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Sefton Council



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

DATE: Tuesday, 18th October 2022

TIME: 6.30 pm

VENUE: Town Hall, Bootle

Member

Councillor
Cllr. Carla Thomas (Chair)
Cllr. Greg Myers (Vice-Chair)
Cllr. Iain Brodie - Browne
Cllr. Tony Brough
Cllr. Linda Cluskey
Cllr. Sean Halsall
Cllr. John Joseph Kelly
Cllr. Nina Killen
Cllr. Laura Lunn-Bates
Cllr. Dr. John Pugh
Diane Blair, Healthwatch
Brian Clark, Healthwatch

Substitute

Councillor
Cllr. Carol Richards
Cllr. Robert Brennan
Cllr. Gareth Lloyd-Johnson
Cllr. Sir Ron Watson C.B.E.
Cllr. Michael Roche
Cllr. Veronica Webster
Cllr. Sonya Kelly
Cllr. Paul Tweed
Cllr. Judy Hardman
Cllr. Leo Evans

COMMITTEE OFFICER: Debbie Campbell, Senior Democratic Services Officer
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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.

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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 room, including from the public gallery, 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 to determine whether the Member should withdraw from the meeting room, including from the public gallery, 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 6 September 2022

4. Liverpool University Hospital NHS Foundation Trust - Update

Dr. Clare Morgan, Director Strategy, Liverpool University Hospital NHS Foundation Trust, to attend

5. Safeguarding Update

(Pages 13 - 22)

Report of the Executive Director of Adult Social Care and Health

6. NHS Cheshire and Merseyside, Sefton - Update Report

(Pages 23 - 30)

Report of the Place Director, NHS Cheshire and Merseyside (Sefton)

7. NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard

(Pages 31 - 44)

Report of the Place Director, NHS Cheshire and Merseyside (Sefton)

- 8. Cabinet Member Reports** (Pages 45 - 60)
Report of the Chief Legal and Democratic Officer
- 9. Work Programme Key Decision Forward Plan** (Pages 61 - 86)
Report of the Chief Legal and Democratic Officer

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OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

MEETING HELD AT THE TOWN HALL, SOUTHPORT
ON TUESDAY 6TH SEPTEMBER, 2022

PRESENT: Councillor Thomas (in the Chair)
Councillor Myers (Vice-Chair)
Councillors Brough, Cluskey, Evans (Substitute Member for Councillor Pugh), Halsall, John Joseph Kelly, Killen, Lloyd-Johnson (Substitute Member for Councillor Brodie-Browne) and Lunn-Bates

ALSO PRESENT: Councillor Moncur, Cabinet Member – Health and Wellbeing.

9. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Brodie-Browne and Pugh; Councillor Cummins, Cabinet Member – Adult Social Care; and Diane Blair, Healthwatch Representative.

10. DECLARATIONS OF INTEREST

No declarations of any disclosable pecuniary interests or personal interests were received.

11. MINUTES OF THE PREVIOUS MEETING

That the Minutes of the meeting held on 21 June 2022, be confirmed as a correct record.

12. DOMESTIC ABUSE UPDATE

The Committee considered the report of the Head of Communities updating on Sefton's strategic approach to tackling domestic abuse, including an overview of the Domestic Abuse Act and work of the Sefton Domestic Abuse Partnership Board to date. The report set out the background to the matter; an overview of the Domestic Abuse Act; local authority statutory duties within the Act; the roles and responsibilities of the Sefton Domestic Abuse Partnership Board; links to other national/statutory guidance; and cross-partnership collaboration.

The Terms of Reference for the Sefton Domestic Abuse Partnership Board were attached to the report at Appendix A.

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

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- Methods by which the Sefton Domestic Abuse Partnership Board inter-connected to other safeguarding boards and collaborative working.
- Revenue costs associated with victims of domestic abuse.
- Refuges and safe accommodation.
- The main benefits of the Domestic Abuse Act.
- Work with perpetrators.
- Support available for male victims.
- Any potential for conflict for members of the Sefton Domestic Abuse Partnership Board who sat on other Boards.
- Preventative work being undertaken.
- The proportion of female to male victims and numbers of incidents.
- Communications strategies used to encourage male victims to report incidents.
- Recognition of adverse childhood experiences and their impact on individuals.
- The development of a Domestic Abuse Strategy and reporting on progress and performance.

RESOLVED:

That the report be noted.

13. SEFTON PARTNERSHIP DEVELOPMENT UPDATE

The Committee considered the report of the Executive Director of Adult Social Care and Health / Place Director, Sefton, Cheshire and Merseyside Integrated Care Board, that provided an update on the establishment of a Sefton Partnership. This was as a result of the Royal assent given to the Health and Care Act 2022 in April 2022, and the Act introduced significant reforms to the organisation and delivery of health and care services in England. The report set out the background to the matter; provided key updates; together with guidance on the role of Overview and Scrutiny.

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

- The challenges facing social care.
- Concerns regarding changes in funding for social care. More detailed information could be provided in due course.
- Cost implications for local authorities regarding the reduction of protection against very high care costs and the associated risks.
- Concerns regarding the Live Well Core Objective and the reduction in usage of secondary health services for those with complex lives.
- Assurances were sought that integration would not require having to travel further to receive health services.
- Clarification regarding the governance structure. Further information could be provided.

RESOLVED: That

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- (1) the content of the report be received and noted;
- (2) the Committee be invited to engage on further work on the requirements of the Health and Care Act 2022 and within the policy document on local accountability;
- (3) the Executive Director of Adult Social Care and Health / Place Director be requested to provide:
 - (a) more detailed information to the Committee, regarding changes in the funding of social care, in due course; and
 - (b) information on the governance structure for the Integrated Care System to the Senior Democratic Services Officer, for circulation to Members of the Committee.

14. OVERVIEW & SCRUTINY MENTAL HEALTH REVIEW

Further to Minute No. 23 of 7 September 2021, the Committee considered the report of the Executive Director of Adult Social Care and Health / Place Director, that presented the progress on implementation of the findings and recommendation of the former Mental Health Issues Working Group.

The findings and recommendations from the Working Group were being taken forward as part of the Sefton Mental Health Programme Task and Finish Group which consisted of key representatives from Sefton Council, Sefton Clinical Commissioning Groups, Mersey Care NHS Foundation, Sefton CVS and the wider Voluntary, Community and Faith Sector.

The report set out progress updates against each of the recommendations made by the Working Group.

RESOLVED:

That the report be noted.

15. NHS CHESHIRE AND MERSEYSIDE, SEFTON - UPDATE REPORT

The Committee considered the report of the Sefton Place Director, NHS Cheshire and Merseyside, that provided an update about the work of the CCGs. The report outlined details of the following:

- Introduction to Deborah Butcher, Sefton Place Director
- Sefton Partnership Board meetings
- Sefton Partnership Governance
- ICB Board meeting - September
- Update on Shaping Care Together Engagement
- GP Out of Hours Services – Business Continuity

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- GP Access Survey – Next Steps
- Patient Participation Support with Healthwatch Sefton
- A&E Pressures/Winter Plans and National Position
- Dermatology
- Estates Configuration
- Enhanced Access
- Crisis Café Case Studies
- Health Checks and Covid Vaccination Bus
- Long Covid Service

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

- Increased utilisation of the Enhanced Access service.
- Provision of services for those people without on-line access.
- Problems associated with buildings, particularly Crosby Village Surgery, and issues associated with the Disability Discrimination Act.
- Issues associated with access to GP appointments, particularly for older people.
- Issues with appointments and prescribing associated with the Dermatology service.
- The recent National GP Access Survey. The Survey could be submitted to the Committee for consideration, in due course.
- Issues associated with NHS 111 appointments.
- The use of social media to raise awareness of services.
- Clinicians available at the Out of Hours service.

RESOLVED: That

- (1) the joint update report submitted by the Clinical Commissioning Groups be received; and
- (2) the Executive Director of Adult Social Care and Health/Place Director be requested to submit the results of the recent National GP Access Survey to the Committee for consideration, in due course.

16. SEFTON CLINICAL COMMISSIONING GROUPS - HEALTH PROVIDER PERFORMANCE DASHBOARD

The Committee considered the report of the Sefton Place Director, NHS Cheshire and Merseyside, 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 Liverpool University Hospital NHS Foundation Trust (LUHFT). Information on the monitoring of the 7-day GP extended access scheme, and ambulance response times were also included within the data.

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

- Performance of cancer 62-day screening at LUHFT. The clinical lead could be invited to meet with Members.
- Delays in diagnosis and referral to secondary care.
- Cancer performance in the north of the Borough compared to the south. More detail could be provided.
- The Friends and Family Test for A&E at Southport and Ormskirk Hospital NHS Trust. This could be queried.
- Planning for winter pressures and the likely impact of the cost-of-living crisis.
- Ambulance response times and differences between category 4 performance in the north and south of the Borough. This could be queried.
- Uptake of the covid vaccine.
- Ambulance waiting times at A&E.
- Support for paramedics. Further detail could be sought from the North West Ambulance Service (NWAS).
- Trends in Mental Health IAPT waiting times. Further detail could be provided.

RESOLVED: That

- (1) the information on Health Provider Performance be noted; and
- (2) the Sefton Place Director, NHS Cheshire and Merseyside, be requested to give consideration to the provision of information on the following for Members of the Committee:
 - Inviting the clinical lead on cancer screening to meet with Members of the Committee;
 - Further detail on cancer performance in the north of the Borough compared to the south;
 - Further detail on the Friends and Family Test for A&E at Southport and Ormskirk Hospital NHS Trust;
 - Information from the North West Ambulance Service (NWAS) on ambulance response/waiting times and support for paramedics; and
 - Trends in Mental Health IAPT waiting times.

17. 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.

The Cabinet Member update report – Adult Social Care, attached to the report at Appendix A, outlined information on the following:

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- Update on recent Adult Social Care Peer Review
- Integration and National Policy Update
- Life Course Commissioning
 - Fee Increases for 2022/23
 - Domiciliary Care
- Adult Social Care Budget
 - Charging Reform / Cost of Care / Market Sustainability
- Adult Social Care Complaints Overview
 - Local Government and Social Care Ombudsman: Annual Review Letter 2021/22
- System Pressures - Hospital and Access into Social Care
 - Impact of the New Royal
- Performance and Key Areas of Focus
 - Admission into care & reablement
 - Self-directed support & direct payments
 - Employment
 - Housing
 - Safeguarding

The Cabinet Member update report – Health and Wellbeing, attached to the report at Appendix B, outlined information on the following:

Public Health:

- COVID-19 Update
- CHAT Health Survey
- Health Checks
- NCMP Data
- Public Health Risk Register
- Healthy Weight Declaration (HWD)
- Start Well
- Supplemental Substance Misuse Treatment & Recovery Grant Allocation
- Grant Funding for Individual Advisors for Substance Use Services
- Sexual Health Needs Assessment
- Public Health Outcomes Framework (PHOF)
- Combatting Drugs Partnership
- Extension of Sexual Health Service Contract

Leisure Update

Domestic Abuse

Communities Quarterly Performance Dashboard

3G Pitch Development

Councillor Moncur, Cabinet Member – Health and Wellbeing, attended the meeting to present his report and to respond to any questions.

RESOLVED:

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

18. 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 2022/23;
- reporting on progress of the Mental Health Issues Working Group;
- reporting on progress of informal briefing sessions for Committee Members to be held during 2022/23;
- identifying any items for pre-scrutiny by the Committee from the Key Decision Forward Plan;
- receiving an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee;
- reporting on progress made by the Joint Health Scrutiny Committee in considering proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire;
- reporting on progress made by the Joint Health Scrutiny Committee in considering proposals in relation to clinical service integration for a number of services delivered by Liverpool University Hospitals NHS Foundation Trust (LUFT);
- reporting on progress of the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board; and
- noting the update by Healthwatch Sefton.

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

- An additional item to be included in the Work Programme on the cost-of-living crisis.

Suggestions for informal briefing sessions included the following:

- Inviting representatives from Mersey Care NHS Foundation Trust;
- the Care Quality Commission (CQC) inspection of Adult Social Care.

RESOLVED: That

- (1) the Work Programme for 2021/22, as set out in Appendix A to the report, be noted, along with any additional items to be included and thereon be agreed;
- (2) the following additional item be added to the Committee's Work Programme for 2022/23:

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the Executive Director of Adult Social Care and Health/Place Director and the Director of Public Health be requested to submit an additional item on the cost-of-living crisis to a future meeting of the Committee;

- (3) progress made to date on the recommendations made by the Mental Health Issues Working Group, be noted;
- (4) progress of informal briefing sessions for Committee Members to be held during 2022/23 be noted, and consideration be given to the suggestions on Mersey Care NHS Foundation Trust and the Care Quality Commission (CQC) inspection of Adult Social Care;
- (5) the contents of the Key Decision Forward Plan for the period 1 September to 31 December 2022, and for the period 1 October 2022 to 31 January 2023, be noted;
- (6) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted;
- (7) the progress made on the Joint Health Scrutiny Committee (Hyper-Acute Services), be noted;
- (8) the progress made on the Joint Health Scrutiny Committee – Liverpool University Hospitals University Foundation Trust (LUFT), be noted;
- (9) the progress of the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board, be noted; and
- (10) the recent activities undertaken by Healthwatch Sefton, as outlined in Appendix D to the report, be noted.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	Tuesday 18 October 2022
Subject:	Safeguarding Update		
Report of:	Executive Director of Adult Social Care and Health	Wards Affected:	All wards
Portfolio:	Adult Social Care		
Is this a Key Decision:	N	Included in Forward Plan:	No
Exempt / Confidential Report:	N		

Summary:

This report seeks to provide an update to Overview and Scrutiny Committee on current safeguarding activity across the Sefton Borough and to provide assurance on the actions being taken to mitigate risk and investigate safeguarding concerns. It provides a particular focus on safeguarding across the care home market.

