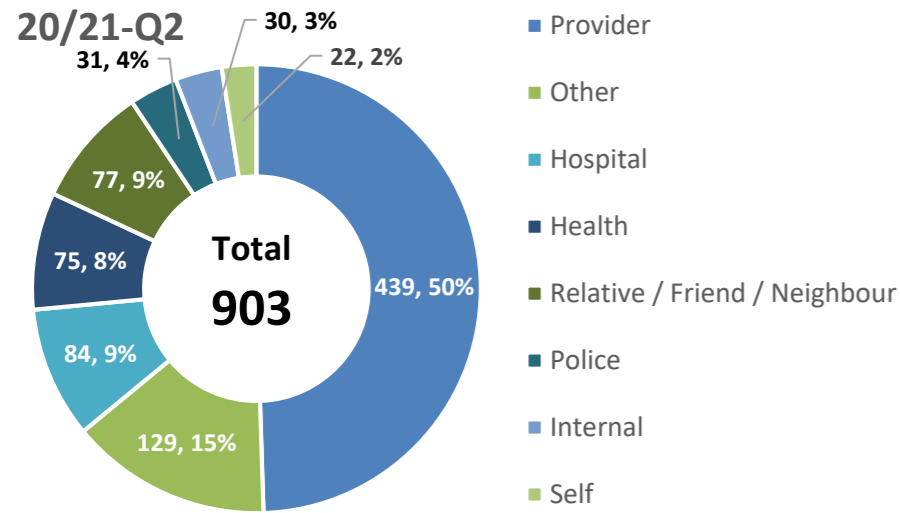
Role	Name/Title
Author	Joshua Cross Business Intelligence Officer
Contributors	-
Release Authority	Roger Robinson Business Intelligence & Performance Lead
File Location	\\Smbc-file-04.smbc.loc\Business_Intelligence\ASC\Dashboards\Safeguarding\[Safeguarding Dashboard V2.xlsx]FrontPage

Distribution

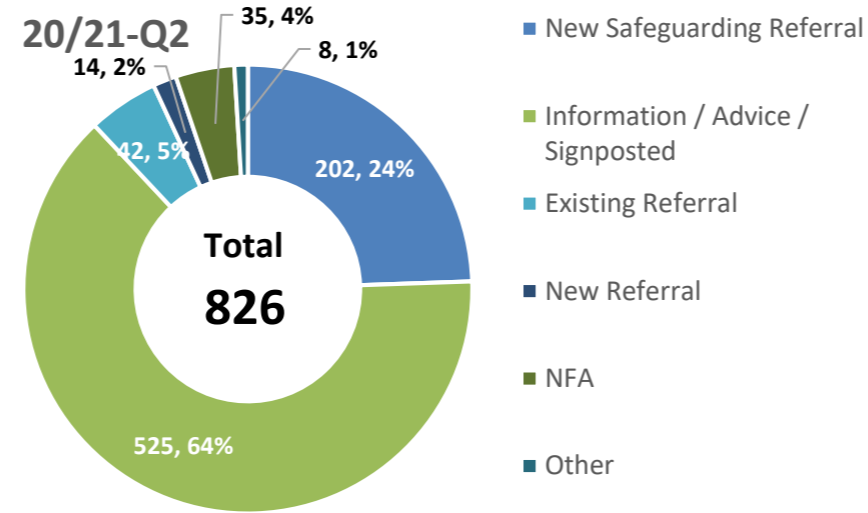
Cabinet Member, ASC DMT, ASC Teams
(Not sensitive/restricted)

Contacts - Adult Abuse Suspected / Safeguarding Concerns

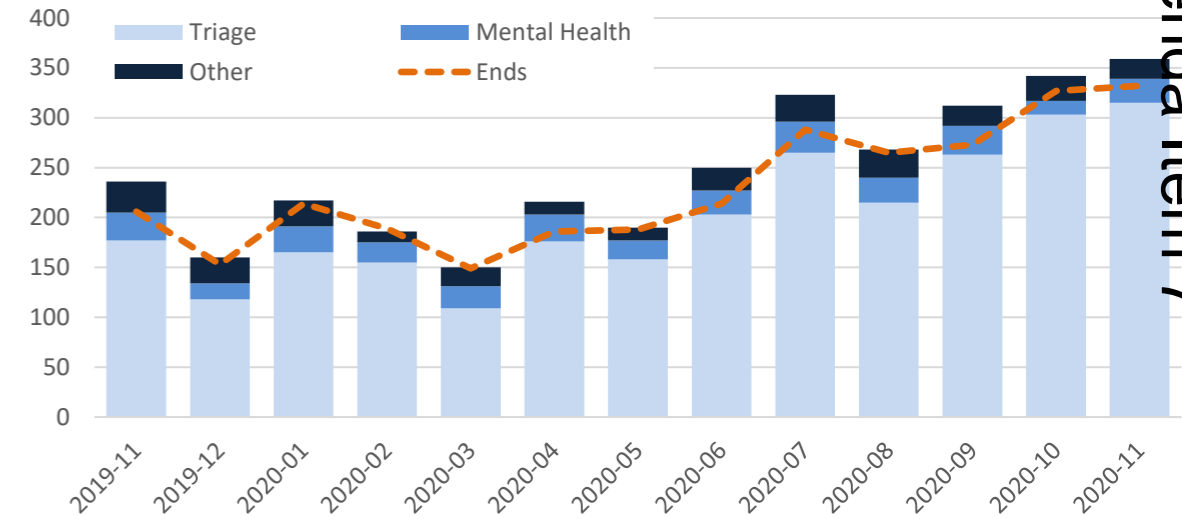
Contact Sources - Latest Full Quarter (Starts)



Contact Outcomes - Latest Full Quarter (Ends)



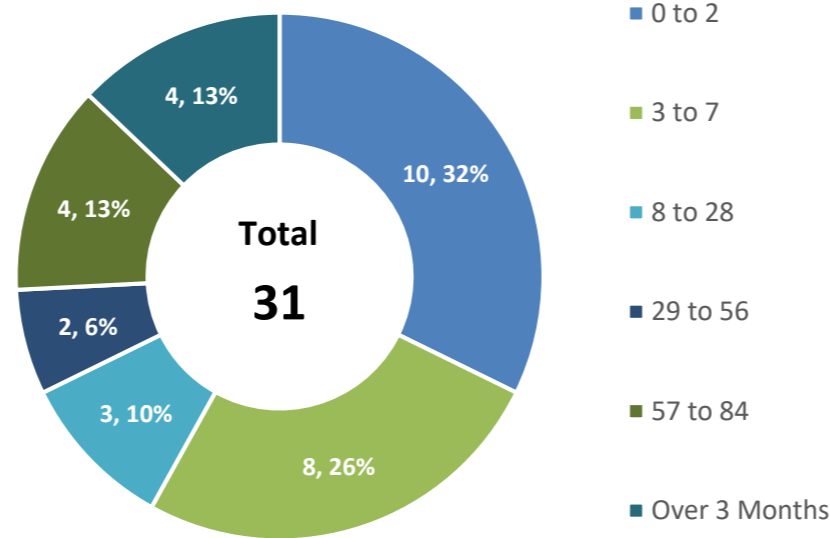
Monthly Contact Starts by Team & Ends



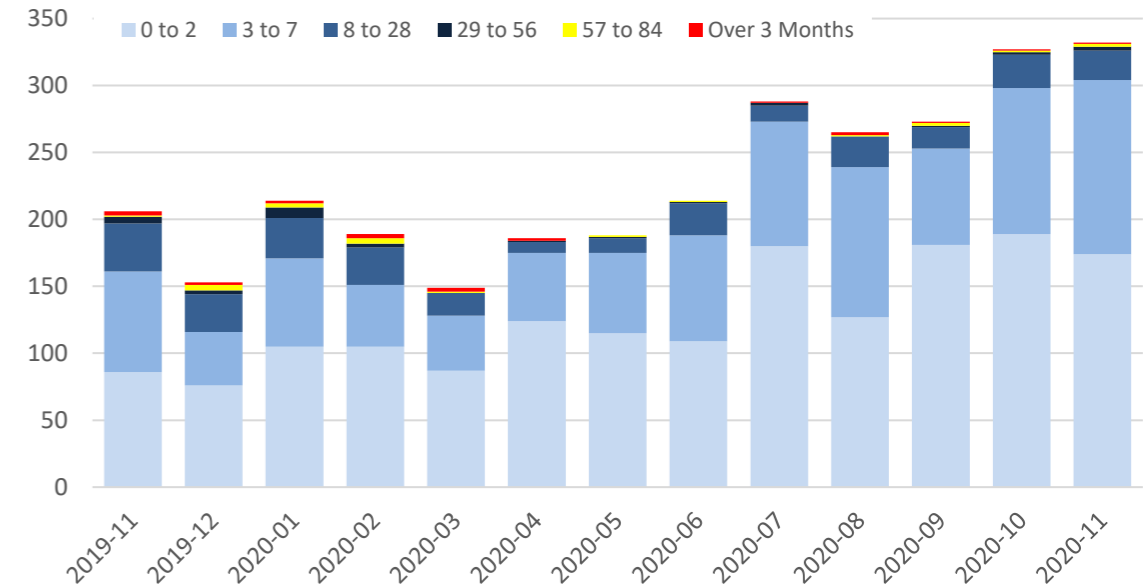
Contact Source Details - Last Two Full Quarters & Change

Contact Starts - Source	20/21-Q1	20/21-Q2	Trend
Provider	302	439	↑
Other	132	129	↓
Hospital	45	84	↑
Health	50	75	↑
Relative / Friend / Neighbour	50	77	↑
Police	30	31	↑
Internal	18	30	↑
Self	17	22	↑
Neighbourhood Centre	8	12	↑
Fire	2	4	↑
Unknown	2	0	↓
Total	656	903	↑

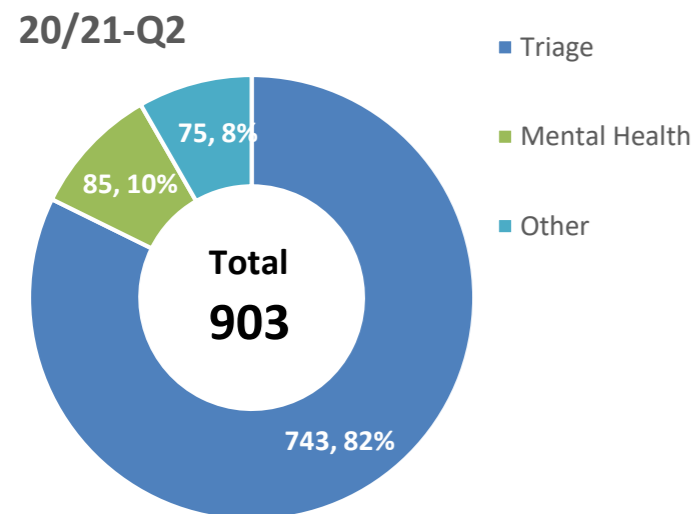
Days Open for Current OPEN Contacts



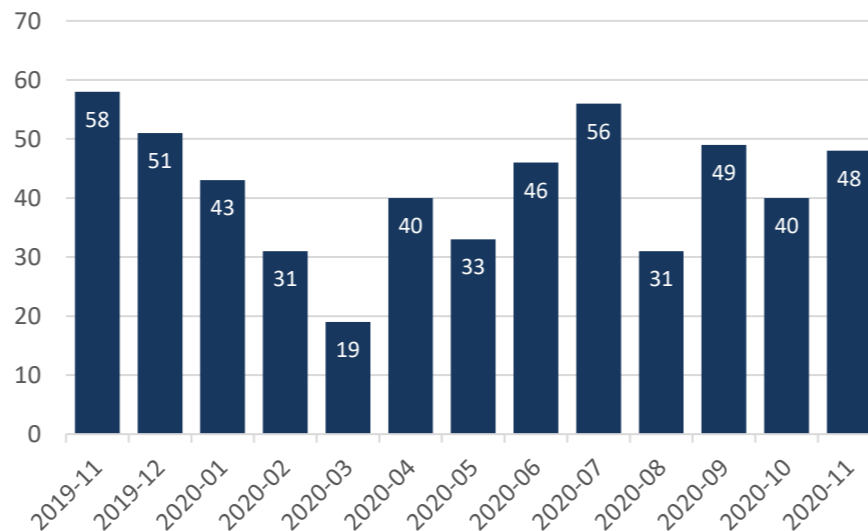
Days Taken to Complete Contact



Contact Receiving Team - Latest Full Quarter (Starts)



Caseload - Snapshot of Open Contacts at Month End



Overview Commentary

Contacts have been increasing over the past 12 months. Q.2 contact starts were 38% higher than in Q.1 and ends were 40% higher.

The first two months of Q.3 have seen contacts at their highest compared to all previous months of the year.

