

Public Document Pack

Sefton Council



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

DATE: Tuesday, 21st February 2023

TIME: 6.30 p.m.

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. Michael Roche
Cllr. Gareth Lloyd-Johnson
Cllr. Sir Ron Watson, C.B.E.
Cllr. Daniel McKee
Cllr. Veronica Webster
Cllr. Sonya Kelly
Cllr. Paul Tweed
Cllr. Judy Hardman
Cllr. Leo Evans

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

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

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

AGENDA

1. Apologies for Absence

2. Declarations of Interest

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

Where a Member discloses a Disclosable Pecuniary Interest, he/she must withdraw from the meeting 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 - 14)

Minutes of the meeting held on 3 January 2023

4. Cheshire and Merseyside Cancer Alliance (Pages 15 - 36)

Jon Hayes, Managing Director, Cheshire and Merseyside Cancer Alliance, to attend

5. Southport and Ormskirk Hospital NHS Trust - Next Steps in Proposed Partnership (Pages 37 - 38)

Anne-Marie Stretch, Managing Director, Southport and Ormskirk Hospital NHS Trust, to attend.

6. Safeguarding Update

Michelle Creed, the independent Chair of the Safeguarding Adults Board, to attend to give a presentation on progress and priorities

7. Sefton New Directions (Pages 39 - 52)

Report of the Executive Director of Adult Social Care and Health / Place Director

- 8. Adult Social Care Performance Update** (Pages 53 - 62)
Report of the Executive Director Adult Social Care and Health
- 9. Liverpool Clinical Services Review - Stakeholder Update** (Pages 63 - 72)
Report of the Chief Legal and Democratic Officer
- 10. NHS Cheshire and Merseyside, Sefton - Update Report** (Pages 73 - 82)
Report of the Sefton Place Director, NHS Cheshire and Merseyside
- 11. NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard** (Pages 83 - 90)
Report of the Sefton Place Director, NHS Cheshire and Merseyside
- 12. Cabinet Member Reports** (Pages 91 - 108)
Report of the Chief Legal and Democratic Officer
- 13. Work Programme Key Decision Forward Plan** (Pages 109 - 124)
Report of the Chief Legal and Democratic Officer
Appendix C - Update of recent activities undertaken by Healthwatch Sefton TO FOLLOW

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OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

MEETING HELD AT THE TOWN HALL, SOUTHPORT
ON TUESDAY 3RD JANUARY, 2023

PRESENT: Councillor Thomas (in the Chair)
Councillor Myers (Vice-Chair)
Councillors Brodie-Browne, Halsall, Lunn-Bates and Pugh

ALSO PRESENT: Mr. B. Clark, Healthwatch Representative

28. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Cluskey; Diane Blair, Healthwatch; Councillor Cummins, Cabinet Member – Adult Social Care; and Councillor Moncur, Cabinet Member – Health and Wellbeing.

29. DECLARATIONS OF INTEREST

In accordance with Paragraph 9 of the Council's Code of Conduct, the following declaration of personal interest was made and the Member remained in the room during the consideration of the item:

Member	Minute No.	Nature of Interest
Councillor Thomas	Minute No. 32 - Paediatric Radiotherapy Services	She has previously been a patient of the consultant concerned.

30. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

That the Minutes of the meeting held on 18 October 2022, be confirmed as a correct record.

31. SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST

Anne-Marie Stretch, Managing Director, Southport and Ormskirk Hospital NHS Trust, attended to give a presentation that outlined information on the following:

- Winter pressures:
 - Winter Plan and Winter performance
- Financial pressures

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- Progress against delivering the agreement for long term collaboration (ALTC - Southport & Ormskirk Hospitals NHS Trust and St Helens & Knowsley Teaching Hospitals NHS Trust), including:
 - Additional funding secured during ALTC
 - Progress on fragile services
- Progress on improvements since CQC unannounced inspection March 2021:
 - Key Findings
 - Focus of Improvement
- Progress on Shaping Care Together
- Early findings on new arrangements for hyper acute stroke service with Aintree

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

- Current demand for treatment at the Trust and admission rates.
- Re-admission rates.
- Financial pressures.
- The possibility of potential industrial action.
- Hyper acute stroke services and the impact of journey times for ambulances travelling to Aintree Hospital.
- The underlying deficit for the Trust.
- Capital investment on the estate.
- The future of Maternity and Paediatric Services.
- The future of children's A&E.
- Treatment of hyper acute strokes within 4 hours.
- Stroke service provision by the Trust and clinical cover provided at Southport Hospital. Additional information could be obtained.
- Financial deficits carried by the NHS Trusts involved in the long-term collaboration.

RESOLVED: That

- (1) Anne-Marie Stretch, Managing Director, be thanked for her attendance;
- (2) the presentation be noted; and
- (3) the Managing Director be requested to provide additional information on stroke service provision and clinical cover provided at Southport Hospital, in due course.

32. PAEDIATRIC RADIOTHERAPY SERVICES

Andrea Doherty, Head of North West Women and Children's Transformation, North West Acute Strategy & Transformation (Specialised Commissioning), NHS England, attended the meeting to present a report

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on the Proposed Cheshire & Merseyside Paediatric Radiotherapy Service Transfer. Ms. Doherty also gave a presentation that outlined the following:

- Radiotherapy
- Background Information and Current Service Challenges
- Planned Future Service Arrangements
- Limiting the potential impact for patients and their families

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

- The situation faced by families when treatment continued for some time.
- Recruitment of anaesthetists for general anaesthetics.
- The journey home following treatment.
- Future monitoring of clinical cases.
- Numbers of children affected by the proposed transfer.
- The clinical case for change.
- Assurances were sought that the proposals did not represent a substantial variation.
- The possibility of providing feedback on the impact of travel, once the clinical pathway had been completed. Further information could be provided in due course.