Recommendation(s):

(1) The contents of the report are received and noted.

Reasons for the Recommendation(s):

The report is for the Committee's information only.

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

Not applicable

What will it cost and how will it be financed?

(A) Revenue Costs

The contents of this report have no direct revenue costs.

(B) Capital Costs

The contents of this report have no direct capital costs.

Implications of the Proposals:

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Resource Implications (Financial, IT, Staffing and Assets):	
Legal Implications:	
Care Act 2014	
Equality Implications:	
There are no equality implications.	
Climate Emergency Implications:	
The recommendations within this report will:	
Have a positive impact	N
Have a neutral impact	Y
Have a negative impact	N
The Author has undertaken the Climate Emergency training for report authors	Y
The contents of this report have a neutral impact on the Climate Emergency.	

Contribution to the Council's Core Purpose:

Protect the most vulnerable: safeguarding is a critical function to this purpose.
Facilitate confident and resilient communities: safeguarding contributes to supporting this core purpose.
Commission, broker and provide core services: safeguarding is a complimentary function to this core purpose.
Place – leadership and influencer: upholding robust safeguarding response is key to this core purpose.
Drivers of change and reform: lessons learnt through safeguarding is a key contributor to this core purpose.
Facilitate sustainable economic prosperity: N/A
Greater income for social investment: N/A
Cleaner Greener N/A

What consultations have taken place on the proposals and when?

(A) Internal Consultations

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The Executive Director of Corporate Resources and Customer Services (FD.6973/22) and the Chief Legal and Democratic Officer (LD.5173/22) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Not applicable

Implementation Date for the Decision

Immediately following the Committee meeting.

Contact Officer:	Joan Coupe
Telephone Number:	
Email Address:	joan.coupe@sefton.gov.uk

Appendices:

There are no appendices to this report.

Background Papers:

There are no background papers available for inspection.

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1. Introduction

This report provides an overview of current concerns relating to care settings across Sefton for adults with care support needs. Safeguarding vulnerable people is a statutory responsibility of the Local Authority under the Care Act 2014. There are over 130 care homes in Sefton that serve more than 3,000 people. There is a mixture of Council funded, health funded, privately funded and other Local Authority funded placements in all settings.

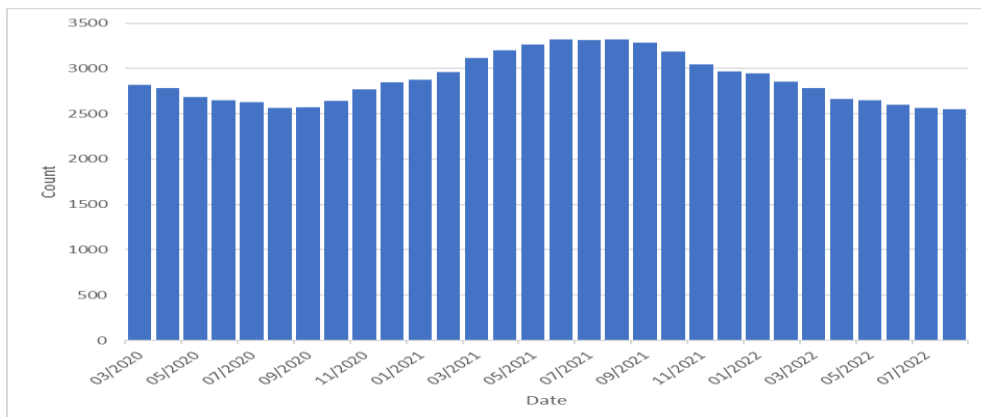
The Care Act requires Local Authorities to:

- Make enquiries (under Section 42) if it believes that an adult with care and support needs is experiencing neglect or abuse to determine all necessary actions to reduce / remove on-going risks and abusive practices.
- Establish a Safeguarding Adults Board to receive assurance from all organisations and partners that measures are in place and steps are taken to promptly address abuse or neglect as it is identified.
- Arrange independent advocacy to support adults with care and support needs subject to safeguarding adult enquiry.

2. Safeguarding Activity during the last 12months

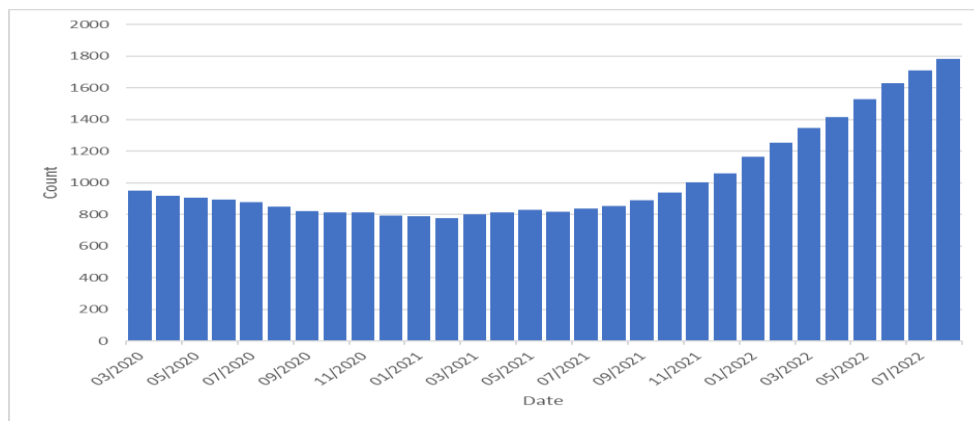
2.1 In the last 12 months Sefton has received just over 2,500 contacts relating to safeguarding. This equates to around 212 contacts per month. During the initial stages of the COVID pandemic the number of safeguarding contacts saw a slight decline of around 9% on pre-COVID number. From around October 2021 numbers however started to increase and by June 2021 had hit a high of around 277 safeguarding contacts per month. Since this peak however numbers have been steadily returning to pre-COVID levels and in August 2022 are slightly below the same 12-month period prior to the pandemic. This activity is detailed in figure 1.

Figure 1. SGA Contacts Received in rolling 12 months – March 2020 to August 2022



Whilst the number of safeguarding contacts has largely returned to pre-pandemic levels, the number of safeguarding contacts being converted into safeguarding referrals has increased significantly (Fig 2)

Figure 2. SGA Referrals Received in rolling 12 months – March 2020 to August 2022



This is largely down to changes in working practices as the safeguarding team had identified an issue with practitioner work being conducted within the LAS reporting system on the contact level rather than at the referral stage. Previously, an analysis of safeguarding statutory returns for 202/21 indicated that Sefton had a low conversion rate of contacts to referrals, however we are now performing comparably with regional partners.

Furthermore, Sefton’s rate of safeguarding concerns is similar to the rate seen across the North West. Per 100,000 people in Sefton, 869 are the subject of a safeguarding concern, this compares to 908 in the North West. In respect safeguarding Section 42 enquiries (investigations), the rate in Sefton is 209 people per 100,000. This is slightly lower than the North West’s rate of 285 people but is around 16% higher than the bottom quartile rate for North West councils.

2.2. Timeliness and Making Safeguarding Personal

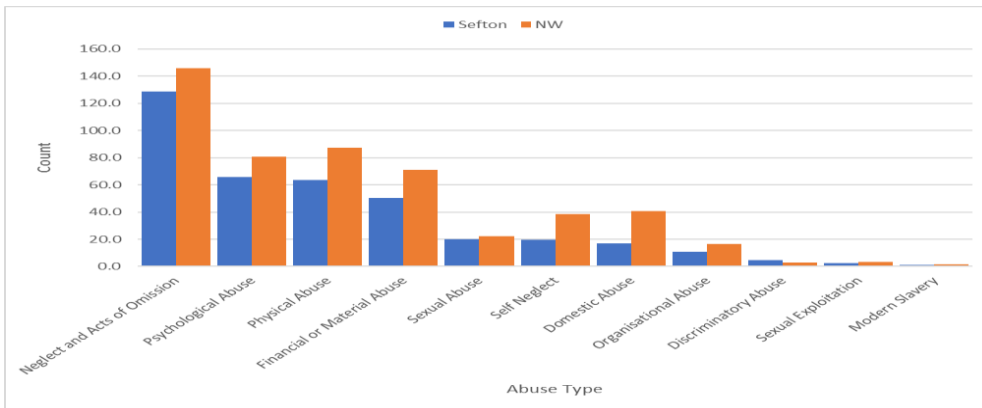
During the past 12-24 months Adult Social Care has seen improvement in its timelessness of responding and resolving safeguarding contacts, with over 93% being resolved with 7 days during August 2022. This has improved from 90% in August 2021 and 85% in August 2020. The service has also continued to perform well in terms of ensuring a personalised approach to safeguarding and that an individuals outcomes remain central to the process. In Sefton just under 80% of those expressing a preferred outcome have this preference fully met, this compares to 67.5% in the North West. 97.7% of people have their preferred outcome fully or partially met in Sefton compared to 95.4% across the North West.

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2.3. Types of abuse and location.

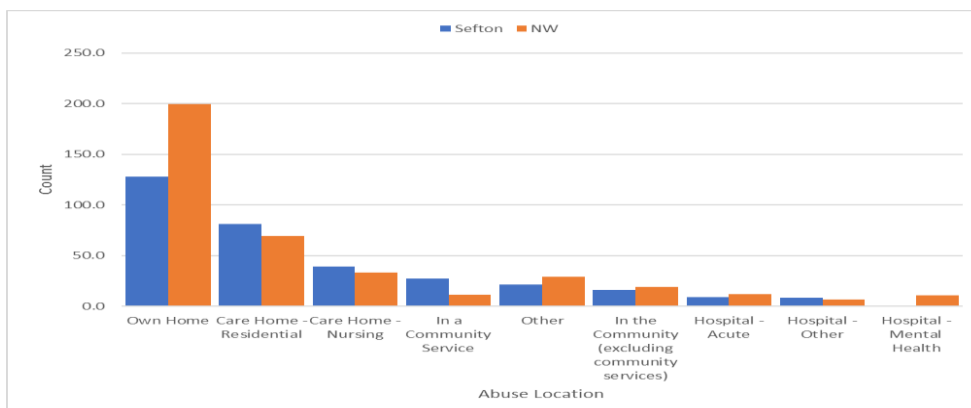
The most common abuse types seen in Sefton safeguarding episodes are similar to those seen across the North West, with neglect and acts of admission being highest (Fig3.).

Figure 3. Abuse Types rate per 100,000 (Sefton and North West Outturn) – 2021/22



In Sefton, as in the North West, the majority of abuse occurs within a victim’s own home. This is followed by abuse taking place in residential and nursing care homes. The rate of abuse occurring in own homes in Sefton is lower than that seen in the North West. However, the rate of abuse seen in care homes is slightly higher. This may well be a result of the high number of care homes within Sefton compared to other North West authorities. This is shown in Fig 4.

Figure 4 Abuse Locations rate per 100,000 (Sefton and North West Outturn) – 2021/22



3 Care Homes and Safeguarding

3.1 Work with care providers represents a significant part of the safeguarding duties

undertaken by Adult Social Care. In situations where there are concerns relating care providers (where there maybe multiply concerns), these are managed under organisational safeguarding processes.

Organisational abuse, as defined in the Care Act (2014) Statutory Guidance is '*neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from a one-off incident or to on-going mistreatment. It can be through neglect or poor professional practice as a result of the structure, policies, process, and practices within an organisation*'.

3.2 There is a duty on care providers to report all safeguarding concerns to the Local Authority (LA) and Care Quality Commission (CQC) and to work with the LA and others in resolving the issues.

3.3 Sefton is currently undertaking a number of Safeguarding Enquiries for individuals living in care settings where the impact of the service delivered to the person has resulted in harm and/or neglect.

3.4 Care homes and care agencies are supported to improve quality through intensive engagement of staff from Adult Social Care, safeguarding teams, community teams, occupational therapy, medication management teams and Community health services. Progress and oversight of investigations is in place through a dedicated weekly meeting which has representation from senior operational and contract managers. Close working relationships are also in place with health colleagues to ensure a system approach is maintained. Organisation strategy meetings are chaired by senior officers within Adult Social Care and regular briefings are provided to the Executive Director and Cabinet Member.

3.5 There is recognised increased complexity and gravity in the organisational safeguarding concerns that are being raised. It is yet to be fully understood what the impact of working in care settings throughout the pandemic has had on both individuals working in care and those living in services. There are workforce challenges across all settings and as such recruitment is proving difficult, which can lead to a need to rely on agency staff. This can raise potential risks in relation to continuity and familiarity of care arrangements. Sefton continues to support care providers by ensuring access to workforce grants and involvement in regional recruitment initiatives. CQC will also monitor the use of agency within care homes as part of their oversight and regulation.

3.6 We have identified some common themes through safeguarding investigations such as:

- Staff found to have no background clinical or social care experience and are heavily reliant on appointed management staff to deliver services and uphold quality standards.
- Owners do not always directly engage in the day-to-day observations of service delivery and therefore have no awareness of events as we embark on enquiries.

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To support the mitigation of these issues the quality assurance team within Adult Social Care work closely with colleagues from CQC to highlight the important of clear oversight and escalation arrangements within care homes between the registered manager and owner.