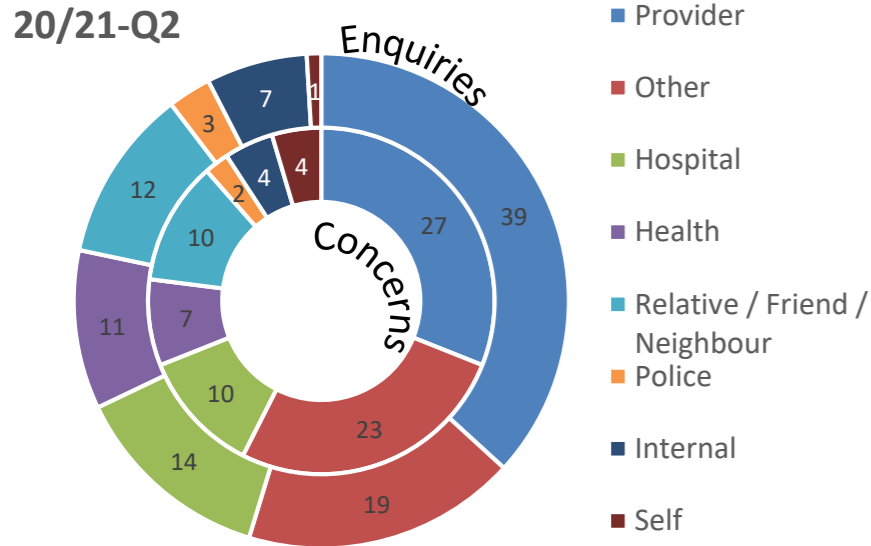
Of closed contacts in November 92% were closed within 7 days. This is comparable to the closure rates of Q.2 - 93% and Q.1 - 92%.

Of 31 currently open contacts 42% have been open longer than 7 days.

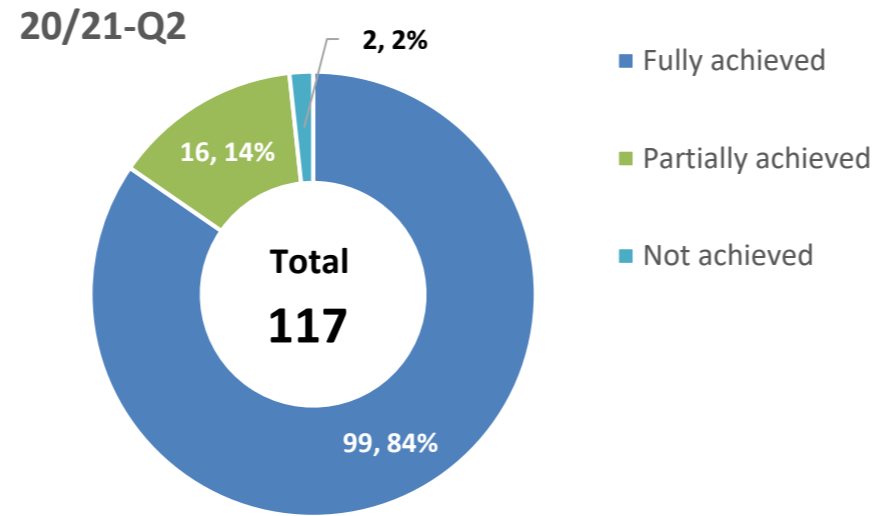
Overall contact caseload for November is at 48, this is slightly above the average for Q.1 and Q.2 (combined) of 43.

Referrals - Concerns, Section 42 and Other Enquiries

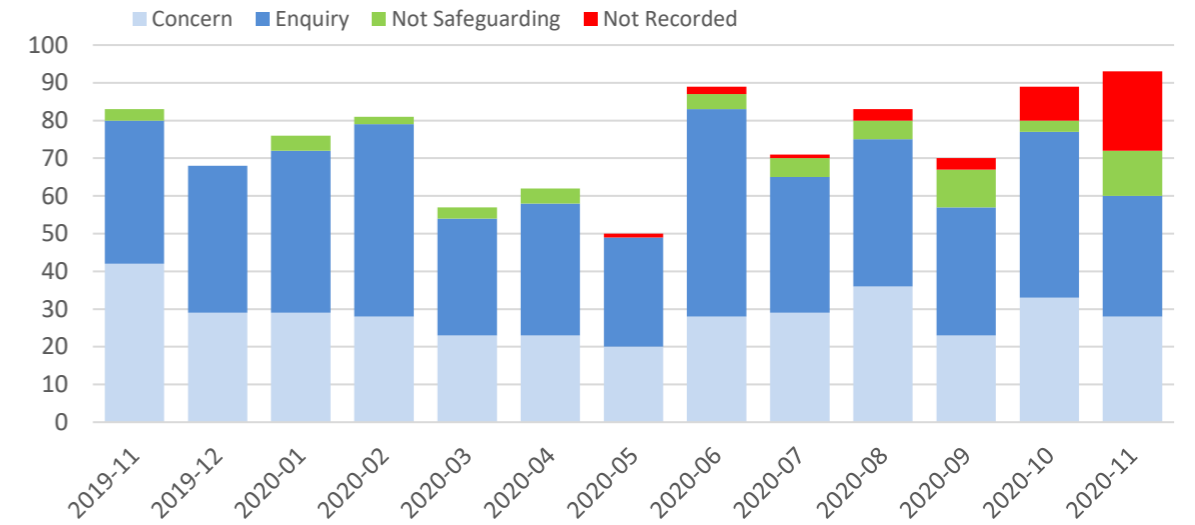
Referral Sources - Latest Full Quarter (Starts)



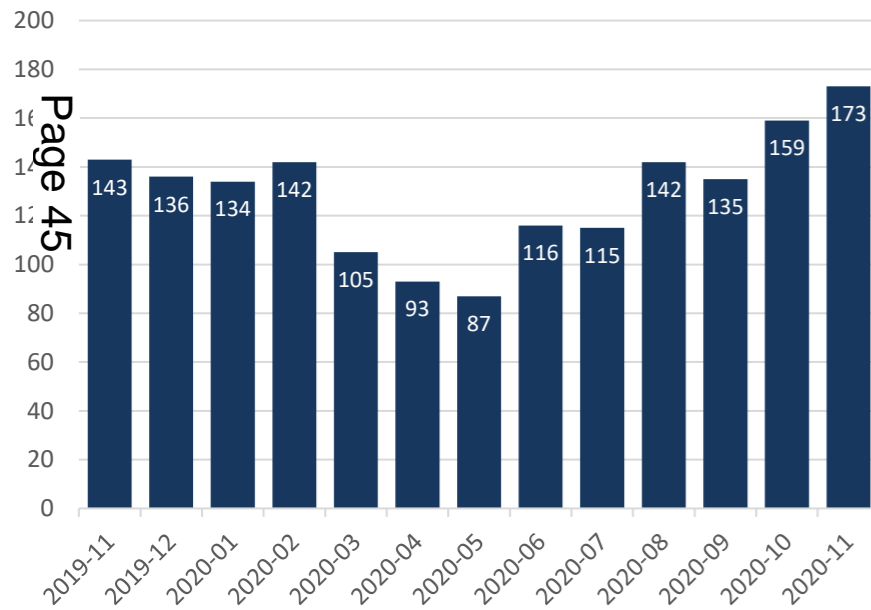
Enquiry Outcomes - Latest Full Quarter (Ends)



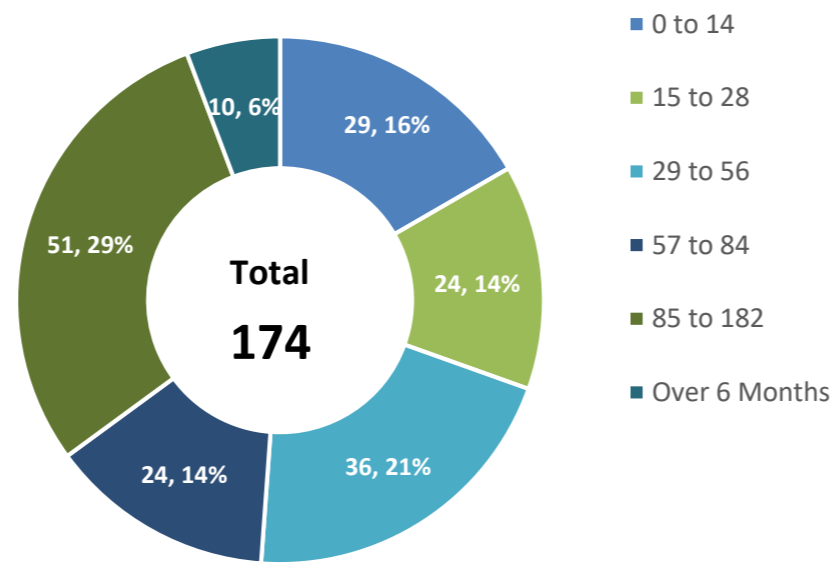
Monthly Referral Starts by Recorded Type



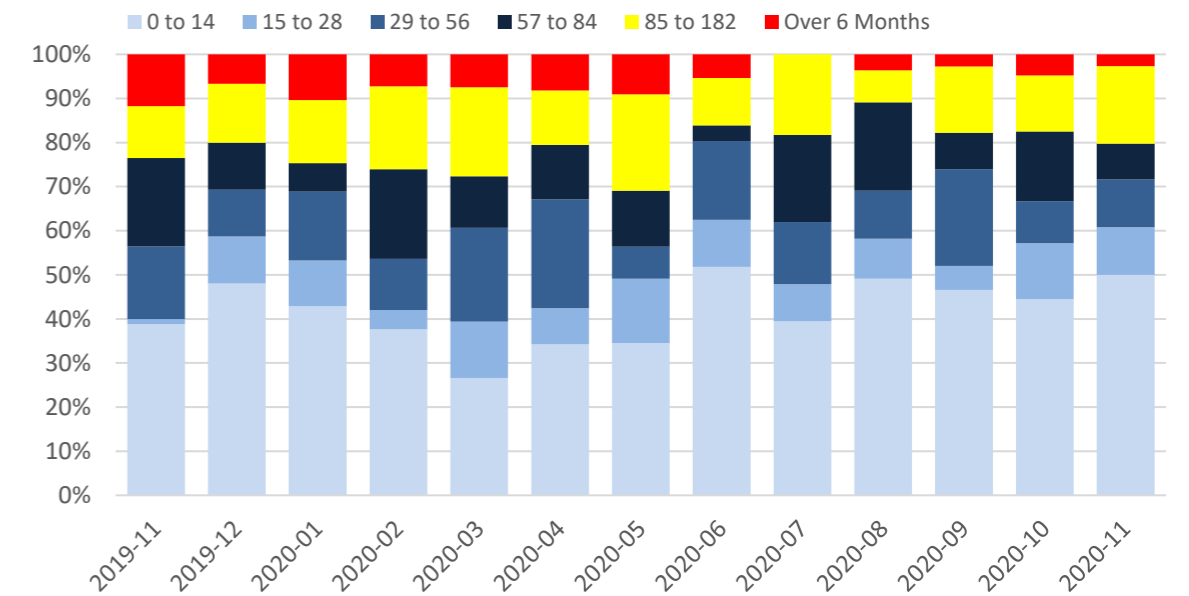
Caseload - Snapshot of Open Referrals at Month End



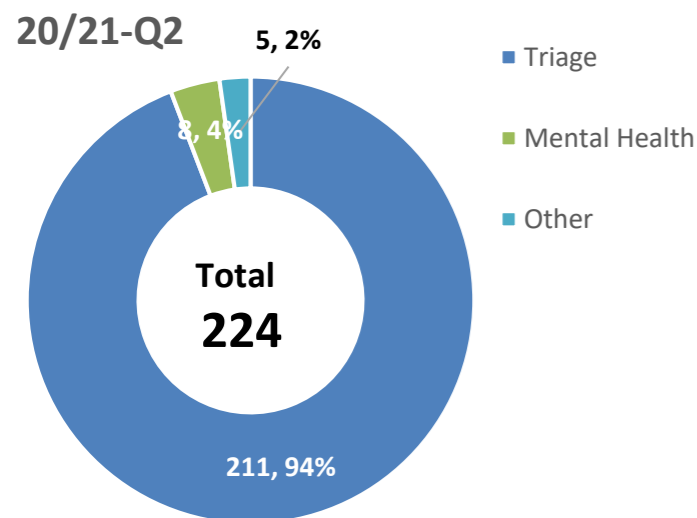
Days Open for Current OPEN Contacts



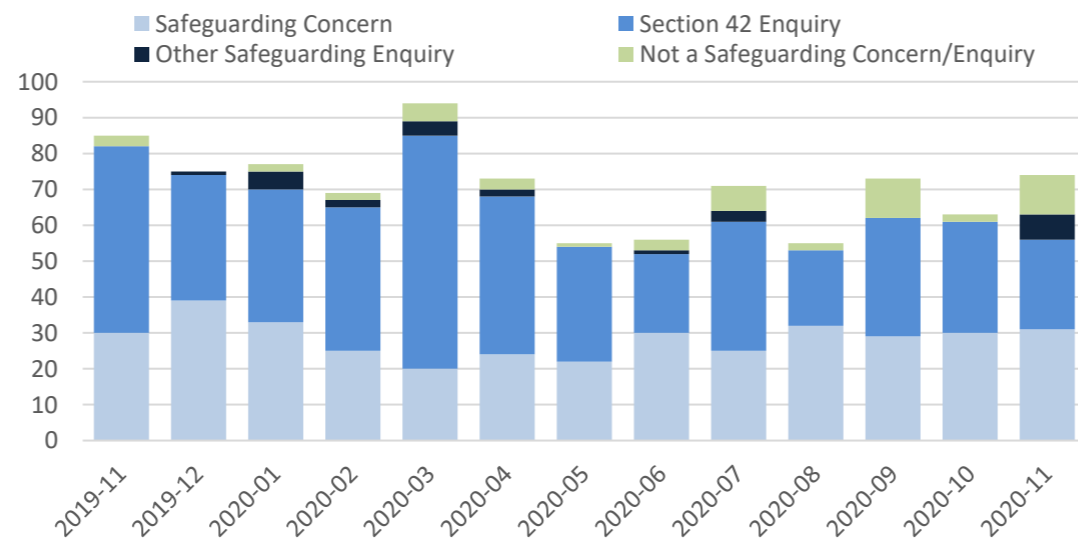
Days Taken to Complete Contact (Ends)



Referral Receiving Team - Latest Full Quarter



Monthly Referral Ends by Type



Overview Commentary

Referral starts in November are the highest of the previous 12 months and 24% higher than the Q.2 average.

There were 74 referral contact ends in November, 50% of these were resolved within 14 days.

173 referrals remain open at the end of November. Of these just under half - 49% have been open longer than 57 days.

The number of referrals that went on to become an S42 in November was 25. In October, 31 referrals went on to become an S42. The average figure for Q.2 was 30 and for Q.1 the average was 33.

Enquiry Abuse Types, Locations and Perpetrators

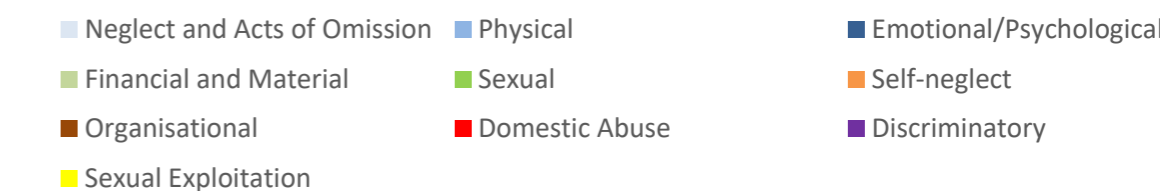
Main Victim Outcomes - Last Two Full Quarters & Change

Referral Ends - Victim Outcome	20/21-Q1	20/21-Q2	Trend
No Further Action	84	90	↑
Other	35	33	↓
Not Recorded	15	16	↑
Community Care Assessment & Services	13	24	↑
Increased Monitoring	19	17	↓
Moved to Increased/Different Care	9	15	↑
Total	184	199	↑

Abuse Type - Last Two Full Quarters & Change

Referral Ends - Abuse Type	20/21-Q1	20/21-Q2	Trend
Neglect and Acts of Omission	61	54	↓
Physical	23	25	↑
Emotional/Psychological	28	22	↓
Financial and Material	11	9	↓
Sexual	4	2	↓
Self-neglect	5	8	↑
Organisational	3	1	↓
Domestic Abuse	4	7	↑
Discriminatory	2	0	↓
Sexual Exploitation	0	0	↑
Total	141	128	↓

Enquiry Abuse Types - Ends in Month

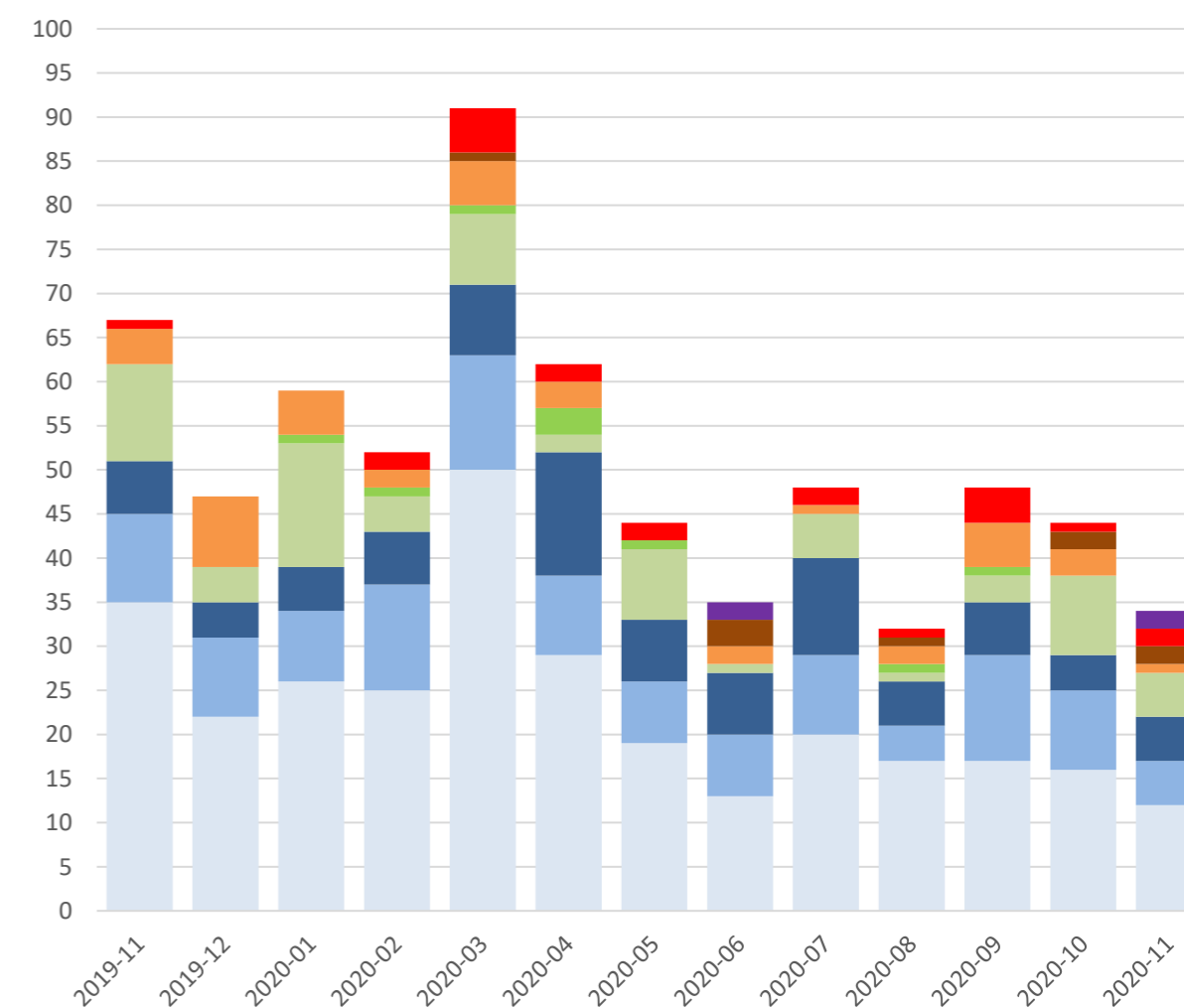


Location of Abuse - Last Two Full Quarters & Change

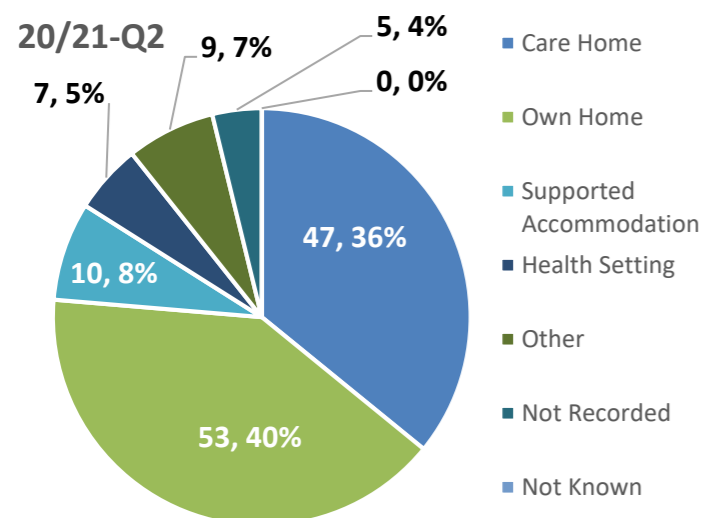
Referral Ends - Location	20/21-Q1	20/21-Q2	Trend
Care Home	51	47	↓
Own Home	62	53	↓
Supported Accommodation	12	10	↓
Health Setting	3	7	↑
Other	9	9	↑
Not Recorded	2	5	↑
Not Known	5	0	↓
Total	144	131	↓

Perpetrator - Last Two Full Quarters & Change

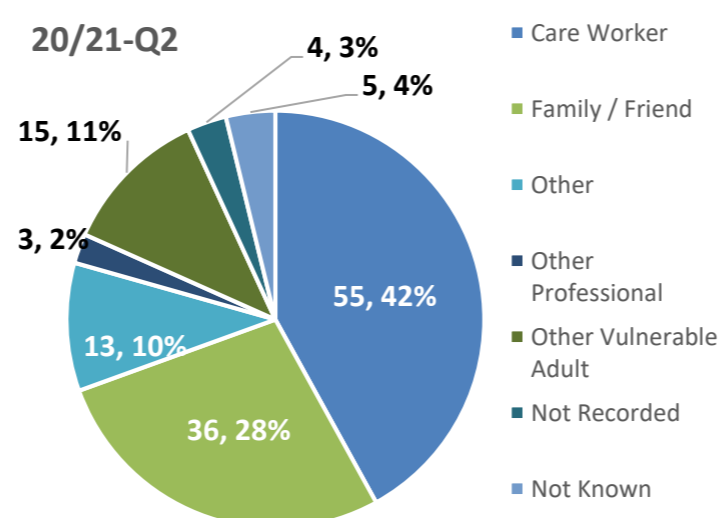
Referral Ends - Perpetrator	20/21-Q1	20/21-Q2	Trend
Care Worker	56	55	↓
Family / Friend	47	36	↓
Other	19	13	↓
Other Professional	4	3	↓
Other Vulnerable Adult	13	15	↑
Not Recorded	2	4	↑
Not Known	3	5	↑
Total	144	131	↓



Episode Location of Abuse - Latest Full Quarter (Ends)



Episode Perpetrator - Latest Full Quarter (Ends)



Overview Commentary

Abuse enquiry ends in November are down on the previous two months and are 5 below the combined average for Q.1 and Q.2.