4. Role of the Quality Assurance Team

4.1 The Quality Assurance Team are part of the commissioning and contracts team within Adult Social Care. The remit of the team is to gain assurance regarding the quality of care commissioned by the Council from care providers across Sefton. They work closely with the safeguarding team, social work teams and the Care Quality Commission, as well as other organisations, to monitor the provider market.

4.2 Part of the role of the officers involves carry out visits to providers, this can be care homes, day care providers and domiciliary care providers to undertake a holistic review of the service provision. They will look at care records being kept, how services are being provided to residents of Sefton, establish if any themes are being demonstrated for example, increased number of falls, staffing levels, training of staff, etc. Within the care home market this will also include looking at the environment as a whole, sharing any concerns regarding the delivery of care.

4.3 A crucial aspect of the work undertaken by the Quality Assurance Team is to work in partnership with care providers to raise standards and help them to improve. Key to this is early identification of potential issues to enable appropriate support to be put in place and enable collaborative working with the provider organisation to address any concerns.

4.4 Within Adult Social Care, work is in progress to continue to enhance the role of the Quality Assurance Team, strengthen relationships with health partners and maximise collaborative working. This will include working with the care market to develop additional early intervention strategies and reporting mechanisms.

5. Additional support to care providers.

5.1 It is recognised that there are pressures on care delivery services at this time, including the impact of covid, ongoing workforce challenges and financial pressures which have recently been exacerbated due to cost of living increases.

5.2 Adult Social Care has continued to work closely with care providers with additional support across a number of initiatives including.

- Capital funding to make improvements to Care Homes
- Pilot programmes for use of Technology to improve service delivery
- Supporting Care Providers with their recruitment and retention issues
- New commissioning arrangements which give Providers more flexibility to deliver services, deal with changes in demand and new contracting models which seek to guarantee income/business for them based on anticipated levels of demand for their services

6. Safeguarding Adult Board

6.1 Adult Social Care continue to review the delivery of their adult safeguarding response, working alongside Sefton Safeguarding Board partners to make sure that the offer of intervention is accessible to all and that there is strong emphasis of early intervention and prevention. This includes ensuring all agencies work together to identify and respond to concerns in a robust and cohesive manner.

6.2 Further work is planned to strengthen the partnership working across all organisations as it is recognised that the delivery of quality services across Sefton can only be achieved with close working of all partners. This work includes a new Sefton Safeguarding Adults Board website, a refresh of the priorities for each subgroup and the development of a systemwide dashboard so wider safeguarding activity across Sefton can be tracked and any areas for action identified.

7. Recommendations

Overview and Scrutiny Committee are asked to note the report and provide comment.

The Committee is also asked to.

- Consider whether a further focused report on safeguarding people with care and support needs is presented to the next Committee.
- Consider whether it would like to receive more detailed update on the work of the Sefton Safeguarding Adults Board and specifically the role of the subgroups.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting	18 October 2022
Subject:	Report of Deborah Butcher, Sefton Place Director, NHS Cheshire and Merseyside		
Report of:	NHS Cheshire and Merseyside, Sefton	Wards Affected:	All
This Report Contains Exempt / Confidential Information	No		
Contact Officer:	Laura Gibson		
Tel:	07557 205 544		
Email:	laura.gibson@southseftonccg.nhs.uk		

Purpose / Summary of Report:

To provide Members of the Committee with an update about the work of NHS Cheshire and Merseyside, Sefton

Recommendation

Members of the Overview and Scrutiny Committee (Adult Social Care and Health) are requested to receive this report and consider the following attendees at future meetings:

- Liverpool University Hospitals NHS Foundation Trust on the new Royal Hospital
- Southport and Ormskirk Hospital NHS Trust for general update
- Sefton Partnership Place Plan
- Update on primary care estate strategy

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Update for Overview and Scrutiny Committee (Adult Social Care)



October 2022

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 07557 205 544.

ICB Board meeting – September

The third ICB Board meeting took place on Thursday 29 September at The Lake House at Crosby lakeside adventure centre.

The meeting comprised of a private and a public aspect on the agenda including an update from Sefton Partnership and a patient video from a service user at Crisis Café to showcase some of our collaborative work across the partnership:

<https://youtu.be/qUUN7Mitk5o>. The wider agenda included papers on the Liverpool University Hospital NHS Foundation Trust clinical services reconfiguration proposals, a provider collaborative update and several ICB update reports.



There was then a market place where we invited over 30 local services including Sefton CVS organisations, Sefton Council services, our Primary Care Networks, Healthwatch Sefton and many more to talk to the Board and members of the public about what they can offer to our Sefton residents. For more information and papers, please visit:

www.cheshireandmerseyside.nhs.uk/get-involved/meeting-and-event-archive/



A&E pressures/Winter plans and national position

Our Sefton urgent care team are working with the NHS Cheshire and Merseyside ICB winter operational team to ensure that planning and delivery of services over the coming months are adequate to ensure patient safety and system operational resilience.

There continues to be significant pressures within our local Acute Hospital Trusts, community, and voluntary sectors and within adult social care.

We have been working in collaboration with the hospital and community teams to ensure that patients do not have to stay in hospital any longer than needed and that services are in place to support residents into the most appropriate place for their care. The emphasis has been on out of hospital care and effective care planning, particularly for the frail elderly population. The aim is to ensure that patients do not need to go to hospital due to avoidable conditions and that proactive management can keep individuals well for longer, meaning that they have more time spent at home with family and loved ones.

We will be working with our local trusts and partners to help communicate our winter messages with Sefton residents in the coming months.

Autumn boosters

COVID-19 seasonal (autumn) booster vaccinations are now underway. The Primary Care Networks in Sefton began vaccinating care home residents in early September, with those who are homebound to get their vaccinations next.

For the general public people aged 50 years and older, those aged five years and over in a clinical risk group and health and social care staff are being offered a booster of coronavirus (COVID-19) vaccine and where possible the teams will co-administer flu vaccines.

In Sefton these will take place at local community pharmacies, to book we are asking you to visit www.nhs.uk/conditions/coronavirus-covid-19/ or call 119. Appointments are now available for those over 65 years of age and this will widen out in the coming weeks.

Living Well bus – health checks and vaccinations

The 'Living Well' bus organised by Cheshire and Wirral Partnership NHS Foundation Trust is coming back to Sefton every week from now until March 2023 and we are working with the team to organise and promote this to residents.

The bus gives Sefton residents the opportunity to get any COVID-19 vaccinations they may have missed or their seasonal (autumn) booster if eligible, without needing to book an appointment. The team are also carrying out free holistic health checks if time allows, during peak times vaccinations will take priority.

The dates for October are as follows, further dates and venues will be shared on our Twitter ([@SeftonPartners](https://twitter.com/SeftonPartners)) channel once available: 11 October, 22 October, 25 October.

For more information: www.cwp.nhs.uk/our-services/vaccination-programme

The move to the new Royal Hospital

The move plan for the new Royal Liverpool University Hospital, which will provide many benefits to the city of Liverpool and wider communities, began on 28 September 2022.

The 24-day move programme will ensure the safe and effective transfer of services and patients from its current building on Prescot Street Liverpool, to the new state-of-the-art building on Mount Vernon Street, which is just off Prescot Street.

The current Royal has 685 beds and the new Royal has 640 beds in total. Plans are in place to support this reduction in capacity such as 21 beds being opened in Broadgreen Hospital as a transfer of care facility and 10 intermediate care beds are being opened in the community.

The move is phased over 24 days to ensure the safe transfer of patients and services.

The phasing will mean that the hospital will not be fully operational until 21 October when the move is completed by the transfer of their emergency department from the old building to the new – the team there are working closely with North West Ambulance Service to support the move of the department and will



carefully support and direct walk-in patients that arrive at the emergency department during the move.

Key dates to be aware of include:

- 4 October 2022 - Outpatients service move began
- 10 October 2022 - Ward moves begin
- 19-20 October 2022 - Emergency department move takes place

The Trust is writing to patients to at each of the stages throughout the move to keep them informed of progress and they are being directed to this web page for more information:

www.liverpoolft.nhs.uk/new-royal-liverpool-hospital/

New stroke centre for North Mersey

A comprehensive stroke centre for North Mersey opened at Aintree University Hospital on Monday 19 September, dedicated to caring for people in the critical 72-hour period after a stroke occurs.

The new centre brings together the hyper-acute stroke care currently based at the Royal Liverpool University Hospital, Aintree University Hospital, and Southport Hospital.

Providing this service from a single unit is designed to improve access to the specialist staff, tests, equipment and procedures that are crucial for diagnosing and treating people as quickly and effectively as possible following a stroke.

The comprehensive stroke centre at Aintree Hospital it will be on the same site as The Walton Centre, the specialist neurosciences hospital, which provides a stroke treatment called thrombectomy, available 24 hours a day, seven days a week. It's hoped that creating the comprehensive stroke centre will significantly increase the number of local patients able to receive thrombectomy within the required time window.

Should a patient be suitable for the specialist thrombectomy treatment for their stroke, they will be transferred to The Walton Centre for this procedure.

After the first 72-hours, up to half of patients will be able to leave hospital to continue their recovery at home, with help from an early supported discharge team. Those patients who aren't ready to go home, will be given further care at either Aintree, Broadgreen or Southport hospitals, depending on which is closest to where they live.

As part of the change, the Royal Liverpool Hospital and Southport Hospital will no longer provide hyper-acute stroke care. Southport will continue to provide acute stroke care, so that patients who would previously have been admitted to Southport can have their next stage of treatment closer to home. There will be no stroke unit offering acute care at the Royal Liverpool, however Broadgreen Hospital will continue to be used for stroke rehabilitation services. Aintree Hospital will provide acute stroke care, as well as hyper-acute stroke care, as it does now.

Cheshire and Merseyside cancer alliance

Cheshire and Merseyside Cancer Alliance (CMCA) has launched a new educational platform to give cancer healthcare professionals access to information and training to help them do their job even better.

The Cancer Academy brings 'Excellence In Cancer Education' to people working in cancer treatment, care and planning in a healthcare or community setting.

The Cancer Academy offers virtual courses with content personalised to individual workforce areas. There are educational videos, live training sessions, webinars, online learning materials, cancer pathway information and links to partner organisations. There are also plans to set up a user group to advise The Cancer Academy on content and how it can be presented in the most effective way.

The Cancer Academy will provide a learning experience which encompass the whole patient cancer 'journey', from prevention to earlier detection of cancer, diagnosis, referral, treatment and on to supporting patients living with and beyond the disease.

It is the latest initiative from CMCA, which brings together key organisations and partners across Cheshire and Merseyside, co-ordinating cancer services and ensuring best practice is spread throughout healthcare providers so that people receive the best possible treatment, care and outcomes.

You can see The Cancer Academy here: <https://www.canceracademy.nhs.uk/>

This video explains what The Cancer Academy does and who it will support: https://youtu.be/TEB6EZ_eiMk

Closing remarks

OSC members are recommended to note this report and consider the following attendees at future meetings:

- Liverpool University Hospitals NHS Foundation Trust on the new Royal Hospital

Agenda Item 6

- Southport and Ormskirk Hospital NHS Trust for general update
- Sefton Partnership Place Plan
- Update on primary care estate strategy

Follow Sefton Partnership on Twitter [@SeftonPartners](#) and on [Facebook](#) or see a range of short films on You Tube for [Sefton Partnership](#)

Visit the NHS Cheshire and Merseyside website here:
www.cheshireandmerseyside.nhs.uk

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting	18 October 2022
Subject:	Health Provider Performance Dashboard		
Report of:	NHS Cheshire and Merseyside, Sefton	Wards Affected:	All
This Report Contains Exempt / Confidential Information	No		
Contact Officer:	Laura Gibson		
Tel:	07557 205 544		
Email:	laura.gibson@southseftonccg.nhs.uk		

Purpose / Summary of Report:

To provide Members of the Committee with the latest available performance data of the main health service providers commissioned by NHS Cheshire and Merseyside in Sefton.