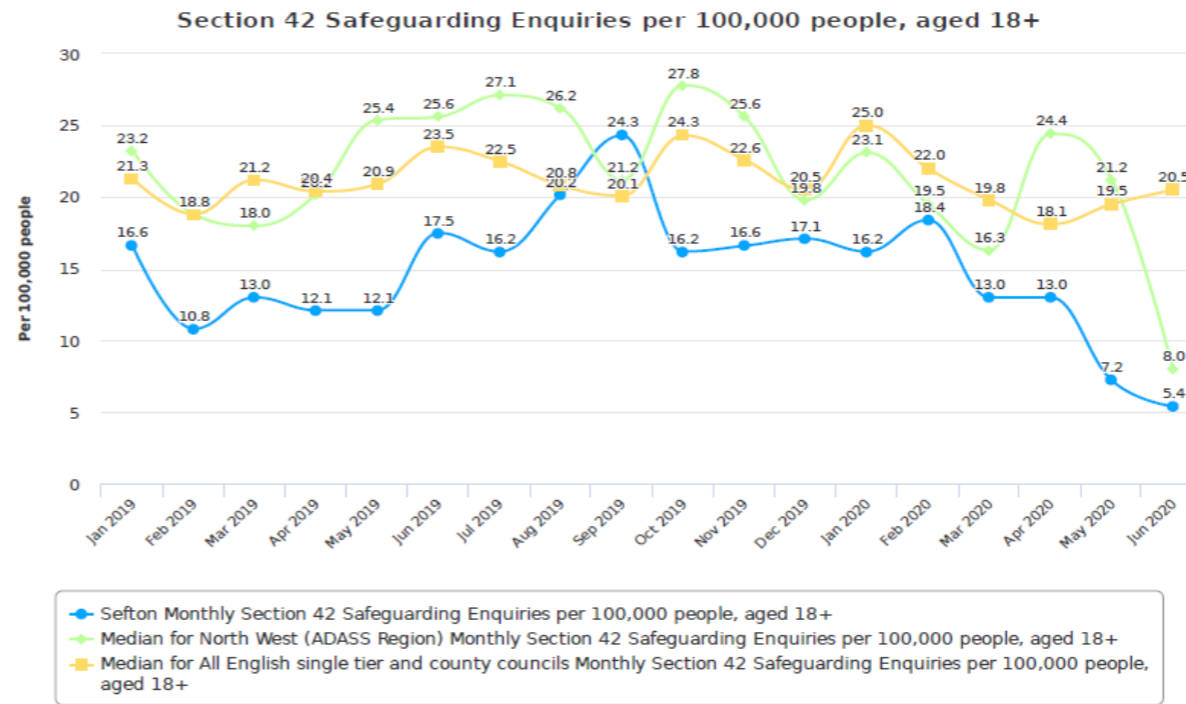
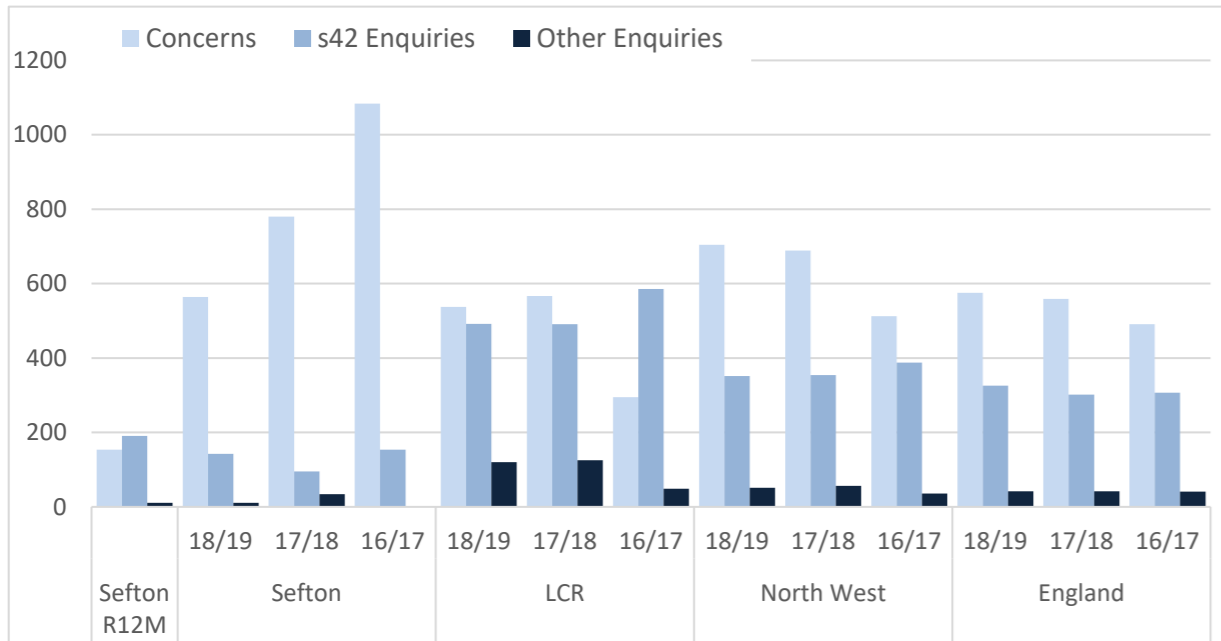
As in Q.1 and Q.2 neglect and acts of omission continue to make up the biggest proportion of abuse types.

Care homes and own homes continue to account for the vast majority - 73%, of abuse locations in November. For Q.2 this figure was 76%.

Care workers and family/friend constitute 66% of abuse perpetrators for November ends. In Q.2 this figure was 69%.

National Benchmarking

Safeguarding Type Rates per 100,000 population



Safeguarding Abuse Types - Rates per 100,000 Population Heatmap

Abuse Type	Sefton R12M	18/19	17/18	16/17	18/19	17/18	16/17	18/19	17/18	16/17	18/19	17/18	16/17
		Sefton Council	Sefton Council	Sefton Council	LCR	LCR	LCR	North West	North West	North West	England	England	England
Physical	47.0	31.6	24.9	38.4	147.2	167.7	168.2	99.4	110.5	110.4	90.0	83.3	81.2
Sexual	4.1	11.3	2.3	6.8	24.7	24.0	19.5	18.7	19.6	16.6	15.7	16.0	15.9
Psychological	37.1	27.1	20.4	20.3	76.4	76.3	70.5	65.1	62.3	55.4	56.7	49.6	46.7
Financial	28.9	38.4	18.1	24.8	99.9	112.0	106.3	69.0	75.1	62.6	59.2	54.8	52.7
Discriminatory	1.8	0.0	0.0	0.0	0.4	0.4	1.6	0.4	0.8	1.3	1.4	2.1	2.3
Organisational	4.1	0.0	0.0	0.0	14.6	71.0	54.6	11.7	25.0	25.6	15.8	15.8	15.0
Neglect	120.3	72.2	47.5	72.2	177.5	242.4	260.2	140.5	168.6	171.7	128.5	119.3	116.6
Domestic Abuse	9.5	2.3	0.0	0.0	20.2	26.8	1.6	22.5	19.4	3.4	19.6	16.2	12.1
Sexual Exploitation	0.0	0.0	0.0	0.0	0.8	2.8	1.2	1.0	1.0	0.3	1.8	2.2	1.7
Slavery	0.0	0.0	0.0	0.0	0.4	0.4	2.9	0.3	0.3	0.6	0.3	0.7	0.5
Self-Neglect	16.7	4.5	0.0	0.0	15.0	7.3	5.3	12.7	7.9	3.4	18.9	15.9	13.7

Overview Commentary

Safeguarding concerns in Sefton have reduced significantly over the past 3 years. 18/19 the figure was in line with the National average. The rolling 12 month figure shows safeguarding concerns continuing to reduce.

Sefton's rate of s42 enquiries is lower than the National and North West median.

Physical and psychological abuse rates are slightly higher in Sefton than in previous years, although these rates are lower than LCR, North West and National figures.

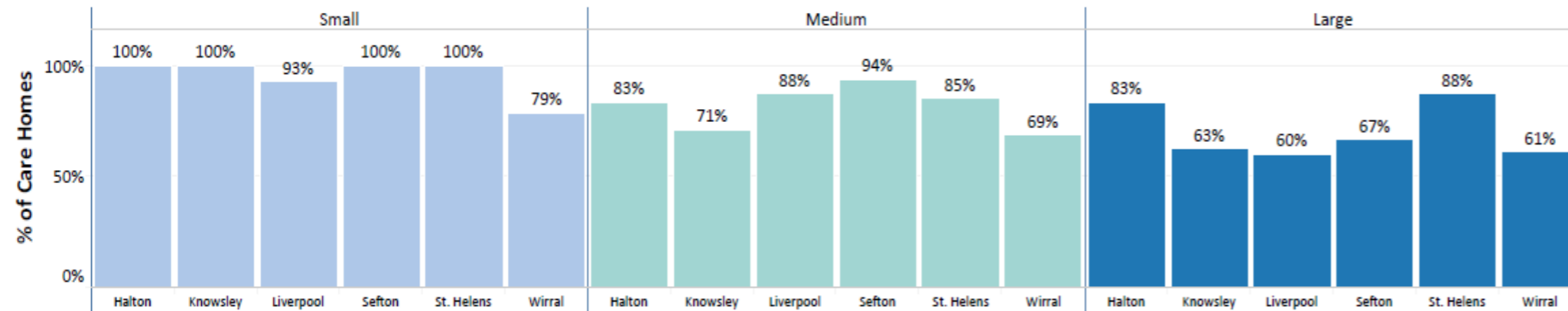
Rates of neglect in Sefton are 67% higher than 18/19 and, although still lower than LCR and North West figures, are similar to the national average.

NW ADASS CQC Benchmarking

Breakdown of Quality by Size of the Care Home: Liverpool City Region

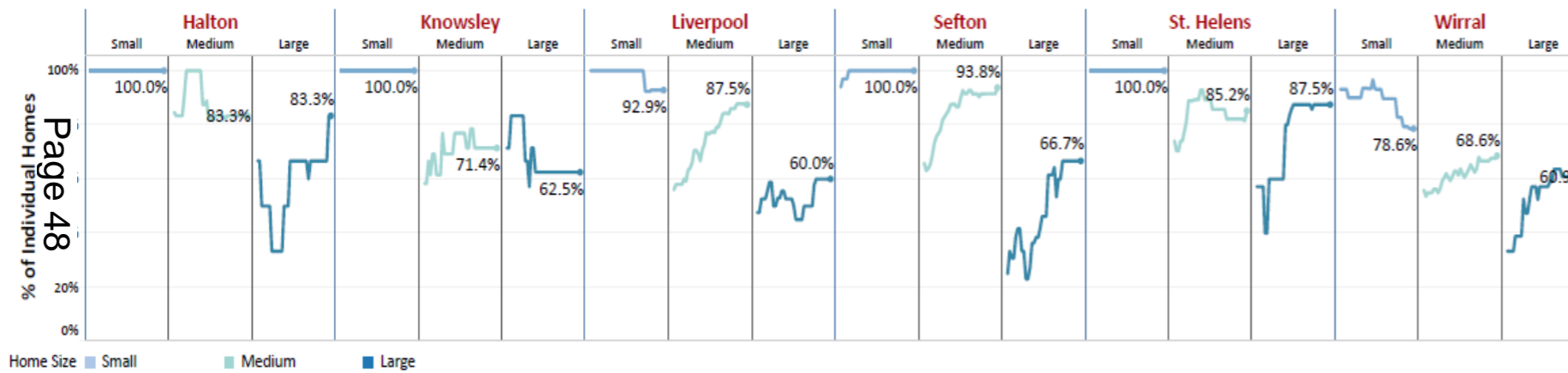
Chart shows % of Homes Rated 'Outstanding' or 'Good'

Small Home is 10 beds or less, Medium is between 11 and 49, Large 50+



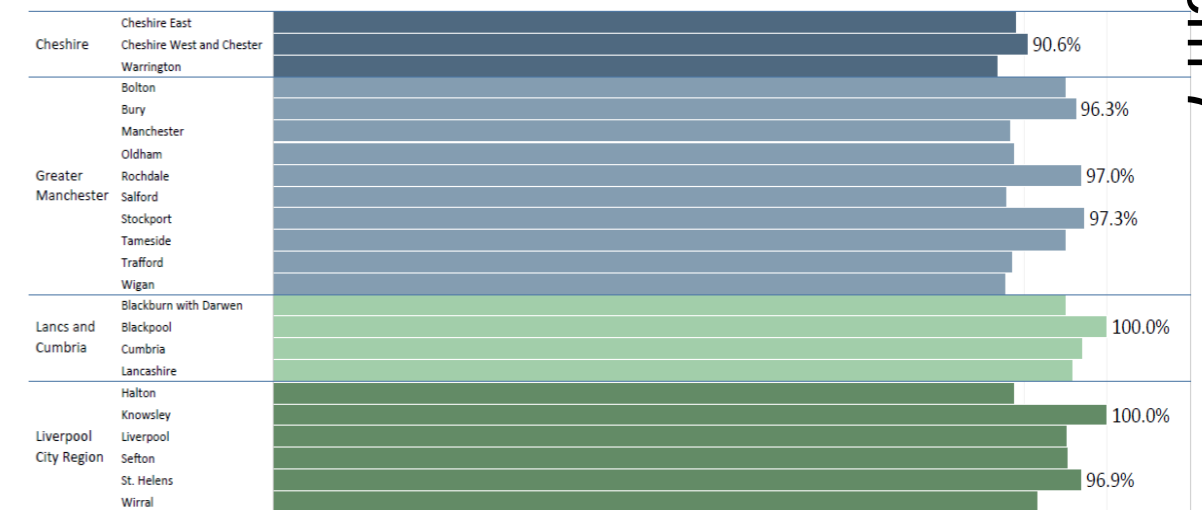
Breakdown of Quality by Size of the Care Home: Liverpool City Region

Methodology as above - Nov 17 to Present



% of Community Based Providers rated 'Good' or 'Outstanding' per Local Authority:

November 2020



CABINET MEMBER UPDATE		
Overview and Scrutiny Committee (Adult Social Care and Health) 5 January 2021		
Councillor	Portfolio	Period of Report
Ian Moncur	Health and Wellbeing	Oct - Nov 2020

Staff Flu Immunisation Programme 2020/2021

I received an update report regarding Sefton Council's Staff Flu Immunisation Programme for 2020-2021 which outlined changes made to this year's programme in response to the global pandemic.

The risk of flu and Covid-19 co-circulating this winter poses significant risk to the health and wellbeing of the Council's workforce, their families, those who access services and the ability to deliver services in Sefton.

Covid-19 has posed challenges to the design and delivery of the 2020-2021 staff flu immunisation programme as a result of remote working, social distancing and increase in demand. Therefore, the Public Health Team have redesigned the delivery model for the 2020-2021 programme to be ran as a voucher scheme which went live on 8 October 2020. Staff members are able to request a voucher which is redeemable at any of the 11 participating community pharmacies across the borough. Provision has also been made for those members of staff who do not have access to a computer.

Staff groups included in this year's programme include:

- All Sefton Council workforce (including temporary and agency staff)
- Family Wellbeing Centres
- Councillors
- Staff working at Special Schools
- Participating schools (schools have been offered the opportunity to register to participate in this year's programme at a subsidised rate)
- CCGs (on a recharge basis).

The Public Health Team will continue to monitor uptake from the council's service areas and wider participating staff groups.

Community Infection Prevention & Control Service

I gave approval to increase the funding for the Community Infection Prevention and Control Service. This Service provides preventive and responsive infection prevention and control support and advice to complex and/or vulnerable community settings in Sefton, such as care homes. Due to the COVID-19 pandemic there has been an immediate need to increase the scale and scope of this service, with the aim of

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increasing skills and knowledge in community settings to prevent transmission of infectious diseases.

COVID-19 Update

Merseyside, including Sefton, entered Tier 3 restrictions on 14th October. **Tier 3 interventions** aimed at reducing social mixing and social contact, were:

- Pubs and bars not serving substantial meals to close
- Other food and drink venues to close at 10pm (takeaway service can continue)
- No social mixing anywhere, except in open outdoors (maximum 6 people)
- Advice to work from home if possible, during winter months
- Avoid non-essential travel in and out of Tier 3 areas
- Limit travel generally and avoid public transport where possible
- Weddings limited to 15 people, funeral service to 30, wake 15
- Care home visits restricted

In addition to the core Tier 3 interventions above, additional measures introduced in Merseyside were:

- 'Take extra care' message to previously shielded/clinically extremely vulnerable group
- Indoor gyms, dance and indoor sports venues required to close
- Betting shops, casinos, and adult gaming premises required to close

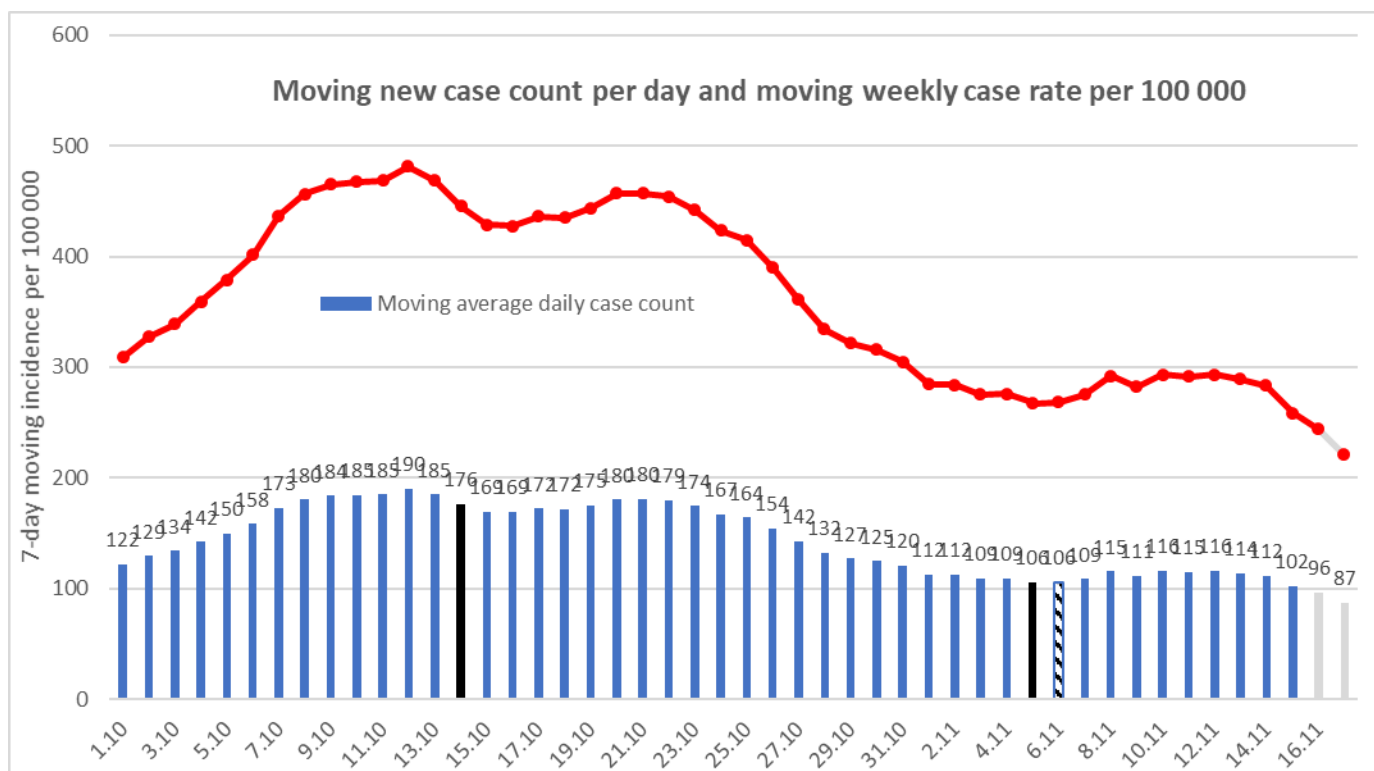
On the 5th November England entered a 4-week period of **national restrictions**, which is due to conclude on 2 December. <https://www.gov.uk/guidance/new-national-restrictions-from-5-november>. The suite of measures that have been introduced are less restrictive than the first national 'lockdown'. Key aspects are:

- Schools, colleges and universities remain open. University students advised not to return to family home
- One person (plus children under 5 if applicable) can meet up with one other person from outside their household or bubble
- Outdoor exercise is unlimited
- No direction to shield for clinically extremely vulnerable (advice to minimise social contact and not to attend work even when work from home is not an option)
- Work from home where possible, otherwise ensure COVID-19 secure practices
- Non-essential retail and personal care services required to close
- Indoor and outdoor sports and leisure facilities required to close to general public
- Accommodation limited to specific non-leisure purposes, food and drink venues can only operate takeaway or delivery services, and most close at 10pm
- Weddings not permitted ('deathbed weddings permitted with up to six people present)

- Travel is restricted to essential, legally permitted purposes
- Overnights stays are for legally permitted reason only

I have received updates on the epidemiology of Covid.

The epidemic curve below puts the Tier 3 and national restrictions (black bars) in epidemiological context. Another important development, which influences how the impact of these measures appears in Sefton's case rates is the introduction of mass asymptomatic serial testing and piloting of lateral flow testing in Liverpool, including Sefton residents who work in Liverpool (striped bar, 6th November).



The moving 7-day incidence rate of new cases per 100 000 population reached a peak of 480.8 per 100 000 on 12th October. The preceding levelling off and initial drop in incident rate around this date may have been influenced by transient, reduced demand for testing. The impact of tier 3 restrictions is visible as a steady fall in rates beginning around 21st October.

There are signs of levelling off in the run up to national restrictions on the 5th November. In the period from 6th to 17th November 25% of Sefton's new cases of SARS-COV-2 infection were linked to Liverpool mass testing and lateral flow testing programmes, and this is reflected as a slight increase in cases, followed by signs of a renewed downward trend. The incident rate on the 17th Nov has fallen to 220.0 per 100 000, which is similar to rates at the end of September (a fortnight after Merseyside had been declared an Area of Intervention and some limits on social contacts had been introduced).

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Deaths associated with SARS-CoV-2 began to increase from mid-September and the rate of increase went up in the second half of October. Since mid-September 18% of all deaths (114 out of 637) in Sefton record a mention of SARS-CoV-2 on the death certificate. In 8 out of 9 weeks from the start of September to the end of October deaths have been in excess of the average for the previous five years. From mid-October, almost all of the excess in deaths is attributable to COVID-associated mortality. 87% (99 out of 114) of deaths associated with SARS-CoV-2 occurred in hospital, which is consistent with previous data. <https://www.ons.gov.uk/datasets/weekly-deaths-local-authority/editions/time-series/versions/5>

The death rate (for deaths within 28 days of positive Coronavirus test) may have peaked at the start of November (moving 7-day average of 5.3 per 100 000). This rate is slightly below the peak death rate in Sefton in early April of 6.3 per 100 000. The average number of daily deaths has remained at 3 to 4 since the beginning of November, which reflects high incidence rates in all age groups during October. Continuation of weekly new case rates close to or above 200/100 000 across all age groups, including older people, indicates that the death rate will remain elevated, falling gradually for further weeks to come. <https://coronavirus.data.gov.uk/details/deaths?areaType=ltla&areaName=Sefton>

Testing

National strategy anticipates a return to regional tiers of Covid restrictions at the end of the current England wide restrictions on the 2 December. The Government has identified mass asymptomatic testing as a key intervention to reduce rates of Covid infection. Liverpool are currently piloting the use of Lateral Flow Tests which can be analysed at the testing site and provide results within 30 minutes. The full results of the pilot are still to be published. However, the evaluation will consider the efficacy of the tests, acceptability of repeat testing and the impact that testing has on reducing rates of Covid.

The first 10,000 kits, PPE and digital devices to support testing have been ordered and are scheduled for delivery at the end of November.

Contact Tracing

Sefton Council locally supported test and trace system went live on 23rd November 2020. Where NHS Test and Trace contact tracers are unable to contact a person for 24 hours, they will pass the case to the local authority to follow up by phone. The local contact tracers will receive a list of people to contact every day and is granted access to the national system, in which to input the required information. If the local contact tracing team does not make telephone contact, they will leave a message with a local number to call so the service can obtain details of 'contacts' to update the national test and trace system. Other participating local authorities have identified the benefit of making contact via a local contact number and ensuring that there is a provision for members of the public to return telephone calls.

Kooth

Kooth is a free online mental wellbeing support service that is available to all children and young people aged 11-18 in Sefton. It provides moderated forums, self-care tools, 1 to 1 online counselling and a magazine of support.

It has been available in Sefton since July 2019 and has over 1500 users. The service was evaluated over the summer and the findings shared with the Children's Integrated Commissioning Group (CICG). The evaluation showed that the service is well used, well regarded and its popularity is growing.

Following discussions with the three funding partners (Public Health, Children's Services and the Clinical Commissioning Groups) it was recommended that Kooth be re-procured on a new three-year contract. The age range will be widened to provide support to 10-25 year olds and more capacity bought as the number of users increases. The request has been approved and following completion of the required call-in period legal paperwork will be completed to ensure the service begins in January 2021.

Leisure Centre's

An update was presented on the progress of the reopening of Sefton Council's Leisure Facilities following lockdown. The following usage figures were provided, showing an increase in participation from August to September:

August	September	Difference
15717	26133	+ 10416
8336 (Gym)	14358 (Gym)	+ 6022
5212 (Swim)	6009 (Swim)	+ 797
2169 (Classes)	5766 (Classes)	+ 3597

The Leisure Centres had also began trialling open gym sessions, along with bookable slots to give members additional flexibility. All open sessions were still track and trace compliant as members are recorded through the leisure management system.

A new class time table was also launched on 5th October, increasing the number of COVID compliant classes by 67 from 189 to 256.

The new 'Test & Trace' (QR Codes) had been introduced to all Centres and have been on display since 24th September 2020.

Direct Debit payments for gym members restarted on 1st October 2020. Direct Debit for Aquatics (swimming lesson) members restarted on 24th September 2020.

A November update was presented on the progress of the reopening of Sefton Council's Leisure Facilities following lockdown. The following usage figures were provided for October 2020:

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Total usage = 16727

Gym = 8304

Swim = 4013

Classes = 4410

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	5 January 2021
	Overview and Scrutiny Committee (Regulatory, Compliance and Corporate Services)		12 January 2021
	Overview and Scrutiny Committee (Regeneration and Skills)		19 January 2021
	Overview and Scrutiny Committee (Children's Services and Safeguarding)		26 January 2021
Subject:	Executive/Scrutiny Protocol		
Report of:	Chief Legal and Democratic Officer	Wards Affected:	All
Cabinet Portfolio:	Regulatory, Compliance and Corporate Services		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

To advise of the decision of Cabinet (Minute No. 69) of its meeting held on 3 December 2020 approving the Executive/Scrutiny Protocol for use in Sefton.