Recommendation

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

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Main Provider Performance July 2022

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

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

Sefton Place – North Sefton

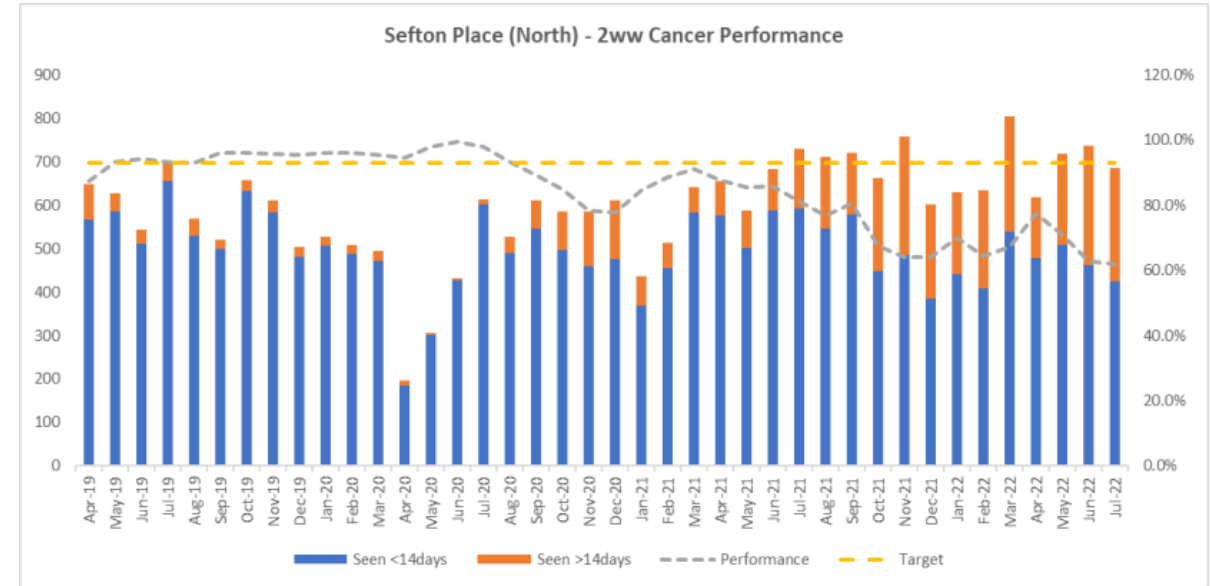
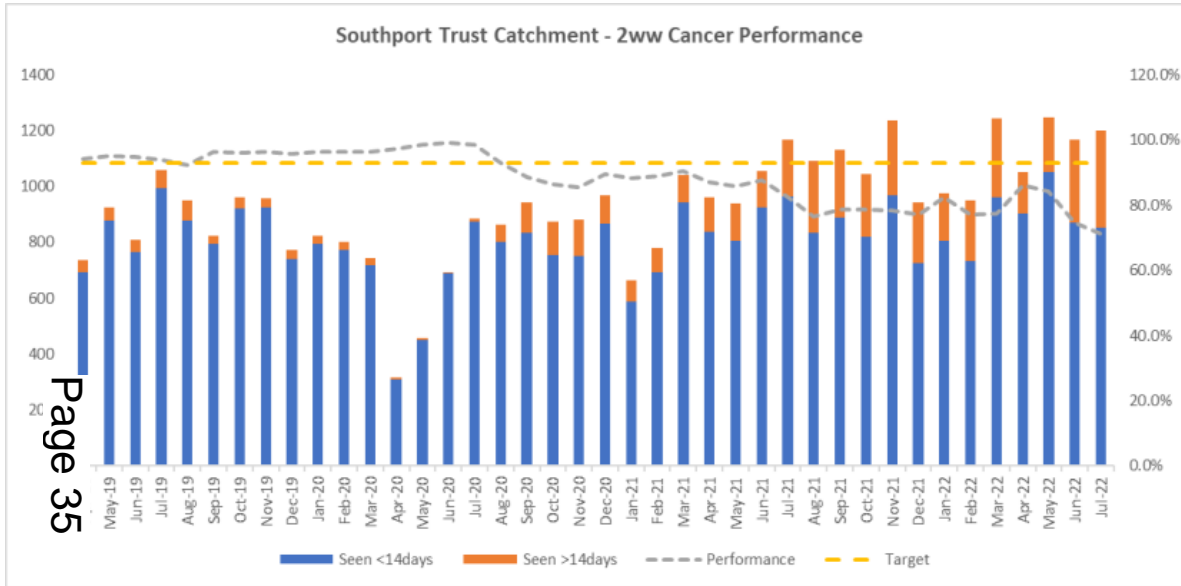


Key Performance Area	Time Period	Performance	Target	Trend	
A&E 4 hour Waits, All Types (Southport & Ormskirk)	Jul-22	73.80%	95%		
Cancer 2 Week Waits (Southport & Ormskirk)	Jul-22	71.23%	93%		
Cancer 62 Day - Screening (Southport & Ormskirk)	Jul-22	No patients 0%	90%		
Cancer 31 Day 1st Treatment (Southport & Ormskirk)	Jul-22	92.54%	96%		
RTT -18 Weeks Incomplete (Southport & Ormskirk) snapshot	Jul-22	72.90%	92%		
C. Difficile (Southport & Ormskirk) cumulative YTD	Jul-22	17	2022-23 Target <=49		
MRSA (Southport & Ormskirk) cumulative YTD	Jul-22	0	zero tolerance		
Stroke (80% of Pts spending 90% of time on Stroke Unit, Southport & Ormskirk)	Jun-22	47.10%	80%		<<-- June latest data
% TIA assessed and treated within 24 hours (Southport & Ormskirk)	Jun-22	84.21%	60%		<<-- June latest data
Ambulance Category 1 Mean 7 minute response time (NS Place Level)	Jul-22	00:10:16	<=7 Minutes		
Ambulance Category 1 90th Percentile 15 minute response time (NS Place Level)	Jul-22	00:19:10	<=15 Minutes		
Ambulance Category 2 Mean 18 minute response time (NS Place Level)	Jul-22	01:08:27	<=18 Minutes		
Ambulance Category 2 90th Percentile 40 minute response time (NS Place Level)	Jul-22	02:25:28	<=40 Minutes		
Ambulance Category 3 90th Percentile 120 minute response time (NS Place Level)	Jul-22	10:33:21	<=120 Minutes		
Ambulance Category 4 90th Percentile 180 minute response time (NS Place Level)	Jun-22	07:38:08	<=180 Minutes		<<-- no data for July submitted
Mental Health: Care Programme Approach (Quarterly)	Qtr 1 Jun-22	100.0%	95%		
Mental Health: IAPT 16.8% Access (NS Place Level)	Jul-22	0.89%	1.59% per month Qtr 1-3 1.83% per month Qtr 4		
Mental Health: IAPT 50% Recovery (NS Place Level)	Jul-22	43.0%	50%		
Mental Health: IAPT waiting <6 weeks (Quarterly)	Qtr 1 Jun-22	63.0%	75%		
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 1 Jun-22	100.0%	90%		

Sefton Place – North Cancer Two Week Wait Trend & Performance



Cheshire and Merseyside

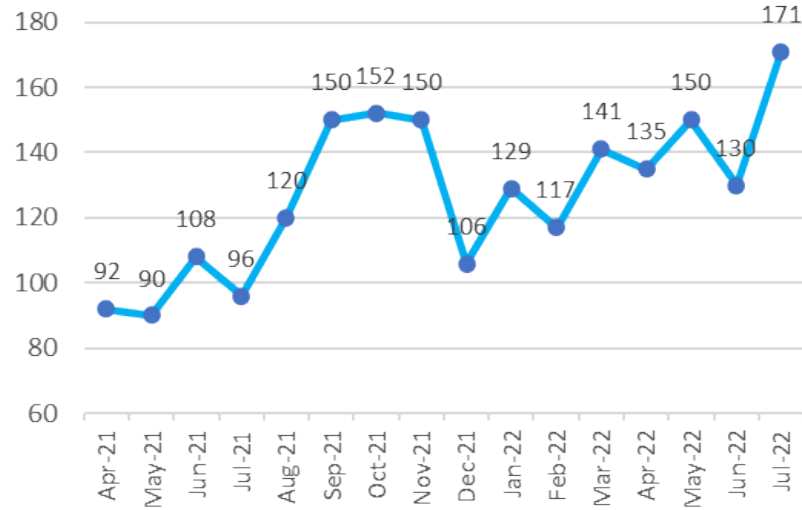


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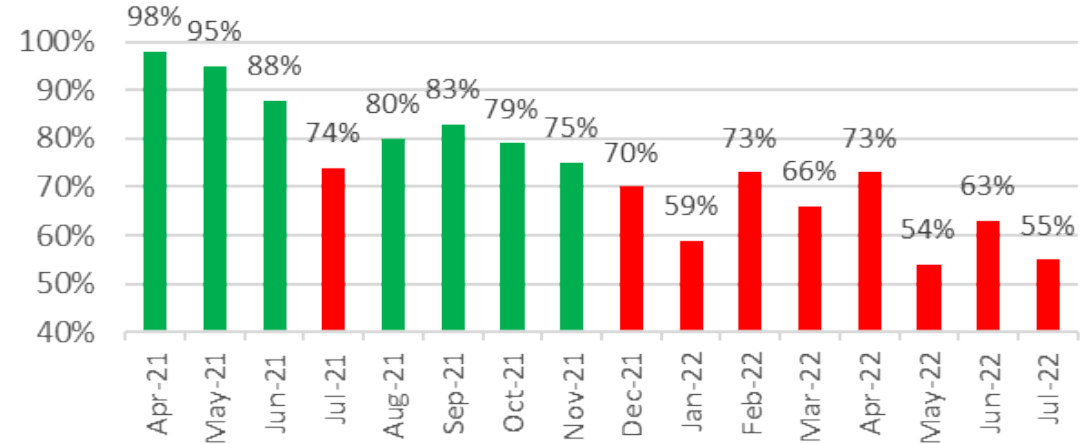
- Pre-pandemic levels averaged total patients seen for North Sefton at 576 per month, and 863 for Southport Trust
- Significant drop of activity for first few months of pandemic (Apr-20 to Jul-20)
- Increased demand in the region of 20% above pre-pandemic levels
- Average patients seen increased to 681 (+105/18%) per month in 21/22 and latest average for 22/23 at 689 (+113/19.6%) for North Sefton
- Larger increase at Trust catchment level with patients seen increased to 1,062 (+199/23%) per month in 21/22 and latest average for 22/23 at 1,165 (+302/35%)

Sefton Place – North IAPT Trends

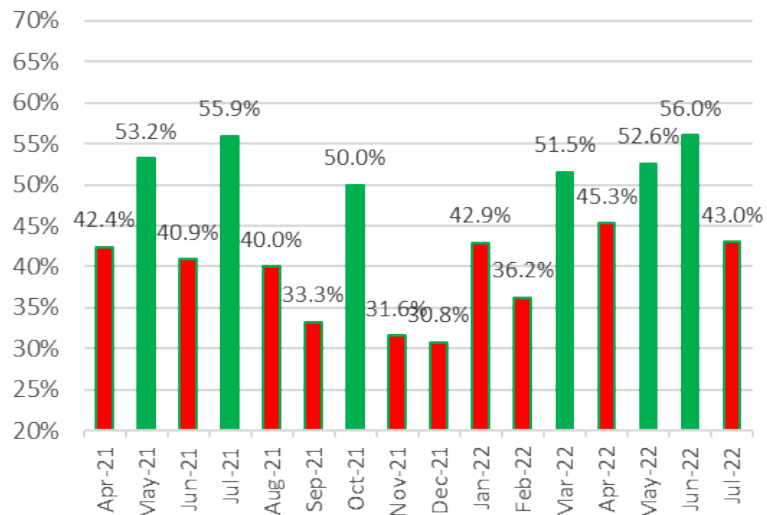
North Sefton Entered into Treatment



North Sefton 6 week waits - Target 75%



North Sefton Recovery - Target 50%



- Demand increasing into the service
- In line with increased demand is a steady decline in 6wk wait targets
- Fluctuating levels of recovery each month
- New provider inherited lengthy historic waits
- Provider increasing capacity with additional agency staff, overtime, and progress of trainee to qualification

Measure	Time Period	Southport & Ormskirk	England Average	Trend
Inpatient – Response Rate	Jul-22	36.8%	19.8%	
Inpatient Recommended	Jul-22	93.0%	94.0%	
Inpatient Not Recommended	Jul-22	5.0%	3.0%	
A&E – Response Rate	Jul-22	23.0%	10.0%	
A&E Recommended	Jul-22	83.0%	75.0%	
A&E Not Recommended	Jul-22	13.0%	17.0%	

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Sefton place – North Sefton

7 Day GP Extended Access

North Sefton	Appointments Available	Booked	DNA	Utilisation	GP	Advanced Nurse Practitioner	Practice Nurse	Health Care Assistant	Physio	MH Practitioner	Ear Irrigation
Apr-22	824	802	31	93.57%	279	170	69	113	106	12	23
		97.33%	3.9%		33.9%	20.6%	8.4%	13.7%	12.9%	1.5%	2.8%
May-22	861	819	24	92.33%	357	160	74	85	73	15	27
		95.12%	2.9%		41.5%	18.6%	8.6%	9.9%	8.5%	1.7%	3.1%
Jun-22	899	860	52	89.88%	349	166	70	110	88	15	32
		95.66%	6.0%		38.8%	18.5%	7.8%	12.2%	9.8%	1.7%	3.6%
Jul-22	940	920	25	95.21%	363	194	76	120	100	12	33
		97.87%	2.7%		38.6%	20.6%	8.1%	12.8%	10.6%	1.3%	3.5%

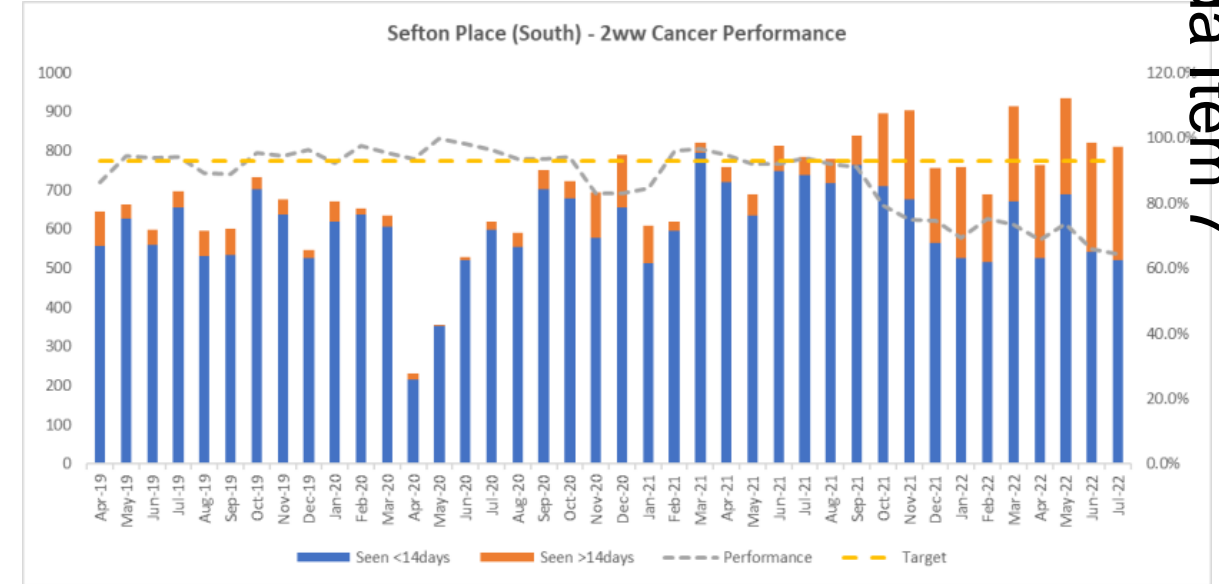
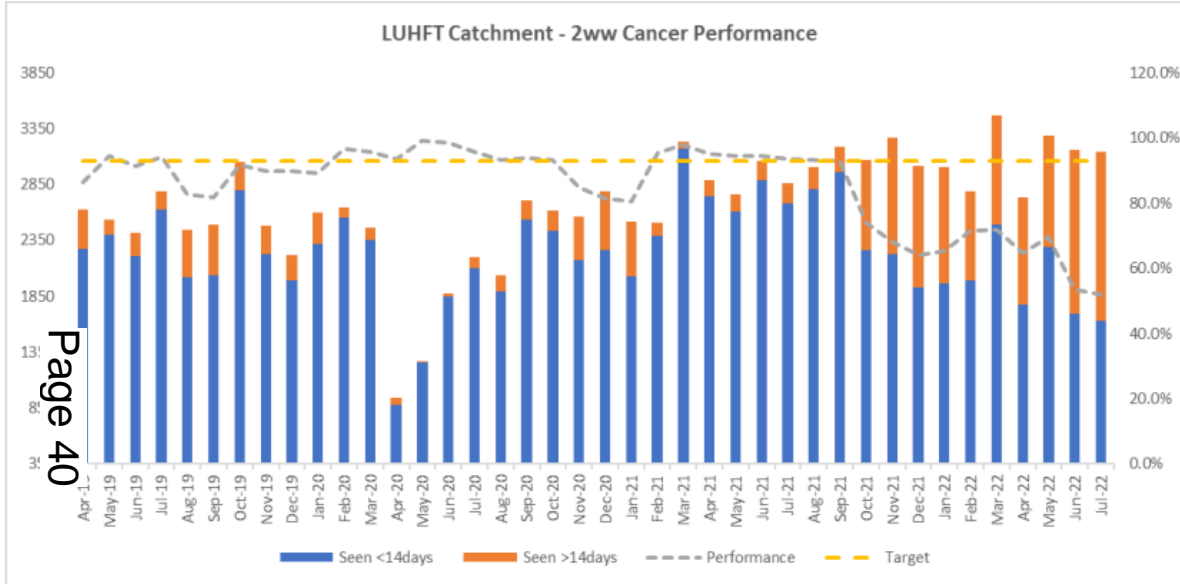
Sefton Place – South Sefton

Key Performance Area	Time Period	Performance	Target	Trend
A&E 4 hour Waits, All Types (LUHFT)	Jul-22	66.65%	95%	
Cancer 2 Week Waits (LUHFT)	Jul-22	52.05%	93%	
Cancer 62 Day - Screening (LUHFT)	Jul-22	65.33%	90%	
Cancer 31 Day 1st Treatment (LUHFT)	Jul-22	92.04%	96%	
RTT -18 Weeks Incomplete (LUHFT) Snapshot	Jul-22	48.97%	92%	
C.Difficile (LUHFT) cumulative YTD	Jul-22	67	2022-23 Target <=134	
MRSA (LUHFT) cumulative YTD	Jul-22	1	zero tolerance	
Stroke 80% of Pts spending 90% of time on Stroke Unit (LUHFT)	Jul-22	-	80%	
% of patients assessed and treated within 24 hours (LUHFT)	Jul-22	-	60%	
Ambulance Category 1 Mean 7 minute response time (SS Place Level)	Jul-22	00:08:49	<=7 Minutes	
Ambulance Category 1 90th Percentile 15 minute response time (SS Place Level)	Jul-22	00:14:06	<=15 Minutes	
Ambulance Category 2 Mean 18 minute response time (SS Place Level)	Jul-22	01:14:07	<=18 Minutes	
Ambulance Category 2 90th Percentile 40 minute response time (SS Place Level)	Jul-22	02:31:19	<=40 Minutes	
Ambulance Category 3 90th Percentile 120 minute response time (SS Place Level)	Jul-22	11:01:37	<=120 Minutes	
Ambulance Category 4 90th Percentile 180 minute response time (SS Place Level)	Jun-22	17:05:16	<=180 Minutes	
Mental Health: Care Programme Approach (Quarterly)	Qtr 1 Jun-22	100.0%	95%	
Mental Health: IAPT 16.8% Access (SS Place Level)	Jul-22	0.98%	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (SS Place Level)	Jul-22	40.0%	50%	
Mental Health: IAPT waiting <6 weeks	Jul-22	52.0%	75%	
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 1 Jun-22	100.0%	90%	

Stroke and TIA data will be reported from 2022-23 previously not reported in agreement with host commissioner (Q1 not yet available)

no data for July submitted

Sefton Place – South Cancer Two Week Wait Trend & Performance



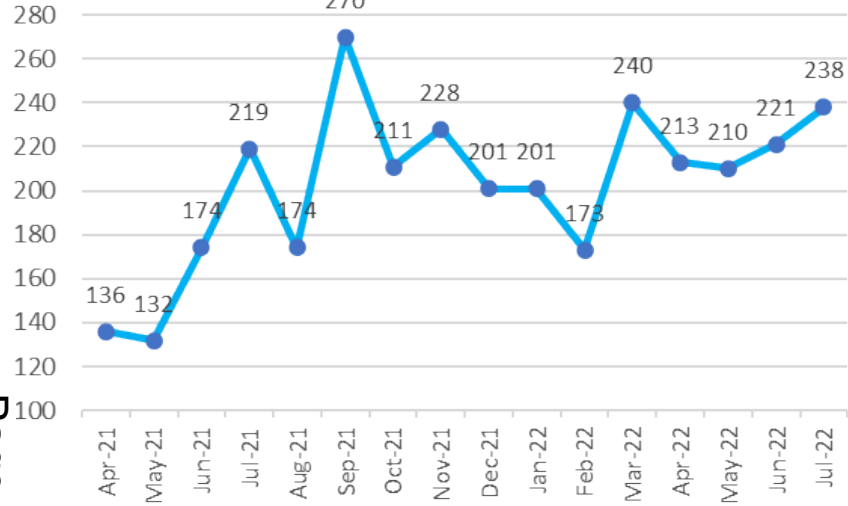
- Pre-pandemic levels averaged total patients seen for South Sefton at 643 per month, and 2,564 for LUHFT
- Significant drop of activity for first few months of pandemic (Apr-20 to Aug-20)
- Increased demand in the region of 20% above pre-pandemic levels
- Average patients seen increased to 799 (+156/24%) per month in 21/22 and latest average for 22/23 at 832 (+189/29%) for North Sefton
- Larger increase at Trust catchment level with patients seen increased to 3,032 (+468/18%) per month in 21/22 and latest average for 22/23 at 3,081 (+517/20%)

Sefton Place – South IAPT Trends

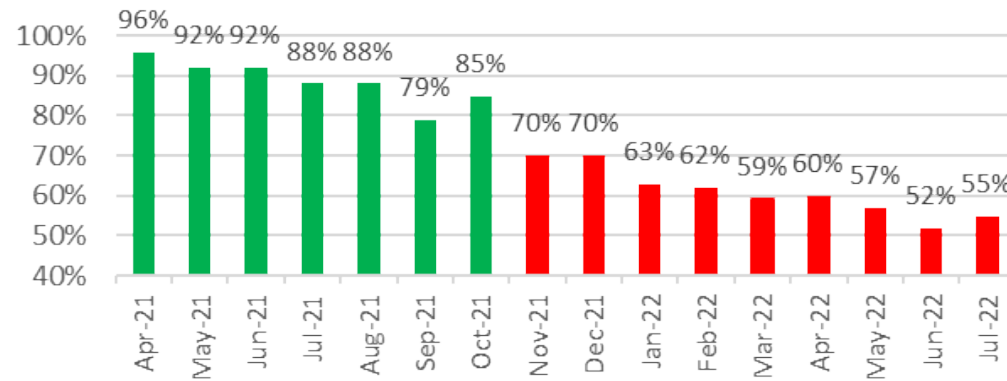


Cheshire and Merseyside

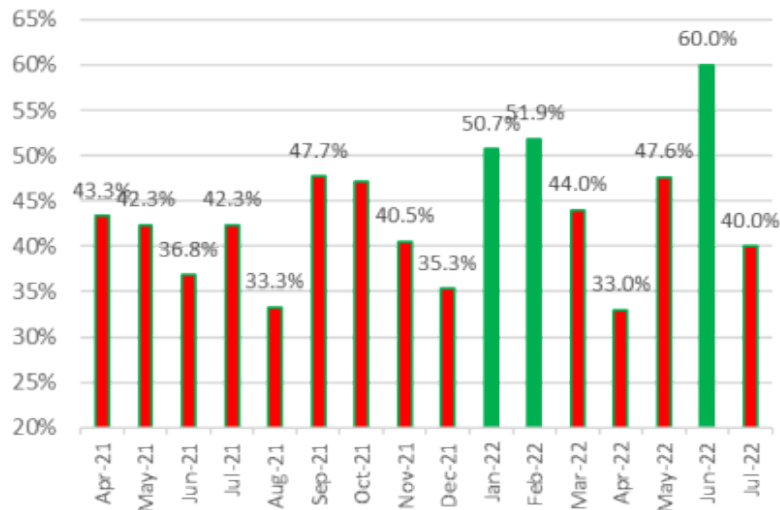
South Sefton Entered into Treatment



South Sefton 6 week waits - Target 75%



South Sefton Recovery - Target 50%



- Demand increasing into the service
- In line with increased demand is a steady decline in 6wk wait targets
- Fluctuating levels of recovery each month
- New provider inherited lengthy historic waits
- Provider increasing capacity with additional agency staff, overtime, and progress of trainee to qualification

Liverpool University Hospital NHS FT

Friends and Family

Measure	Time Period	LUHFT	England Average	Trend
Inpatient – Response Rate	Jul-22	25.7%	19.8%	
Outpatient Recommended	Jul-22	91.0%	94.0%	
Outpatient Not Recommended	Jul-22	5.0%	3.0%	
A&E – Response Rate	Jul-22	17.9%	10.0%	
A&E Recommended	Jul-22	66.0%	75.0%	
A&E Not Recommended	Jul-22	25.0%	17.0%	

Sefton Place – South Sefton

7 Day GP Extended Access

South Sefton	Appointments Available	Booked			DNA	Utilisation	GP	Advanced Nurse Practitioner	Practice Nurse	Physio
		Booked	Closed by Triage	Total						
Apr-22	1118	939			133	72.09%	294	240	193	212
		84.0%			14.2%		31.31%	25.56%	20.55%	22.58%
May-22	1124	1213			62	102.40%	280	595	150	153
		107.9%			5.1%		23.08%	49.05%	12.37%	12.61%
Jun-22	1201	930	348	1278	59	72.52%	266	718	91	163
		77.4%	37.4%		6.3%		28.60%	77.20%	9.78%	17.53%
Jul-22	1380	980	261	1241	72	65.80%	306	575	120	205
		71.0%	26.6%		7.3%		31.22%	58.67%	12.24%	20.92%

South Sefton changed their reporting method in May-22. This has been addressed in the June-22 data and will continue to be supplied in this way going forward. The current May data however is not currently complete and shows an exaggerated utilisation rate due to the inclusion of appointments closed by triage in the overall count.