Recommendation:

That the decision of Cabinet in approving the Executive/Scrutiny Protocol for use in Sefton be noted and welcomed.

Reasons for the Recommendation(s):

To comply with previous decisions of the Cabinet, the Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees seeking the production of an Executive/Scrutiny Protocol in Sefton.

Alternative Options Considered and Rejected: (including any Risk Implications)

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No alternative options have been considered because the production of an Executive/Scrutiny Protocol in Sefton was requested by Cabinet.

What will it cost and how will it be financed?

There are no direct financial implications arising from the production the protocol. Any financial implications that do arise will be reported to the Cabinet and Overview and Scrutiny Committees at the appropriate time.

(A) Revenue Costs

See above

(B) Capital Costs

See above

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): None
Legal Implications: None
Equality Implications: There are no equality implications

Contribution to the Council's Core Purpose:

Protect the most vulnerable: None directly applicable to this report.
Facilitate confident and resilient communities: None directly applicable to this report.
Commission, broker and provide core services: The development of an Executive / Scrutiny protocol should improve relationships between Cabinet and Overview and Scrutiny Members and contribute towards more effective scrutiny in Sefton.
Place – leadership and influencer: As above
Drivers of change and reform: As above
Facilitate sustainable economic prosperity: None directly applicable to this report.
Greater income for social investment: None directly applicable to this report.
Cleaner Greener: None directly applicable to this report.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD 6213/20) and the Chief Legal and Democratic Officer (LD4405/20) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

None

Implementation Date for the Decision

Immediately following this meeting.

Contact Officer:	Paul Fraser
Telephone Number:	0151 934 2068
Email Address:	Paul.fraser@sefton.gov.uk

Appendices:

Executive/Scrutiny Protocol – Appendix A

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

1.1 Members will be aware that during the last cycle of meetings the four Overview and Scrutiny Committees and the Overview and Scrutiny Management Board recommended that that Cabinet approve an Executive / Scrutiny Protocol. The Protocol had been produced by the Overview and Scrutiny Management Board and is attached to this report as Appendix 1.

2. Cabinet Consideration

2.1 At its meeting held on 3 December 2020 Cabinet considered the Executive / Scrutiny Protocol and approved its use in Sefton.

2.2 At the Cabinet meeting, Councillor Lappin, Cabinet Member - Regulatory, Compliance and Corporate Services highlighted the importance of a similar approach in engaging with and holding Partners to account.

2.3 The Protocol has now been published on the Council's website and will be used as part of future Member Induction and Member Development Programmes.

3. Conclusion

3.1 This report is for information and to advise that Cabinet had approved the Executive / Scrutiny Protocol for use in Sefton.

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EXECUTIVE / SCRUTINY PROTOCOL



ONECOUNCIL Working Together

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PROTOCOL ON EXECUTIVE & OVERVIEW AND SCRUTINY RELATIONS IN SEFTON

Contents

1. Introduction
2. Aims of the Protocol
3. Functions of Overview and Scrutiny
4. The Conduct of Meetings
5. The Overview and Scrutiny Work Programme
6. Pre-Scrutiny
7. “Call-In” of Decisions
8. Working Group Reviews
9. Public Participation in the Overview and Scrutiny Process
10. Specific Duty of the Overview and Scrutiny Committee (Adult Social Care and Health) – Joint Health Scrutiny Arrangements

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1. Introduction

- 1.2 This Protocol applies to all Members of Overview and Scrutiny (O&S) Committees, co-opted members who sit on O&S Committees, all Members of the Cabinet and senior officers.
- 1.3 The Protocol is not intended to replace *Chapter 6 – Overview and Scrutiny* of the Council's [Constitution](#), nor is intended to replace *Chapter 2 – Members – Code of Conduct*, rather it is intended to enhance and supplement the requirements of the Constitution and set out guidance for good practice.
- 1.4 Scrutiny should be a strategic function of the authority. It should be central to the organisation's corporate governance; a crucial cog in the decision-making machine.

2. Aims of the Protocol:

- 2.1 Clarify Relationships
- 2.2 The aim of the Protocol is to clarify relationships between O&S Members and Cabinet Members, to ensure an efficient O&S function, including holding the Cabinet to account on behalf of the electorate, and to encourage good communication between O&S and the Cabinet.
- 2.3 Positive Interaction
- 2.4 The Protocol refers to the respective powers, roles and responsibilities for both O&S Members and Cabinet Members. Guidance is set out on the way in which both O&S Members and Cabinet Members should interact, in order that Members maximise their roles and for the Authority to have an effective O&S function for the benefit of the Council as a whole. It also offers guidance to senior officers who support this process.
- 2.5 Promote a Culture of Mutual Respect
- 2.6 The Protocol aims to promote a culture of mutual respect, trust and courtesy in the relationships between O&S Members, Cabinet Members and senior officers, and to foster a climate of openness leading to constructive debate and communication, with a view to ensuring service improvements for the benefit of Sefton citizens.
- 2.7 Parity of Esteem
- 2.8 "Parity of esteem" means that the scrutiny function of the Council deserves the same respect, and has the same importance in the governance system, as

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executive decision-making activities. Requests from scrutiny to engage with, and recommended changes to, policies, plans and activities should be treated with the same respect and consideration as if they came from a Cabinet Member.

3. Functions of Overview and Scrutiny

3.1 The general role and specific functions of the O&S Committees can be found within Chapter 6 of the Council's Constitution. The key responsibilities of O&S are to:

- (a) Hold the Cabinet, Cabinet Members and senior officers to account for their decisions, on behalf of the electorate;
- (b) Review Council policy, the way policies are implemented and their impact on local citizens;
- (c) Scrutinise Executive decisions before they are made and before they are implemented; and
- (d) Contribute to the development of policy by investigating issues of local concern and making recommendations to the Cabinet, to the Council and to partner organisations.

4. The Conduct of Meetings

- 4.1 Cabinet Members are actively encouraged to attend meetings of O&S Committees relevant to their Portfolio, in order to present their Cabinet Member Update Reports and to respond to questions/comments from O&S Members.
- 4.2 Cabinet Members may be required to attend meetings of O&S Committees in particular circumstances, e.g. the consideration of "called-in" items.
- 4.3 The principle of the "critical friend" should always be adhered to between Scrutiny Members and Cabinet Members, senior officers and any external partners.
- 4.4 All Members should promote an atmosphere of openness at the O&S Committee meetings and should strive to ensure that questioning and debate takes place within a climate of mutual respect and trust.
- 4.5 O&S Committee Members should be prepared to ask searching questions and where necessary, provide constructive challenge to Cabinet Members on issues that fall under their Portfolio.

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- 4.6 Cabinet Members should be willing to respond to any question put. However, it should be noted that that Cabinet Members may not necessarily be in a position to answer every question immediately or in detail. In such circumstances the matter may be referred to a senior officer in attendance or a written answer may be sought.
- 4.7 Cabinet Members should value the contribution of O&S Committee Members who raise issues and respond in an appropriate and manner, in order to make a positive contribution to Scrutiny meetings.
- 4.8 Cabinet Members should, with the permission of the Chair, be permitted by the O&S Committee to speak upon any item on the agenda under discussion and may at any time offer to assist the Committee by the provision of factual information or advice in relation to the matters under discussion.
- 4.9 The Chair, supported by senior officers, shall provide leadership and guidance to the Committee on all scrutiny matters and shall promote the Committee's role in improving services and monitoring the effectiveness of Council policies, through effective scrutiny.
- 4.10 Party politics and the use of the Party Whip shall be avoided during O&S Committees.
- 4.11 Senior officers shall liaise and agree their attendance at meetings of O&S Committees during the Municipal Year.

5. The Overview and Scrutiny Work Programme

- 5.1 The Council's Strategic Leadership Board, comprised of the Chief Executive, Executive Directors and Heads of Service, shall be invited to identify any appropriate items for inclusion in the Work Programme of O&S Committees.
- 5.2 The Work Programme of items submitted to O&S Committees at the beginning of each Municipal Year shall be drafted in liaison with the appropriate Heads of Service, whose roles fall under the remit of the Committee.
- 5.3 A manageable number of items should be identified in order to demonstrate that the scrutiny function "adds value" to the Council.
- 5.4 The O&S Committees will be responsible for setting their own work programme.
- 5.5 O&S Members are reminded at each meeting that they are able to request other items for inclusion within the Work Programme, provided such items fall within the terms of reference of the Committee.

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- 5.6 A Member of an O&S Committee is entitled to give notice to the Chief Legal and Democratic Officer that they wish an item relevant to the functions of the Committee to be included on the agenda for the next available meeting of the Committee.
- 5.7 The Cabinet and/or the Council may refer a matter to one or more O&S Committees.
- 5.8 The Chair of the O&S Committee may consider alternative methods of dealing with items in order to avoid over-loading Committee agendas. These may include informal presentations, visits to front-line services, site visits / informal discussions with external partners, etc.

6. Pre-Scrutiny

- 6.1 The Key Decision Forward Plan sets out the list of items to be submitted to the Cabinet for consideration during the following four-month period. The Forward Plan is updated and published each month. The Forward Plan appears on the Council's website and an email alert is sent to all Members of the Council when a new Forward Plan is published.
- 6.2 A summary of the latest Forward Plan, setting out the Key Decisions that fall under the remit of each O&S Committee, is submitted to each meeting of the O&S Committees and appears under the Work Programme item, a standing item on each O&S agenda.
- 6.3 O&S Members should peruse Decisions to be taken and may request to pre-scrutinise items from the Key Decision Forward Plan that fall under the remit (terms of reference) of the O&S Committee.
- 6.4 The pre-scrutiny process assists the Cabinet Members to make effective decisions by examining issues beforehand and making recommendations prior to a determination being made. Pre-scrutiny can be used to resolve potential disagreements.
- 6.5 Any items agreed for pre-scrutiny will be included within the O&S Committee's work programme.
- 6.6 Where O&S Committees request to pre-scrutinise a Key Decision, the relevant Cabinet Member should endeavour to attend the meeting concerned, in order to respond to questions, and consider the views put by O&S Members.
- 6.7 Relevant senior officers shall attend an O&S Committee meeting where a Key Decision is pre-scrutinised by O&S Members, in order to respond to questions, and consider the views put by those Members.

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- 6.8 Cabinet Members may wish to seek views from Scrutiny Members on a Key Decision, particularly on policy development and review, before it is taken. The relevant senior officer will be responsible for forwarding the details through to the Scrutiny Manager for inclusion on the agenda.
- 6.9 The O&S Committee may express views or make recommendations in relation to Decisions to be taken.
- 6.10 The Cabinet will consider any recommendations or views expressed by the O&S Committees and to take such action it sees fit.
- 6.11 Utilising the option for pre-scrutiny does not exclude the Decision from being subject to “call-in”. However, it will allow the Cabinet Member(s) the ability to consider different views and perspectives of a Decision, before it is taken and avoid potential conflict and a requirement for “call-in”.
- 6.12 Heads of Service shall be requested to identify any policy/strategy items for pre-scrutiny by the relevant O&S Committee.

7. “Call-In” of Decisions

- 7.1 Decisions taken by the Cabinet appear within the Minutes of Cabinet Meetings. The Minutes indicate the “call-in” period for the Decisions made.
- 7.2 Decisions taken by individual Cabinet Members are subject to “call-in”, are published on the Council’s website, and an email alert is sent to all Members of the Council.
- 7.3 “Call-in” can occur when three non-Executive Members have reasons/evidence to challenge the Decision, based on the guidance set out within Chapter 6 of the Council’s Constitution.
- 7.4 A decision shall only be the subject of one “call-in” by non-Executive Members.
- 7.5 Non-Executive Members shall refer to a specific Decision and in instigating the “call-in”, are required to provide as much information, detail, explanation, evidence and/or facts as possible, within the requisition. This will enable appropriate officers to determine whether the “call-in” is valid or not.
- 7.6 Non-Executive Members shall trigger the “call-in” electronically, using the Council’s Modgov system. This will alert the relevant officers and prevent the Decision from being actioned.

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- 7.7 During 2017/18, the O&S Management Board developed a [Call-In Procedure](#) to be used at O&S Committees when dealing with “called-in” items. This was agreed by the four O&S Committees and shall be adhered to at all meetings held to consider “call-in items”.
- 7.8 The following are required to attend the O&S Committee meeting to consider the “called-in” item, in order to address O&S Members on the item and respond to questions / comments raised by O&S Members:
- (a) the lead “call-in” Member;
 - (b) the Leader of the Council and/or relevant Cabinet Member; and
 - (c) relevant senior officer representative(s).
- 7.9 Only the lead call-in Member shall be permitted to:
- Address the O&S Committee, explaining the reason for “call-in”;
 - Respond to questions put by Committee Members; and
 - Sum up the case for “call-in”.
- 7.10 Subject to the agreement of the O&S Committee, a representative of the public may make representations in relation to the “called-in” item, in accordance with the Call-In Procedure previously agreed by O&S Committees.
- 7.11 The “call-in” procedure should not be abused. It should not be used as a substitute for early involvement in the decision-making process. Its use as a party-political tool should be avoided.