Sefton Place

NWAS – Paramedic Emergency Services (PES) Summary

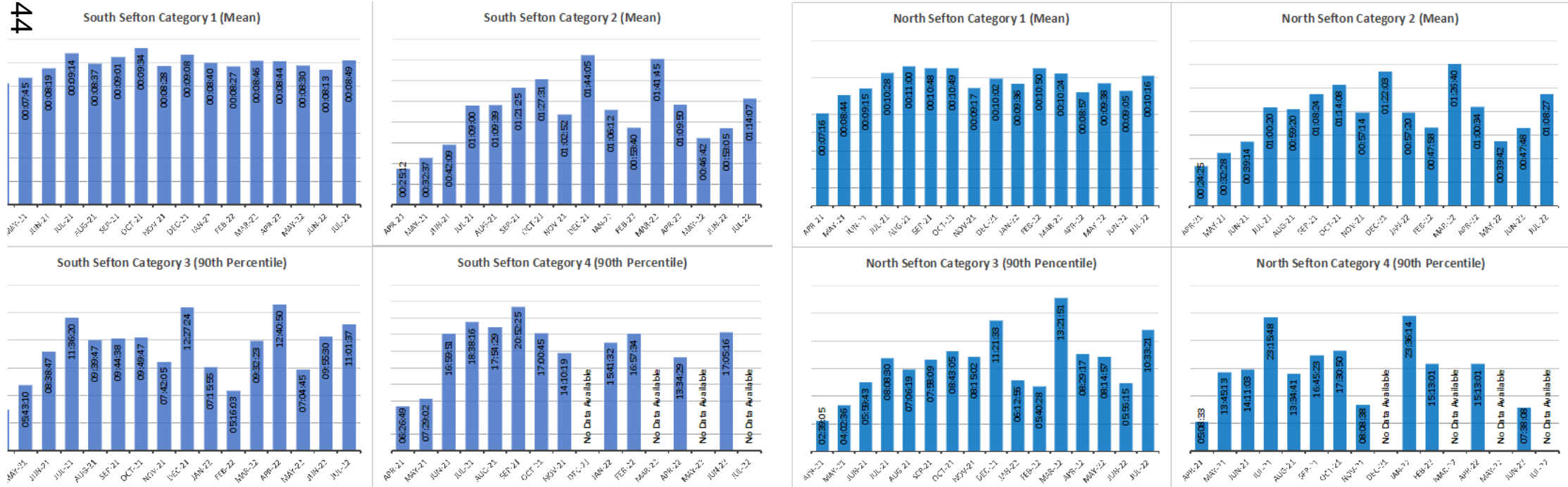
Dashboard

Key Risk Data ▲ Low ● Published ▲ Moderate □ Local ▲ High ● Not available

Jul-22	Cat 1 (Mean)	Cat 2 (Mean)	Cat 3 (90th Percentile)	Cat 4 (90th Percentile)
Target	00:07:00	00:18:00	02:00:00	03:00:00
South Sefton	00:08:49	01:14:07	11:01:37	-
North Sefton	00:10:16	01:08:27	10:33:21	-
C&M	00:09:00	01:13:48	12:06:57	22:31:10
NWAS	00:08:39	00:50:29	09:45:09	13:32:59
Risk	▲	▲	▲	▲
	Published	Published	Published	Published

- The deteriorating position for ambulance is in line with the increased NWAS 999 calls, this is a system issue and not a localised
- Performance is being addressed through increasing number of response vehicles available, reviewing call handling and timely dispatch of vehicles as well as ambulance handover times from A&E to release vehicles back into system.
- The introduction of a Sefton Emergency Response Vehicle to support category 3 and 4 calls went live in April 2022 across the whole of Sefton.
- Ageing Well Programme now being implemented will support NWAS by improving access to urgent community response including referrals from NWAS and the community teams with a response within 2 hours
- Turnaround Improvement – NWAS have rolled out the ED Checklist at S&O and LUHFT AEDs (with the exclusion of paediatrics), which will increase ambulance handover times but maintain patient safety.

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Agenda Item 8

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	18 October 2022
Subject:	Cabinet Member Reports – September - October 2022		
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 8

(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.	
Climate Emergency Implications:	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no direct climate emergency implications arising from this report. Any climate emergency implications arising from the consideration of reports referred to in the Work Programme will be contained in such reports when they are presented to Members at the appropriate time.	

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		
Overview and Scrutiny Committee (Adult Social Care and Health)		
Councillor	Portfolio	Period of Reporting
Paul Cummins	Cabinet Member Adult Social Care	August - September 2022

1. Update on the National Assurance update for Adult Social Care.

In September 2021, the Government announced that a new Assurance Framework would be introduced to oversee and inspect Adult Social Care Performance. The Care Quality Commission (CQC) have been charged with the responsibility of developing and implementing this framework. CQC have been working with the Department for Health and Social Care (DHSC), and have recently published draft material on the likely domains and key lines of enquiry. The latest Assurance iteration is detailed in Appendix 1. These will include assessing Adult Social Care performance in the following areas:

- Working with People (assessing needs, supporting people to live healthier lives)
- Providing support (care provision, partnerships, and communities)
- Ensuring Safety (safe systems, pathways, transitions, and safeguarding)
- Leadership (governance, learning, improvement, and innovation)

These domains will also be aligned with a number of key “I” statements based on what people using services can expect to ensure they achieve the best possible outcomes. Feedback from people with lived experience who have access services will form a key part of the assurance framework.

CQC will also make consideration against a number of key questions including whether services are safe, effective caring, responsive and well-led. Current proposals are that Councils will be rated against these areas.

CQC have been testing parts of their assurance framework and inspection methodology in two councils, Manchester and Hampshire, the learning from which will be used to inform the final version of the framework, which is due within the next few weeks. Plans are also underway to consolidate and share this learning through the ADASS network, and Sefton is linked into all key regional workgroups. Regionally, there is also work being undertaken to support local authorities with ‘what good looks like’ and assist with preparation and readiness. This work will however also support performance, improvement priorities and accountability internally.

The planned implementation of the new Assurance Framework is still planned for April 2023

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2. Integration and National Policy Update

The Sefton Partnership is now live and begins to progress in its new form. The Place Director's objectives have been agreed as follows:

Core Objective	Core Objective
Place Development	Refresh of Sefton Place Plan to include NHS Operational planning priorities 22/23 and aligned to Health and Wellbeing Board strategic delivery
	Development of Place outcomes monitoring framework and dashboard, inclusive of Community Insight (qualitative) tools
	Sefton Place Partnership governance embedded in order to progress delegations and contract monitoring
Start Well	Reduction in service waiting times - e.g. Speech and Language services
	Development of place-based logic model to ensure coverage of all 9 Child and Adolescent Mental Health Service review recommendations
	Reduction in childhood obesity
Live Well	Reduction in usage of secondary health services for those with complex lives (known as System P priority cohort)
	Improved access to early intervention and prevention for preventable diseases that have the greatest burden on Sefton residents
	Implementation of the community Mental Health model in line with national strategy
	Reduction in adult obesity, in line with NHS Long Term Plan objectives
	Implementation of Learning Disabilities and Neurodiversity strategies - in line with Transforming Care Agenda
Age Well	Implementation of Ageing Well programme (Anticipatory Care, 2hr Urgent Response, Enhanced Care in Care Homes)
	Full roll-out of Integrated Community Team model across Sefton, in line with the 'team of teams' approach (Fuller report)
	Reduction in adult obesity, in line with NHS Long Term Plan objectives
	Reduction in usage of secondary health services for those with frailty and dementia
PCN Development	Develop plan to progress at least one step on the framework
Adult Social Care	Development of a fair cost of care and market sufficiency strategy

Wider Determinants	Reduction in childhood poverty <hr/> Equitable access to healthcare Improvements to the physical environment across the borough
Workforce	Working with corporate ICB colleagues, further develop and implement an Organisational Development Plan to support the work of the Sefton Partnership Board and its component parts. <hr/> Implementation of the NHS System Leadership for Change programme across the partnership around identified key work streams <hr/> Development of a Place based workforce plan to respond to local workforce risks and opportunities as part of wider ICB workforce planning approach in conjunction with Health Education England
Integrated Estates	Development of a fully integrated estates strategy linked to One Public Estate (with improved access to Health and Diagnostics on the High Street, focused on areas of deprivation)
Digital	Development of a Digital Inclusion Strategy Implement opportunities to utilise Technology Enabled Care Solutions (Telehealth, Telecare, Remote Monitoring solutions etc.) in line with strategy <hr/> Access to digital care records for Adult Social Care providers

Sefton has hosted the third meeting of the Cheshire and Merseyside Integrated Care Board on the 29th of September, at The Lake House at Crosby Lakeside Adventure Centre. This was followed by a 'Sefton marketplace', which was very well attended, with a great buzzing atmosphere, alongside the ICB board members and the general public.

The marketplace consisted of stalls presented by local organisations delivering health, care and community services in Sefton, and was an excellent opportunity to talk to stallholders about the great work taking place across Sefton.

The Partnership is required to provide a Place Delivery Plan setting out how it will deliver improvements to Health and Wellbeing of Sefton Residents. This is currently being developed through co-production with the Programme Delivery Group, which will detail delivery across the life course with the following areas of key delivery:-

- Start Well - Emotional Wellbeing and Mental Health, Children in Care, Early Help and Intervention and Transforming Care
- Live Well - Learning disabilities and autism, Long-term conditions, Early Help for Children and Families, Complex needs
- Age Well - Frailty, Dementia, End of Life
- All Age - Integrated Community Teams, Mental health and wellbeing, Workforce planning

The ICB will be required to produce an Integrated Care Strategy incorporating all Cheshire and Merseyside 'places' and their plans by December 2022. There will also be a requirement to refresh the Joint Strategic Needs Assessment plan.

In addition to the establishment of Deborah Butcher as Place Director the following leadership team structure has been agreed and appointments are being formalised to all posts:



3.

Life Course Commissioning

Commissioning for Adults and Children has remained a key focus during the last two months. The team has continued to review existing commissioning plans to ensure alignment to Council priorities, and provide structural alignment with health colleagues post disestablishment of the Clinical Commissioning Groups, to deliver an integrated commissioning approach.

Domiciliary Care - capacity issues within the domiciliary care market remain in part due to factors such as workforce recruitment, retention, and increased acuity. The arrangement for additional block-booked capacity with a Provider in North Sefton to support timely discharges from Hospital, has been extended to April 2023. Work is ongoing to try and establish similar capacity in the South of the Borough.

Work on the impending tender of services is ongoing to establish a new Sefton Place Pseudo Dynamic Purchasing System (PDPS). Engagement events have been held with Providers to discuss issues, this feedback has been used to formulate factors such as the new localities/contracted areas, and the service delivery and contracting models. These will include having Providers with a dedicated block-booking arrangement to ensure that there is dedicated capacity for Hospital Discharge cases.

It is anticipated that the tender will be advertised at the end of October.

The new PDPS is also being formulated so that it has the potential to include other future commissioned sectors, such as CHC and Children's Domiciliary Care services.

3. Adult Social Care Budget

Monitoring of the 2022/23 Adult Social Care budget for August is currently forecasting a potential deficit of £1.765m based on a number of assumptions about expenditure and income for the remainder of the year. The main areas of pressures relate to packages costs (£1.8m deficit - increases in areas including Residential and Supporting Living), staffing is also a pressure as vacancies are being filled by agency staff/consultants owing to national workforce challenges, however, there is a cost implication to that. Savings against Transport budgets/additional income and equipment capitalisation offset some of the pressures.

However, there are a number of uncertainties around the assumptions that should impact on this position before the year-end. ASC have significantly underspent in recent years, with forecasts improving as the year progresses and assumptions become clearer.

In addition, ASC have a programme of savings as part of Demand Management which have yet to be developed fully which will also mitigate some of the financial pressures forecast. At this stage of the year the Council's overall budget monitoring report is forecasting a break-even position which takes account of the above factors.

The introduction of a new budget monitoring system across Sefton in the forthcoming months will allow budget managers increased oversight of the current and forecast financial position.

4. Principal Social Worker Update (PSW)

The PSW has developed a Quality Assurance Framework (QAF), which has been agreed by DMT and myself, and is currently being embedded with the workforce. The QAF's main aim is to support our delivery in managing complex risk, to monitor and review our practice and services for Sefton citizens who have care and support needs, whilst provides us with a range of mechanisms to ensure that services delivered are safe, timely and continuously improving.

As part of the QAF's key mechanism, 'case file audits', the PSW has developed a new auditing tool with the support of SMT and team managers. This tool is embedded into Liquid Logic, and we began auditing teams from the end of June 2022.

Since the initiation of the audit process, the PSW is currently working with those managers who have been part of the process, to make some small changes to the audit tool. These changes will offer a greater consistency across the teams thus ensuring a standardisation across the service.

We have also established a Quality Improvement Forum that is also a key component of the QAF. This forum meets monthly and consist of a group of Team managers, Lead Practitioners, senior management and co-opts other wider members of the service, when required. The group currently meets monthly.

The purpose of the Quality Improvement Forum is to ensure that quality assurance arrangements are in place across Sefton Adult Social Care to gather information on the quality of services provided service user feedback and data on the outcomes achieved for people using services. The aim of the Forum is to ensure that this information is analysed and used to inform service delivery as well as strategic planning and commissioning.

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Currently, the Quality Improvement Forum (QIF), is working on a scoring system within the audit tool, which will enable colleagues in Strategic support to develop a 'dashboard', enabling the QIF to analyse data and report more efficiently.

The PSW is currently working on a case closure policy which has been presented to members of the QIF. Although the members did feel it is very good, concerns were raised about it being too comprehensive and time consuming for managers to complete. Consequently, a task and finish group has been established to review the current format and amend it into a more concise version.

Regionally the PSW continues to be an active member of the ADASS PSW network and is working alongside other PSW colleagues in developing a regional Safeguarding Audit tool, which is envisaged to be completed by December 2022.

The PSW has recently volunteered to be a member of a newly established task and finish group that has been jointly formed by NWADASS and the RSPCA, to develop a protocol for the provision of pets under the Care Act 2014. The PSW believes this is a good opportunity for Sefton ASC to be involved, as it is envisaged the protocol will be adopted nationally and it will inform the review of Sefton ASC's existing 'Protection of Property' policy.

5. Performance and Key Areas of Focus

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people as put forward by Central Government. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress, and strengthen transparency and accountability.

The main points of note on Sefton's performance are:

Admission into care and reablement:

The total number of admissions into care homes in August remain below the annual average. Average number of new service starts for nursing homes is nineteen per month, this is down to 13 in August. Average for residential homes is forty-three per month which is down to 27 in August.

The rate of admission for those aged 18-64 did see a small increase and we remain high compared to other local authorities, with Sefton still positioned in the bottom quartile nationally and in the Northwest. These are small numbers of admissions, on average just over four clients per month in the last 12 months but this is up from the average of the prior 12-month period of 3.