8. Working Group Reviews

- 8.1 Heads of Service will be requested to consider potential topics for review via the Strategic Leadership Board and these will be submitted to O&S Committees for consideration, along with any other suggestions from O&S Members. The Committee shall approve any topics to be reviewed.
- 8.2 The [Criteria Checklist for Selecting Topics for Review](#) shall be considered in approving topics to be reviewed.
- 8.3 At least 3 Members of the Committee shall be required to sit on a Working Group and one Member will be appointed as the Lead Member. Co-opted Members may sit on a Working Group.
- 8.4 Heads of Service have a valuable role to play in the review process in terms of suggesting appropriate topics for review, possibly contributing to the scope for the review, the provision of factual evidence, and identifying suitable witnesses.

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Officers involved in the review shall be open and honest in their discussions with Working Group Members.

- 8.5 The role of the Lead Officer for the review will be to assist in drafting the scope for the review, to provide professional advice and to ensure access to relevant information and personnel for Working Group Members.
- 8.6 Further to a report on Statutory Guidance on Overview and Scrutiny in Local and Combined Authorities being agreed by O&S Committees during October/November 2019, Working Groups shall consider if it is appropriate to seek the views of the general public on the matter under their consideration and, if so, how this should be carried out.
- 8.7 Working Group meetings shall be conducted in the manner outlined within paragraph 4 above. Working Group Members shall adhere to the principle of the “critical friend” during the course of a review. Constructive challenge may be adopted during discussions with Council officers, external partners, key stakeholders, etc. However, a culture of mutual respect shall be maintained at all times.
- 8.8 A final report, including any recommendations from the Working Group, will be drafted by the relevant officer from Democratic Services to reflect the views and wishes of the Working Group concerned, subject to any legal and/or financial implications provided by Legal and Finance officers.
- 8.9 Recommendations may be produced that impact on the Council or external partners.
- 8.10 The final report will be presented to the parent O&S Committee, the Cabinet, and finally to full Council.
- 8.11 The Lead Member of the Working Group concerned will normally present the final report to the Cabinet and to the Council. Where this is not possible, an alternative Member of the Working Group will be asked to present.
- 8.12 The relevant senior officer shall ensure that an update on the implementation of recommendations is presented to the parent Committee approximately six months following approval of the final report by the Council. Actions taken since approval of the recommendations should be outlined within the update, together with progress on any implementation required. Where actions have not been carried out, reasons should be given, together with an anticipated timeline for implementation.

9. Public Participation in the Overview and Scrutiny Process

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- 9.1 O&S Members should represent the voice of the public.
- 9.2 As outlined in paragraph 3.1 above, key responsibilities of O&S are to:
 - (a) Hold the Cabinet, Cabinet Members and senior officers to account for their decisions, on behalf of the electorate; and
 - (b) Review Council policy, the way policies are implemented and their impact on local citizens;
- 9.3 The Constitution indicates that O&S Committees allow citizens to have a greater say in Council matters by holding public inquiries into matters of local concern.
- 9.4 Citizens may contribute to Council considerations by participating in question time at Council meetings, making representations to the Cabinet, a Cabinet Member or a Committee and may be asked to contribute to O&S Working Group reviews.
- 9.5 The Council's petitions scheme, detailed within the Constitution, allows citizens to address O&S Committees.
- 9.6 As outlined in paragraph 7.11 above, subject to the agreement of the O&S Committee, a representative of the public may make representations in relation to the "called-in" item, in accordance with the Call-In Procedure previously agreed by O&S Committees.
- 9.7 As outlined in paragraph 9.5 above, O&S Working Groups shall consider if it is appropriate to seek the views of the general public on the matter under their consideration and, if so, how this should be carried out.
- 9.8 Senior officers may advise O&S Committees of particular matters of public concern, with a view to the possible establishment of a Working Group review to address such matters.
- 10. Specific Duty of the Overview and Scrutiny Committee (Adult Social Care and Health) – Joint Health Scrutiny Arrangements**
- 10.1 Local authorities may review and scrutinise any matter relating to the planning, provision and operation of the health service in its area.
- 10.2 The NHS Act 2006 (as amended by the Health and Social Care Act 2012) places a statutory duty on commissioners and providers of NHS / health services to consult local authority health overview and scrutiny committees on any proposals for significant development or substantial variation/reconfiguration in health services.

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- 10.3 Section 30 of The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provides that where more than one local authority is consulted on proposals for significant development or substantial variation in health services, a joint overview and scrutiny committee may be established to comment on the proposals for change.
- 10.4 The Council has delegated its duties relating to health services to the Overview and Scrutiny Committee (Adult Social Care and Health).
- 10.5 At its meeting on 3 June 2014, the Council approved the [Protocol for the Establishment of Joint Health Scrutiny Arrangements for Cheshire and Merseyside](#).
- 10.6 The Council and the Overview and Scrutiny Committee (Adult Social Care and Health) shall adhere to the Protocol in relation to substantial variations and joint health scrutiny arrangements.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	5 January 2020
Subject:	Work Programme 2020/21, Scrutiny Review Topics and Key Decision Forward Plan		
Report of:	Chief Legal and Democratic Officer	Wards Affected:	All
Cabinet Portfolio:	Adult Social Care and Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

To review the Committee's Work Programme for the remainder of the Municipal Year 2020/21; to report on progress of the Mental Health Issues Working Group; to identify any items for pre-scrutiny by the Committee from the latest Key Decision Forward Plan; to receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; and to note the update by Healthwatch.

Recommendations:

That:

- (1) the Work Programme for 2020/21, as set out in Appendix A to the report, be considered, along with any additional items to be included and thereon be agreed;
- (2) the progress made by the Mental Health Issues Working Group be noted;
- (3) items for pre-scrutiny from the Key Decision Forward Plan which fall under the remit of the Committee, as set out in Appendix B to the report, be considered and any agreed items be included in the work programme referred to in (1) above;
- (4) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted; and
- (5) the recent activities undertaken by Healthwatch Sefton, as outlined in Appendix C to the report, be noted.

Reasons for the Recommendations:

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To determine the Work Programme of items to be considered during the Municipal Year 2020/21; to identify scrutiny review topics which would demonstrate that the work of the Overview and Scrutiny “adds value” to the Council; and to comply with a decision of the Committee to update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee.

The pre-scrutiny process assists Cabinet Members to make effective decisions by examining issues before making formal decisions.

Alternative Options Considered and Rejected: (including any Risk Implications)

No alternative options have been considered as the Overview and Scrutiny Committee needs to approve its Work Programme; to potentially consider scrutiny review topics; and consider other activities in relation to the work of the Committee.

What will it cost and how will it be financed?

There are no direct financial implications arising from this report. Any financial implications arising from the consideration of a key decision or relating to a recommendation arising from a Working Group review will be reported to Members at the appropriate time.

(A) Revenue Costs – see above

(B) Capital Costs – see above

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): None
Legal Implications: None
Equality Implications: There are no equality implications.

Contribution to the Council’s Core Purpose:

Protect the most vulnerable: None directly applicable to this report. Reference in the Work Programme to the approval of, and monitoring of recommendations, will contribute towards protecting vulnerable members of Sefton’s communities.
Facilitate confident and resilient communities: None directly applicable to this report
Commission, broker and provide core services: None directly applicable to this report
Place – leadership and influencer: None directly applicable to this report.
Drivers of change and reform: None directly applicable to this report
Facilitate sustainable economic prosperity: None directly applicable to this report
Greater income for social investment: None directly applicable to this report

Cleaner Greener: None directly applicable to this report
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What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Work Programme and Key Decision Forward Plan Report is not subject to FD/LD consultation. Any specific financial and legal implications associated with any subsequent reports will be reported to Members as appropriate.

Relevant Heads of Service have been consulted in the preparation of the Work Programme for the Committee.

(B) External Consultations

Not applicable

Implementation Date for the Decision

Immediately following the Committee meeting.

Contact Officer:	Debbie Campbell
Telephone Number:	0151 934 2254
Email Address:	debbie.campbell@sefton.gov.uk

Appendices:

The following appendices are attached to this report:

- Appendix A - Work Programme for 2020/21;
- Appendix B – Latest Key Decision Forward Plan items relating to this Overview and Scrutiny Committee.
- Appendix C – Update of recent activities undertaken by Healthwatch Sefton.

Background Papers:

There are no background papers available for inspection.

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Introduction/Background

1. WORK PROGRAMME 2020/21

- 1.1 The Work Programme of items to be submitted to the Committee for consideration during the remainder of the Municipal Year 2020/21 is attached at **Appendix A** to the report. The programme has been produced in liaison with the appropriate Heads of Service, whose roles fall under the remit of the Committee.
- 1.2 Members are requested to consider whether there are any other items that they wish the Committee to consider, that fall within the terms of reference of the Committee. The Work Programme will be submitted to each meeting of the Committee during 2020/21 and updated, as appropriate.
- 1.3 **The Committee is requested to comment on the Work Programme for the remainder of 2020/21, as appropriate, and note that additional items may be submitted to the Programme at future meetings of the Committee during this Municipal Year.**

2. SCRUTINY REVIEW TOPIC 2020/21

- 2.1 At meeting of the Committee held on 1 September 2020, Members considered that a working group could be established to consider mental health services and the prevention of issues.

- 2.2 The Committee:

“RESOLVED: That

- (2) a working group be established to consider mental health services and the prevention of issues, consisting of Councillors Howard and Roscoe, and Mr. Roger Hutchings, Healthwatch;”

- 2.3 Councillor Roscoe has been appointed as the Lead Member for the Working Group and meetings have been held as follows:

Meeting Date	Activity
20 October 2020	Discussion on the wide remit of mental health and on which documents to consider.
17 November 2020	Consideration of various documents and scoping of the review.
8 December 2020	Consideration of various documents and possible witnesses to interview.

The Terms of Reference and Objectives for the review are as follows:

- (1) data on the number of people waiting to access services.
 - (2) a review of previous strategies – what has worked well and what could be improved.
 - (3) how to recommend greater integration.
 - (4) information on the need for services and the spending profile for services in Sefton.
- 2.4 **The Committee is requested to note the progress made by the Mental Health Issues Working Group;**

3. PRE-SCRUTINY OF ITEMS IN THE KEY DECISION FORWARD PLAN

- 3.1 Members may request to pre-scrutinise items from the Key Decision Forward Plan which fall under the remit (terms of reference) of this Committee. The Forward Plan, which is updated each month, sets out the list of items to be submitted to the Cabinet for consideration during the next four-month period.
- 3.2 The pre-scrutiny process assists the Cabinet Members to make effective decisions by examining issues beforehand and making recommendations prior to a determination being made.
- 3.3 The Overview and Scrutiny Management Board has requested that only those key decisions that fall under the remit of each Overview and Scrutiny Committee should be included on the agenda for consideration.
- 3.4 The latest Forward Plan, published on 30 November 2020, is attached at **Appendix B** for this purpose. For ease of identification, items listed on the Forward Plan for the first time appear as shaded.
- 3.5 There are two items within the current Plan that fall under the remit of the Committee on this occasion, namely:
 - Infection Control Fund; and
 - Parkhaven Court Maghull - Award of Contract for the provision of Extra Care
- 3.6 Should Members require further information in relation to any item on the Key Decision Forward Plan, would they please contact the relevant Officer named against the item in the Plan, prior to the Meeting.
- 3.7 **The Committee is invited to consider items for pre-scrutiny from the Key Decision Forward Plan as set out in Appendix B to the report, which fall under the remit of the Committee and any agreed items be included in the Work Programme referred to in (1) above.**

4. LIVERPOOL CITY REGION COMBINED AUTHORITY OVERVIEW AND SCRUTINY COMMITTEE

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- 4.1 During the October/November 2019 cycle of meetings, the Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees considered a report on the guidance produced by the Ministry of Housing, Communities and Local Government relating to Overview and Scrutiny in Local and Combined Authorities following on from the Communities and Local Government Select Committee's inquiry into Overview and Scrutiny. This Committee considered the matter at its meeting held on 15 October 2019 (Minute No. 32 refers).
- 4.2 The Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees all agreed the recommendations contained in the report, one of which being that updates on Liverpool City Region Combined Authority Overview and Scrutiny Committee (LCRCA O&S) be included in the Work Programme report considered at each Overview and Scrutiny Committee meeting.
- 4.3 In accordance with the above decision, information on the LCRCA O&S is set out below.

4.4 **Role**

The Overview and Scrutiny Committee was established by the Combined Authority in May 2017 in accordance with the Combined Authorities Order 2017.