The rate of admission for those 65+ has fallen for the fourth month in a row and Sefton continues to be out of the bottom quartile nationally and against NW and statistical neighbours.

There continues to be significant demand for reablement and Home Care services and pressures to meet this demand remain. Work is underway looking at the expansion of 'core' reablement services and the expansion of New Direction's 'rapid' reablement service has begun. The result of this is yet to be seen with the number of clients starting a reablement service remaining low. Reablement starts average 107 per month over the past 12 months, down from an average of 149 in the prior 12-month period.

The effectiveness of reablement continues to perform well with over 90% of clients aged 65+ still at home after hospital discharge into reablement, this puts Sefton in the top quartile nationally.

Self-directed support and direct payments:

Provision of services to *clients* by either self-directed support or direct payments has remained relatively consistent over the last twelve months, and whilst not in the top quartile nationally we currently sit above the average of our Northwest neighbours.

Progress on the proportion of carers in receipt of self-directed support and direct payments has continued, albeit at a slow rate. The proportion of carers in receipt of a direct payment is above 70% for the first time in the past 12 months this takes us out of the bottom quartiles nationally, in the Northwest and against statistical neighbours.

To reach the top quartiles for these metrics we would need to provide 100% of carers with a direct payment, as the Carers Centre continue the work done in assessing more people and providing more direct payments, we should see this proportion continue to grow. The biggest impact on this metric will be in providing existing carers in receipt of services with a direct payment.

Employment:

Fifteen percent of adults in contact with secondary mental health services in Sefton are in employment, putting us in the top quartile nationally.

Following the slight increase from June to July in the proportion of clients with a learning disability in employment this has stagnated. We remain out of the bottom quartile compared to our Northwest neighbours, but in the bottom quartile nationally and against statistical neighbours.

Housing:

Sefton compares well to other local authorities on clients in settled accommodation. Just under 90% of clients in contact with secondary mental health and almost 88% of clients with a learning disability are living independently. This puts us in the top quartile in England for each of these metrics.

Safeguarding:

Currently safeguarding staff are undertaking a significant number of s42 enquiries for individuals that were originally living in one of two care homes that have recently been closed. There is also a further care setting, managed under organisational safeguarding, where intensive work is underway with the provider to improve the service, where findings have identified the need to open individual s42 enquiries to address the impact of failure by the provider.

We have encountered circumstances where, despite the service failing to meet the individual's care and support needs, they have expressed a wish to remain in their "home for life". This is considered to have negatively impacted on a slight fall in our Making Safeguarding Personal (MSP) data from the previous period although Sefton continues to achieve the preference of individuals in 80% being fully met, compared to 67.5% in the Northwest. 97.7% of people subject to safeguarding enquiry have their preferred outcome fully or partially met in Sefton compared to 95.4% across the Northwest.

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The volume of safeguarding contacts into ASC is sitting at a similar level pre-Covid after experiencing a fall in the early months of lockdown to a peak in June 2022 of around 277 contacts in the month. Conversion from contact to referral are twice as high as 12 months ago but this does not truly reflect an increase in reported incidents but a change in recording practices.

CABINET MEMBER UPDATE		
Overview and Scrutiny Committee (Adult Social Care) – 18 October 2022		
Councillor	Portfolio	Period of Report
Ian Moncur	Health and Wellbeing	September 22

Public Health

Workforce Mental Health Support Update

The QWell service was commissioned by public health in 2020 to offer a digital option for the management of mental health and wellbeing to Council employees including those working in education and domiciliary care. This was implemented due to the pressures of the emerging pandemic at that time. In the 2 years since its implementation its usage has diminished considerably. NICE published guidance in March 2022 recommending the DWP digital offer comparable to the QWell service be signposted to employees. The contract will not be renewed post Dec 31st 2022 for QWell, with the alternative offer being promoted to staff in the next few months to aid a smooth transition.

Age Well Obesity Update

The report updated on the work of the Age Well Obesity group, which, alongside the Start Well and Live Well Groups has been developed as part of the Obesity Task Force to ensure progress is made on the whole systems approach to obesity.

The task and finish group consists of a number of stakeholders who provide health promotion support from a preventative perspective through multidisciplinary clinical interventions for patients with high levels of obesity. This includes Living Well Sefton and Active Sefton, Public Health, representation from the tier 3 specialist Weight Management Service from University Hospital Aintree and wider VCF support responsible for mental wellbeing, to ensure integration of work around this agenda. Cheshire and Merseyside ICB representatives will be joining the meetings in due course and have been contributing information that has shaped progress during 2022.

After being established a number of months ago, the group has gained momentum following the challenges and distractions of the pandemic and are now well established. A service mapping exercise has been established, which has been used to inform development of an adult obesity pathway, currently in draft format. Alongside this, information has been collated to create a directory of services, allowing the group not only to form an up-to-date position of the current support services, but also any gaps in provision (e.g. weight management Dietetic support), which have been fed back through the system.

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Running alongside the above pathway, which is available both as a written document and diagrammatical form, work is also underway on a guidance document for front line professionals in relation to general messaging around overweight / obesity and how to raise the conversation with adults.

An action plan has also been developed outlining short-, medium- and long-term priorities for the group, which captures themes such as insight and intelligence, performance management, communication, marketing, education and training, the role of digital, commissioning priorities and links to other services, and work continues to progress the link between healthy weight and the falls and frailty agenda. Alongside enabling effective joined-up strategic discussions and actions around a whole system approach to overweight and obesity, the group has also led to increased and improved operational linkages between different parts of the adult obesity pathway.

It is the intention of the group over future months to continue working through the action plan that has been developed and make further progress.

Leisure Update

The 6 Leisure Centres are now fully reopened with their usual swim, gym and fitness classes. Despite the cost-of-living crisis, memberships continue to grow month on month since opening after the pandemic and are now slightly below pre-pandemic levels.

Over the summer holidays, particularly because of the Be Active Summer holiday programme, the Leisure Centres have been incredibly busy with activity and visitors, with swimming remaining incredibly popular and pools often at capacity. Clubs and bookings are also increasing at the sites ready for the winter season of sport.

The Leisure Centres are undergoing a number of projects; 1 in partnership with ICT to look at ICT infrastructure and ensure it is fit for purpose, along with work on a number of maintenance issues being faced by the sites. The service is also busy preparing to reprocur the customer relations management system necessary to operate the facilities.

All sites are busy planning activity around National Fitness Day, which is taking place on 21st September.

The wider Leisure development offer continues to support the wider work of the Council. Park Nights has been delivered throughout the summer holidays, providing diversionary activities for young people in areas where there had been anti-social behaviour, and the Be Active Programme was expanded back to the pre-pandemic programme with hundreds of activities available throughout the borough.

Referrals through to all targeted health and wellbeing programmes delivered through the Active Lifestyles and Active Sports Teams has now surpassed pre-pandemic

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levels, with staff now at full capacity and working with clients to offer the services as quickly as possible. The services have been demonstrating really positive outcomes and received some incredible feedback from Service Users.

The Active Workforce offer remains varied and important offer for our staff with a range of activities promoting physical and mental well-being.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	18 October 2022
Subject:	Work Programme 2022/23, Scrutiny Review Topics and Key Decision Forward Plan		
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:

- review the Committee's Work Programme for the remainder of the Municipal Year 2022/23;
- to identify any items for pre-scrutiny by the Committee from the Key Decision Forward Plan;
- report on progress of informal briefing sessions for Committee Members to be held during 2022/23;
- receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee;
- report on progress made by the Joint Health Scrutiny Committee in considering proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire;
- report on progress made by the Joint Health Scrutiny Committee in considering proposals in relation to clinical service integration for a number of services delivered by Liverpool University Hospitals NHS Foundation Trust (LUFT);
- report on progress of the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board; and
- note the update by Healthwatch Sefton.

Recommendations:

That:

- (1) the Work Programme for 2021/22, as set out in Appendix A to the report, be noted, along with any additional items to be included and thereon be agreed;

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- (2) items for pre-scrutiny from the Key Decision Forward Plan which fall under the remit of the Committee, as set out in Appendix C to the report, be considered and any agreed items be included in the work programme referred to in (1) above;
- (3) progress of informal briefing sessions for Committee Members to be held during 2022/23 be noted and Members be requested to indicate whether there are any further informal briefing sessions they would wish to be arranged.
- (4) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted;
- (5) the progress made on the Joint Health Scrutiny Committee (Hyper-Acute Services), be noted;
- (6) the progress made on the Joint Health Scrutiny Committee – Liverpool University Hospitals University Foundation Trust (LUFT), be noted;
- (7) The progress of the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board, be noted; and
- (8) the recent activities undertaken by Healthwatch Sefton, as outlined in Appendix D to the report, be noted.

Reasons for the Recommendation(s):

To determine the Work Programme of items to be considered during the Municipal Year 2022/23; to identify scrutiny review topics which would demonstrate that the work of the Overview and Scrutiny Committee “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.	
Climate Emergency Implications:	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
<p>There are no direct climate emergency implications arising from this report. Any climate emergency implications arising from the consideration of reports referred to in the Work Programme will be contained in such reports when they are presented to Members at the appropriate time.</p>	

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.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

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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 2022/23;
- Appendix B - Terms of Reference of the Committee, taken from the Council's Constitution
- Appendix C - Latest Key Decision Forward Plan items relating to this Overview and Scrutiny Committee;
- Appendix D - Update of recent activities undertaken by Healthwatch Sefton.

Background Papers:

There are no background papers available for inspection.

Introduction/Background

1. WORK PROGRAMME 2022/23

- 1.1 The Work Programme of items to be submitted to the Committee for consideration during the remainder of the Municipal Year 2022/23 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. The programme was approved by the Committee at its meeting held on 21 June 2022.
- 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 (set out in **Appendix B**) of the Committee. The Work Programme will be submitted to each meeting of the Committee during 2022/23 and updated, as appropriate.

- 1.3 **The Committee is requested to comment on the Work Programme for 2022/23, as appropriate, and note that additional items may be submitted to the Programme at future meetings of the Committee during this Municipal Year.**

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

- 2.1 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.
- 2.2 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.
- 2.3 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.
- 2.4 The latest Forward Plan, published on 30 September 2022, for the four-month period 1 November 2022 – 28 February 2023, is attached at **Appendix C** for this purpose. For ease of identification, items listed on the Forward Plan for the first time appear as shaded.
- 2.5 There are three items within the current Plan that falls under the remit of the Committee on this occasion, namely:
- Active Sefton Leisure Management System Business Case
 - Sefton Carers Centre
 - Integrated Employment Service
- 2.6 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.
- 2.7 **The Committee is invited to consider items for pre-scrutiny from the Key Decision Forward Plan as set out in Appendix C 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.**

3. SCRUTINY REVIEW TOPICS 2022/23 – INFORMAL BRIEFING SESSIONS

- 3.1 At the meeting of the Committee held on 21 June 2022, it was agreed that:
- “(3) rather than establish a traditional working group during 2022/23, all Members of the Committee be invited to participate in informal briefing

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sessions, and consideration be given to the suggestions raised above;”
(Minute No. 8 (3) of 21/06/22 refers).

3.2 Suggestions for informal briefing sessions have included the following:

- GP practices, to be delivered by the Sefton Clinical Commissioning Groups;
- Health inequalities, to be delivered by Public Health;
- Inviting representatives from the following organisations:
 - Liverpool University Hospitals NHS Foundation Trust;
 - North West Ambulance Service – particularly regarding developments with the acute stroke service.
 - Primary Care Networks; and
 - Mersey Care NHS Foundation Trust.
- Care Quality Commission (CQC) inspection of Adult Social Care.

3.3 NHS Cheshire and Merseyside, Sefton (formerly the CCGs) delivered an informal briefing session on primary care and GP practices to Committee Members on 20 September 2022.

3.4 At the time of drafting this report, an informal workshop session for Committee Members on health inequalities is scheduled for 16 November 2022 and further information will be provided to Committee Members in due course.

3.5 The Committee is requested to note the progress of informal briefing sessions for Committee Members to be held during 2022/23, and indicate if there are any further briefing sessions they would wish to be arranged.

4. LIVERPOOL CITY REGION COMBINED AUTHORITY OVERVIEW AND SCRUTINY COMMITTEE

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 three 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 Hansen, Howard and Waterfield. Councillor Howard is Sefton’s Scrutiny Link.

4.6 **Chair and Vice-Chair**

The Chair and Vice-Chair of the LCRCAO&S cannot be Members of the majority group. Councillor Steve Radford, a Liberal Party and Independent Group Councillor serving on Liverpool City Council has been appointed Chair for the 2022/23 Municipal Year; and Councillor Pat Moloney, a Liberal Democrat Councillor serving on Liverpool City Council has been appointed Vice-Chair.

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 fourteen, 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. This has on occasion caused meetings to be inquorate.

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>

Latest Meeting – 7 September 2022

The latest meeting of the LCRCAO&S was held on 7 September 2022 and the Committee considered the following items:

- Portfolio Holder Update - Business Support
- Race Equality Programme

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- Recommendations of the Improving Disability Employment Opportunities in the Liverpool City Region Task and Finish Group
- Work Programme Update

The next meeting of the LCRCOA&S will be held on 9 November 2022. At the time of drafting this report the agenda for the meeting has not yet been published. Matters discussed at this meeting will be reported to Members at the next meeting of the Committee.

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

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

5. JOINT HEALTH SCRUTINY COMMITTEE (HYPER-ACUTE SERVICES)

5.1 At the Special Meeting of the Committee held on 27 July 2021, the Committee considered proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire and agreed:

“That the Committee considers that the proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside constitute a substantial development / variation in services for Sefton residents.” (Minute No. 16 refers).