The role of the Overview and Scrutiny Committee is to:

- Scrutinise the decision and actions taken by the Combined Authority or the Metro Mayor;
- Provide a "critical friend" to policy and strategy development;
- Undertake scrutiny reviews into areas of strategic importance for the people of the Liverpool City Region; and
- Monitor the delivery of the Combined Authority's strategic plan.

4.5 **Membership**

The Committee is made up of 3 elected Members from each of the constituent Local Authorities of the LCR Combined Authority, along with one elected Member from both the Liverpool City Region Liberal Democrat Group and the Liverpool City Region Conservative Group.

Sefton's appointed Members are Councillors Dowd, Howard and Marshall. Councillor Dowd is Sefton's Scrutiny Link.

Councillors Pugh and Sir Ron Watson are the respective representatives of the Liverpool City Region Liberal Democrat Group and the Liverpool City Region Conservative Group.

4.6 **Chair and Vice-Chair**

The Chair and Vice-Chair of the LCRCA O&S cannot be a Member of the majority group. Councillor Thomas Crone, a Green Party Councillor serving on Liverpool City Council, has been appointed Chair for the 2020/21 Municipal Year. Councillor Andy Corkhill, a Liberal Democrat Councillor serving on Wirral Metropolitan Borough Council, has been appointed Vice-Chair for the 2020/21 Municipal Year.

4.7 Quoracy Issues

A high number of meetings of the LCRCA O&S have been inquorate.

The quorum for meetings of the LCRCAO&S is 14, two-thirds of the total number of members, 20. This high threshold is not set by the Combined Authority but is set out in legislation.

The Combined Authority's Monitoring Officer will be looking to work with the Monitoring Officers from the other Combined Authorities to identify what problems they are experiencing with Scrutiny and how/if they had overcome them. Representations to Government would also be considered once all options locally to resolve the quorum issue had been exhausted. The CA Monitoring Officer would then be able to provide evidence to Government that the quorum level was obstructing the work of scrutiny within the CA.

4.8 Meetings

Information on all meetings and membership of the LCRCAO&S can be obtained using the following link:

<https://moderngov.merseytravel.gov.uk/ieListMeetings.aspx?CId=365&Year=0>

4 November 2020

The most recent meeting of the LCRCA O&S was held on 4 November 2020, remotely, and the meeting was quorate. The LCRCA O&S was asked to consider the following business:

- Apologies for Absence;
- Declarations of Interest;
- Minutes of the Last Meeting held on 9th September 2020;
- Metro Mayor S Rotheram's Update;
- Youth Unemployment;
- The Liverpool City Region Spatial Development Strategy - Phase 2 Engagement Proposals;
- Finalising the Liverpool City Region's Air Quality Action Plan;
- Overview and Scrutiny Committee Annual Report 2019-20;
- Public Engagement at the Overview and Scrutiny Committee;
- LCR LEP Task and Finish Review - Outcome of Consideration by the LCR LEP Board and the LCR Combined Authority;
- Any Other Business

The Minutes of the above meeting will be made available using the link referred to above, in due course.

The next meeting of the LCRCA O&S is scheduled to be held on 14 January 2021 and will be a budget meeting.

Details of all meetings can be obtained using the link referred to above.

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Councillor Howard is a Member of the LCRCA O&S Committee and may wish to comment on the recent meeting and any other activities undertaken by the Committee.

4.9 *The Committee is requested to note the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee.*

5. HEALTHWATCH SEFTON

5.1 An update of recent activities undertaken by Healthwatch Sefton is attached to this report at **Appendix C**, for information.

5.2 *The Committee is requested to note recent activities undertaken by Healthwatch Sefton.*

OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

WORK PROGRAMME 2020/21

Date of Meeting	23 JUNE 20 Bootle CANCELLED	01 SEPTEMBER 20 Remote Meeting	13 OCTOBER 20 Remote Meeting	05 JANUARY 21 Remote Meeting	23 FEBRUARY 21 Remote/Bootle
Item					
Regular Reports:					
Cabinet Member Update Report (Julie Leahair/Julie Eliot/Debbie Campbell)			X	X	X
Work Programme Update (Debbie Campbell)		X	X	X	X
CCGs' Update Report (CCGs)			X	X	X
Health Provider Performance Dashboard (CCGs)			X	X	X
Service Operational Reports:					
Covid-19 Response (Deborah Butcher/Margaret Jones)		X			
Corona Virus Outbreak Management Plan (Deborah Butcher/Margaret Jones)		X			
Draft Executive / Scrutiny Protocol (Debbie Campbell)			X		

APPENDIX A

Item	23 JUNE 20 Bootle CANCELLED	01 SEPTEMBER 20 Remote Meeting	13 OCTOBER 20 Remote Meeting	05 JANUARY 21 Remote Meeting	23 FEBRUARY 21 Remote/Bootle
Service Operational Reports (Continued):					
Winter Plan (Deborah Butcher/Ellie Moulton)			X		
Adult Social Care Vision (Deborah Butcher/Ellie Moulton)			X		
Centre for Public Scrutiny - 10 Questions to ask if you are Scrutinising Climate Change (Paul Fraser)			X		
Climate Emergency Progress Report – Presentation (Stephanie Jukes)			X		
Market Position Statement - Care Homes (Deborah Butcher/Ellie Moulton)				X	
Executive/Scrutiny Protocol (Paul Fraser)				X	
Care Home Strategy (Deborah Butcher/Ellie Moulton)					X
Integrated Commissioning (Deborah Butcher/Ellie Moulton)					X
Safeguarding of Adults (Deborah Butcher/Ellie Moulton)					X

APPENDIX A

Item	23 JUNE 20 Bootle CANCELLED	01 SEPTEMBER 20 Remote Meeting	13 OCTOBER 20 Remote Meeting	05 JANUARY 21 Remote Meeting	23 FEBRUARY 21 Remote/Bootle
CCGs' Updates					
Merger of North Mersey CCGs (CCGs)		X			
NHS Updates:					
Mersey Care – Integrated Care Teams - Presentation (Alisa Nile/Pat McGuinness)			X		

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SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

FOR THE FOUR MONTH PERIOD 1 JANUARY 2021 - 30 APRIL 2021

This Forward Plan sets out the details of the key decisions which the Cabinet, individual Cabinet Members or Officers expect to take during the next four month period. The Plan is rolled forward every month and is available to the public at least 28 days before the beginning of each month.

A Key Decision is defined in the Council's Constitution as:

1. any Executive decision that is not in the Annual Revenue Budget and Capital Programme approved by the Council and which requires a gross budget expenditure, saving or virement of more than £100,000 or more than 2% of a Departmental budget, whichever is the greater;
2. any Executive decision where the outcome will have a significant impact on a significant number of people living or working in two or more Wards

Anyone wishing to make representations about any of the matters listed below may do so by contacting the relevant officer listed against each Key Decision, within the time period indicated.

Under the Access to Information Procedure Rules set out in the Council's Constitution, a Key Decision may not be taken, unless:

- it is published in the Forward Plan;
- 5 clear days have lapsed since the publication of the Forward Plan; and
- if the decision is to be taken at a meeting of the Cabinet, 5 clear days notice of the meeting has been given.

The law and the Council's Constitution provide for urgent key decisions to be made, even though they have not been included in the Forward Plan in accordance with Rule 26 (General Exception) and Rule 28 (Special Urgency) of the Access to Information Procedure Rules.

Copies of the following documents may be inspected at the Town Hall, Oriel Road, Bootle L20 7AE or accessed from the Council's website: www.sefton.gov.uk

- Council Constitution
- Forward Plan
- Reports on the Key Decisions to be taken
- Other documents relating to the proposed decision may be submitted to the decision making meeting and these too will be made available by the contact officer named in the Plan
- The minutes for each Key Decision, which will normally be published within 5 working days after having been made

Some reports to be considered by the Cabinet/Council may contain exempt information and will not be made available to the public. The specific reasons (Paragraph No(s)) why such reports are exempt are detailed in the Plan and the Paragraph No(s) and descriptions are set out below:-

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1. Information relating to any individual
2. Information which is likely to reveal the identity of an individual
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under, the Authority
5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings
6. Information which reveals that the authority proposes a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or b) to make an order or direction under any enactment
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime
8. Information falling within paragraph 3 above is not exempt information by virtue of that paragraph if it is required to be registered under—
 - (a) the Companies Act 1985;
 - (b) the Friendly Societies Act 1974;
 - (c) the Friendly Societies Act 1992;
 - (d) the Industrial and Provident Societies Acts 1965 to 1978;
 - (e) the Building Societies Act 1986; or
 - (f) the Charities Act 1993.
9. Information is not exempt information if it relates to proposed development for which the local planning authority may grant itself planning permission pursuant to regulation 3 of the Town and Country Planning General Regulations 1992
10. Information which—
 - (a) falls within any of paragraphs 1 to 7 above; and
 - (b) is not prevented from being exempt by virtue of paragraph 8 or 9 above, is exempt information if and so long, as in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

Members of the public are welcome to attend meetings of the Cabinet and Council which are held at the Town Hall, Oriel Road, Bootle or the Town Hall, Lord Street, Southport. The dates and times of the meetings are published on www.sefton.gov.uk or you may contact the Democratic Services Section on telephone number 0151 934 2068.

NOTE:

For ease of identification, items listed within the document for the first time will appear shaded.

Dwayne Johnson
Chief Executive

FORWARD PLAN INDEX OF ITEMS

Item Heading	Officer Contact
Infection Control Fund	Neil Watson neil.watson@sefton.gov.uk Tel: 0151 934 3744
Parkhaven Court Maghull - Award of Contract for the Provision of Extra Care	Alison Taylor alison.taylor@sefton.gov.uk Tel: 0151 934 3936

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	Infection Control Fund To seek approval of proposals relating to the use of the remaining funding from the Department of Health & Social Care Infection Control Fund			
Decision Maker	Cabinet			
Decision Expected	7 Jan 2021			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Persons/Organisations to be Consulted	Officers, CCG colleagues and Care & Support Providers			
Method(s) of Consultation	Meetings, emails and Provider Forums.			
List of Background Documents to be Considered by Decision-maker	Infection Control Fund			
Contact Officer(s) details	Neil Watson neil.watson@sefton.gov.uk Tel: 0151 934 3744			

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	Parkhaven Court Maghull - Award of Contract for the Provision of Extra Care To put a new contract in place to replace the current contract which expires 31 March 2021			
Decision Maker	Cabinet			
Decision Expected	7 Jan 2021			
Key Decision Criteria	Financial	No	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Persons/Organisations to be Consulted	Cabinet Member – Adult Social Care, Executive Director of Corporate Resources and Customer Services and the Chief Legal and Democratic Officer			
Method(s) of Consultation	Emails and briefings			
List of Background Documents to be Considered by Decision-maker	Parkhaven Court Maghull - Award of Contract for the provision of Extra Care			
Contact Officer(s) details	Alison Taylor alison.taylor@sefton.gov.uk Tel: 0151 934 3936			

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Update from Healthwatch Sefton for OSC

Update from Healthwatch Sefton

In November, Healthwatch Sefton won a 'Highly Commended' national award for Adult Safeguarding which has helped leaders understand what safeguarding really means to local people and staff across the Merseyside area. Healthwatch Sefton had been shortlisted under the 'The impact we make with partners' category in the Healthwatch Awards 2020, which are run by Healthwatch England.

In terms of our work plan we have a project group which is planning virtual engagement work with care homes in the New Year and case studies on the impact of restricted visiting for families and residents were shared at the December meeting of the Merseyside Adult Safeguarding Board. We have also been working with colleagues from Sefton on the development of the care home strategy and will support the work to 'enhance the voice of residents, families and advocates. We are also a member on the care home capital grants panel.

We have been focussing on GP access and have been working with a number of local GP practices across the borough to support them in gathering independent feedback on their services which includes access. Practices will be adding our feedback centre to their websites and sending text messages to their patients to encourage them to provide feedback. There will also be methods in place for those who are digitally excluded to also share their feedback.

On the 10th December, an online engagement event was held with Sefton residents to capture feedback about services provided by Liverpool University Hospitals NHS Foundation Trust. A report will be produced which will support the trust in setting its priorities for patient experience which will be a key part of the quality strategy.

Diane Blair BA (Hons) MSc

Manager

0151 920 0726 ext 236



You can receive newsletters and updates by signing up [here](#)

Don't forget our Healthwatch Sefton Signposting can help you find the right Health or Social care services. Call free today for independent up-to-date information.

Agenda Item 9

APPENDIX C

Freephone:0800 206 1304



Healthwatch Sefton
Sefton Council for Voluntary Service (CVS)
3rd Floor, Suite 3B
North Wing, Burlington House,
Crosby Road North, Waterloo, L22 0LG

www.healthwatchsefton.co.uk