5.2 Other local authorities consulted also agreed that the reconfiguration of the hyper-acute stroke services across North Merseyside constituted a substantial development / variation in services for residents. The other local authorities affected are Knowsley, Liverpool and West Lancashire Councils.

5.3 A Joint Health Scrutiny Committee was established, comprised of Members from the four local authorities consulted, to consider proposals for the reconfiguration of the hyper-acute stroke services across North Merseyside and West Lancashire.

5.4 For 2021/22 Councillors Myers and Thomas were Sefton’s representatives on the Joint Health Scrutiny Committee. Sefton’s representatives on the Joint Health Scrutiny Committee for 2022/23 were Councillor Thomas and Councillor Brodie-Browne).

5.5 Meetings of the Joint Health Scrutiny Committee have taken place as follows:

- 11 November 2021;
- 28 January 2022;
- 1 March 2022;
- 11 May 2022; and
- 7 September 2022.

5.6 Details of meetings held to date can be obtained using the link below:

[Browse meetings - Joint Health Scrutiny Committee \(Hyper-Acute Stroke Services\) - Liverpool City Council](#)

5.7 **The Committee is requested to note the progress made on the Joint Health Scrutiny Committee (Hyper-Acute Services).**

6. **JOINT HEALTH SCRUTINY COMMITTEE – LIVERPOOL UNIVERSITY HOSPITALS UNIVERSITY FOUNDATION TRUST (LUFT)**

6.1 At the Special Meeting of the Committee held on 31 January 2022, the Committee considered proposals in relation to clinical service integration for a number of services delivered by Liverpool University Hospitals NHS Foundation Trust (LUFT), and agreed:

“That the Committee considers that the each of the proposals detailed in Appendix A to the report constitute a substantial development / variation in services delivered by Liverpool University Hospitals NHS Foundation Trust, for Sefton residents.” (Minute No. 41 refers).

6.2 Other local authorities consulted also agreed that the proposals constituted a substantial development / variation in services delivered by Liverpool University Hospitals NHS Foundation Trust, for their residents. The other local authorities affected are Knowsley and Liverpool Councils. The proposed reconfiguration schemes are in relation to:

- General surgery;
- Vascular services;
- Breast services;
- Nephrology services; and
- Urology services.

6.3 A Joint Health Scrutiny Committee was established, comprised of Members from the three local authorities consulted, to consider proposals in relation to clinical service integration for a number of services delivered by Liverpool University Hospitals NHS Foundation Trust (LUFT).

6.4 Sefton’s representatives on the Joint Health Scrutiny Committee for 2022/23 were as follows:

- Chair (Councillor Thomas);
- Vice Chair (Councillor Myers) of the O & S Committee (Adult Social Care); and
- Councillor Brough (the Labour Group offered the place to Councillor Brough in order to retain continuity on the Joint Health Scrutiny Committee).

6.5 Meetings of the Joint Health Scrutiny Committee have taken place as follows:

- 22 March 2022; and
- 30 September 2022.

6.6 Details of meetings held to date can be obtained using the link below:

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[Browse meetings - Joint Health Scrutiny Committee \(LUHFT Clinical Services Reconfiguration\) - Liverpool City Council](#)

- 6.7 **The Committee is requested to note the progress made on the Joint Health Scrutiny Committee – Liverpool University Hospitals University Foundation Trust (LUFT)**

7. JOINT CHESHIRE AND MERSEYSIDE SCRUTINY COMMITTEE

- 7.1 On 1 July 2022 the Health and Care Act required the Cheshire and Merseyside Integrated Care Board to commence operation.
- 7.2 A Joint Cheshire and Merseyside Scrutiny Committee has now been established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board, comprised of representatives of local authorities from Cheshire and Merseyside. Sefton's representatives are Councillors Brodie-Browne and Thomas.
- 7.3 Knowsley MBC will be acting as secretariat to the Joint Cheshire and Merseyside Scrutiny Committee and it is anticipated that agendas and Minutes of meetings of the Joint Scrutiny Committee will be included on the website once formal meetings commence.
- 7.4 A Member Induction Session for the Joint Cheshire and Merseyside Scrutiny Committee took place on 30 September 2022 and it is anticipated that the first formal meeting of the Joint Scrutiny Committee will take place early in November 2022.
- 7.5 **The Committee is requested to note the progress of the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board.**

8. HEALTHWATCH SEFTON

- 8.1 An update of recent activities undertaken by Healthwatch Sefton is attached to this report at **Appendix D**, for information.
- 8.2 ***The Committee is requested to note recent activities undertaken by Healthwatch Sefton.***

OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

WORK PROGRAMME 2022/23

Date of Meeting	21 JUNE 22 Bootle	06 SEPTEMBER 22 Southport	18 OCTOBER 22 Bootle	03 JANUARY 23 Southport	22 FEBRUARY 23 Bootle
Item					
Regular Reports:					
Cabinet Member Update Report (Julie Leahair/Julie Eliot/Debbie Campbell)	X	X	X	X	X
Work Programme Update (Debbie Campbell)	X	X	X	X	X
CCGs' Update Report (CCGs)	X	X	X	X	X
Health Provider Performance Dashboard (To include NWAS data) (CCGs)	X	X	X	X	X
Service Operational Reports:					
Public Health Outcomes Framework (Margaret Jones)	X				
Update on Implementation of Mental Health Services Working Group Recommendations (Eleanor Moulton)		X			
Domestic Abuse (Simon Burnett/Janette Maxwell)		X			

Item	21 JUNE 22 Bootle	06 SEPTEMBER 22 Southport	18 OCTOBER 22 Bootle	03 JANUARY 23 Southport	22 FEBRUARY 23 Bootle
Service Operational Reports (Continued):					
Sefton Integrated Care Partnership - Development (Eleanor Moulton)		X		X	
Adult Safeguarding Update (Eleanor Moulton)			X		
Winter Plan (Deborah Butcher/Eleanor Moulton)				X	
Local Government Association Peer Review Adult Social Care (Eleanor Moulton/Sarah Alldis)				X	
The Cost-of-Living Crisis (Deborah Butcher/Margaret Jones)				X	
Public Health Annual Report (Charlotte Smith)					X
Adult Social Care Performance (Deborah Butcher)					X
Care Homes – Quality & Safeguarding) (Deborah Butcher)					X

Item	21 JUNE 22 Bootle	06 SEPTEMBER 22 Southport	18 OCTOBER 22 Bootle	03 JANUARY 23 Southport	22 FEBRUARY 23 Bootle
NHS Updates:					
Liverpool University Hospitals NHS Foundation Trust (Representatives to be invited to attend)			X		
Southport & Ormskirk Hospital NHS Trust (Representatives to be invited to attend)				X	
National GP Access Survey (Jan Leonard, NHS C&M, Sefton)				X	

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CONSTITUTION

Chapter 6 Overview and Scrutiny Committees

SCRUTINY COMMITTEES

ADULT SOCIAL CARE AND HEALTH MEMBERSHIP

10 Councillors

TERMS OF REFERENCE

To fulfil all the functions of an Overview and Scrutiny Committee as they relate to Adult Social Care and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 to review and make recommendations for improvement in relation to the following functions:

- Public Health
- Leisure
- Welfare Reform
- Integrated Wellness Service
- Parks and green spaces (including Allotments, Golf Courses, Trees and Sports Pitches, play areas and skate parks)
- Day care
- Home care
- Residential care
- Respite care
- Carers
- Quality
- Safeguarding
- Assessments
- Direct Payments

Chapter 6 Overview and Scrutiny Committees

- To formally respond to consultations by relevant NHS bodies and relevant service health providers on substantial reconfiguration proposals.



SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

FOR THE FOUR MONTH PERIOD 1 NOVEMBER 2022 - 28 FEBRUARY 2023

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:-

Agenda Item 9

APPENDIX C

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
Active Sefton Leisure Management System Business Case	Simon Burnett Simon.Burnett@sefton.gov.uk
Sefton Carers Centre	Angela Clintworth angela.clintworth@sefton.gov.uk
Integrated Employment Service	Angela Clintworth angela.clintworth@sefton.gov.uk

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	Active Sefton Leisure Management System Business Case The purpose of the report is to identify the requirement for a new Leisure Management System for Sefton's Leisure Centres			
Decision Maker	Cabinet			
Decision Expected	3 Nov 2022 Decision due date for Cabinet changed from 06/10/2022 to 03/11/2022. Reason: work is on-going on the Business Case			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Fully exempt (Paragraph 3)			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Persons/Organisations to be Consulted	Cabinet Member Health & Wellbeing			
Method(s) of Consultation	Meetings , Emails, Briefings			
List of Background Documents to be Considered by Decision-maker	Active Sefton Leisure Management System Business Case			
Contact Officer(s) details	Simon Burnett Simon.Burnett@sefton.gov.uk			

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	Sefton Carers Centre Seek approval to implement a 2 year contract whilst we undertake a full service review.			
Decision Maker	Cabinet			
Decision Expected	3 Nov 2022 Decision due date for Cabinet changed from 06/10/2022 to 03/11/2022. Reason: Internal discussions on the proposal are ongoing			
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	Procurement, Legal, Finance, Adult Social Care, Children's Social Care, Communities, Clinical Commissioning Groups, Service Provider.			
Method(s) of Consultation	Stakeholder meetings via Microsoft Teams and communication via email.			
List of Background Documents to be Considered by Decision-maker	Sefton Carers Centre			
Contact Officer(s) details	Angela Clintworth angela.clintworth@sefton.gov.uk			

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	Integrated Employment Service To seek approval to procure an integrated employment service.			
Decision Maker	Cabinet			
Decision Expected	3 Nov 2022 Decision due date for Cabinet changed from 06/10/2022 to 03/11/2022. Reason: Internal discussions on the proposal are ongoing			
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	Procurement, Legal, Adult Social Care, Inward Investment & Employment, Clinical Commissioning Groups.			
Method(s) of Consultation	Stakeholder Meetings and via email.			
List of Background Documents to be Considered by Decision-maker	Integrated Employment Service			
Contact Officer(s) details	Angela Clintworth angela.clintworth@sefton.gov.uk			

UPDATE REPORT FROM HEALTHWATCH – 18 OCTOBER 2022

Current themes

Looking at the data we have gathered (July – September 22) access to services remains the top issue, with residents talking to us about appointment availability and how appointments can be booked. The majority of this feedback relates to GP practices.

GP Access.

- In speaking with residents as part of our return to face-to-face engagement, access continues to still be one of the key issues which residents talk about. The impact for patients with disabilities not being able to engage with reception staff (in a number of practices) face-to-face means they are not able to communicate with their practice and concerns relate to undiagnosed conditions/longer term health impacts.
- Online access using the e-consult facility continues to be another issue being raised. In contacting practices by telephone, patients are often advised to use the online service. Patients who choose to do this, give up their position in the telephone queue, go online, only to find that this service is unavailable. Our recent mapping exercise to review this further has now been completed. We undertook a non-scientific/simple process of just logging onto GP practice websites at various points in the day (2 practices per locality) during July and August. Although a short and simple exercise, the following practices had their e-consult facility turned off consistently (Ainsdale Medical Centre/ The Village Surgery/ High Pastures/ Ford Medical Centre/ Glovers Lane)/ We have shared this information with the Sefton Primary Care Committee and await an update.
- Our National Director, Louise Ansari, has responded to the recently published 'Plan for Patients' stressing that GP practices must be supported ahead of what's expected to be a challenging winter;
"GP access is by far the most common frustration people have been raising with us for the last two years, and we know barriers at the front door of the NHS can create very serious problems further down the line. Bringing in more support staff and improving phonelines will provide much needed reinforcements for GP surgeries and help them make the process of getting an appointment more efficient and easier for everyone. As we head into the winter months the NHS is going to face pressures across the whole system, while managing the backlog in diagnostics and surgery that built up as a result of the pandemic. GP practices, as the vital first port of call for most people, need to be supported to make sure everyone who needs care is able to access it in a timely and appropriate way."

Access to NHS Dentistry

- For August and September, contact with our Signposting and Information service about access to dentistry has dropped to 28% and 33% of total contacts respectively.
- Following a meeting with NHS England, we have been recording incidences of cases unable to get complete care after being seen by an emergency dentist. We have recorded 5 contacts of this type during August and September.
- Other cases of concern are patients with an existing condition that is being impacted by lack of access to dental care. For example a cancer patient unable to start treatment without a dental check (NHSE were able to help in this case), a patient with diabetes losing teeth, patients with mental health issues and/or weight loss due to dental health issues.

Aintree Hospital Accident & Emergency Department

- We have been picking up feedback about accessing emergency care at Aintree Hospital. Healthwatch Sefton was invited into the department by the trust and on the 22nd August, we attended to undertake an observational visit. A report has been submitted to the Trust which includes observations and areas which we suggest could improve experience and we await their response.

Operational updates

Home care – feedback from our residents

This project has commenced and we are contacting 100 residents who currently receive home care offering the opportunity to share their feedback on how they find the support and care they receive in their own homes. An update will be provided within our next report.

John Turner (volunteer Chairperson)

John is working through his induction and has attended his first meeting of the Health & Well Being Board. John has numerous meetings in the diary with key stakeholders to make local introductions.

Diane Blair BA (Hons) MSc

Manager

07706 317749

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.
Freephone:0800 206 1304



Healthwatch Sefton
Sefton Council for Voluntary Service (CVS)
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