RESOLVED: That

- (1) Andrea Doherty be thanked for her attendance;
- (2) the report and presentation be noted and it be agreed that the proposals for Paediatric Radiotherapy Services for Cheshire and Merseyside do not represent a substantial variation and that the approach taken to engage with patients to inform the proposal is commensurate with the scale of the proposed change; and
- (3) NHS England be requested to provide further feedback on the impact of travel in due course, once the clinical pathway has been completed.

33. COST OF LIVING CRISIS

The Committee considered the joint report of the Director of Public Health and the Executive Director of Adult Social Care and the Sefton Place Director, NHS Cheshire and Merseyside, that sought to provide an update on current cost of living interventions across Sefton and assurance on the actions being taken to mitigate risks to the health and wellbeing of residents. The report set out information on at risk groups in Sefton; the impact on services and emerging issues; and the response by the Council. The report concluded that the scale of the cost-of-living crisis was unprecedented and the response was being delivered across the Council, voluntary sector and NHS partners, and aimed to maximise people's

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income, together with mitigating the multiple increasing risks to health and wellbeing.

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

- Any measures taken to mitigate risks to lower paid staff within the local authority and NHS, to prevent them from falling into poverty.
- Any trade union representation on the Cost-of-Living Reference Group.
- The balance between the costs associated with certain leisure facilities, such as swimming pools, and their connection with wellbeing.
- Any figures available for increases to costs associated with swimming pools and other high maintenance leisure facilities. Figures could be requested.
- Any monitoring of pay and pensions associated with the care sector. Information could be obtained.
- Ensuring any employer contributions were met when contracts were commissioned. Information could be obtained.
- Tracking of increases in respiratory conditions, as a result of inadequate housing conditions. Information could be obtained.
- Tracking of dentistry usage.
- Work undertaken by the Affordable Warmth Team in liaising with fuel providers.
- Venues for Warm Spaces and how this is communicated to the wider public. Additional information could be obtained.

RESOLVED: That

- (1) the contents of the report be received and noted; and
- (2) the Director of Public Health and the Executive Director of Adult Social Care and the Sefton Place Director, NHS Cheshire and Merseyside, be requested to provide additional information to the Senior Democratic Services Officer for circulation to Members of the Committee on:
 - increases to costs associated with swimming pools and other high maintenance leisure facilities;
 - monitoring of pay and pensions associated with the care sector;
 - payment of any employer contributions when contracts are commissioned;
 - increases in respiratory conditions, as a result of inadequate housing conditions; and
 - how venues for Warm Spaces are communicated to the wider public.

34. WINTER PLAN

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The Committee considered the report of the Executive Director of Adult Social Care and Health that provided an overview of the activity to plan additional services and prepare for Winter 2022/23 and the expected increased demand and challenge to service delivery this may bring. The report indicated that there had been a delay in allocating additional monies to Health and Social Care which had led to a delay in developing new services and bolstering existing ones. The report set out the background to the matter; the Sefton winter planning process; the Sefton place winter plan, intelligence and impacts; oversight and risk oversight undertaken by the Cheshire and Merseyside Integrated Care Board; how the Winter Plan was funded; together with next steps to be taken regarding priorities and investments.

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

- Whether the implementation of the Winter Plan was achieving a positive impact on patient flow.
- Any difficulties associated with delays in funding.
- Workforce planning, particularly associated with carers and their training and pension contributions.

RESOLVED:

That the information contained within the report be received and noted.

35. ADULT SOCIAL CARE LOCAL GOVERNMENT ASSOCIATION PEER REVIEW

The Committee considered the report of the Director of Public Health that presented the findings of the recent Local Government Association (LGA) Peer Review into Adult Social Care in Sefton. For assurance, it also provided details of the actions being taken following the review.

The report set out the background to the matter, indicating that the Executive Director of Adult Social Care, with the approval from the relevant Cabinet Member and Chief Executive, invited the LGA to complete a review of the service ahead of the arrival of the Care Quality Commission's assurance inspections which could be as early as 2023.

The Peer Review was conducted in July 2022 by colleagues from the LGA, Northwest Association of Directors of Adult Social Services (NW ADASS) with senior officers from other participating local authorities. The Peer Review team was led by the Director of Adult Social Services from Leeds City Council and consisted of colleagues from Lancashire, Leeds, Tameside, Waltham Forest, and Wigan Councils. Representatives from the LGA also formed part of the challenge team, The Peer Review mirrored the scope of the new assurance approach which would be implemented by the Care Quality Commission into all Councils with Adult Social Care responsibilities.

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Following the review, a detailed improvement plan had been developed to address the areas identified for strengthening by the Peer Review Team and this was detailed within Appendix 1 of the report. It was proposed that progress against the plan should be provided to Committee on a regular basis, with ongoing monitoring being undertaken by the Cabinet Member - Adult Social Care and the Executive Director of Adult Social Care and Health.

The report set out the background to the matter; the local context; an overview of the review; findings from the review; and action taken post-review.

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

- Challenges associated with a lack of carers.
- The political leadership of Adult Social Care.
- Frequency of reporting progress to the Committee.

RESOLVED: That

- (1) the content of the report and the full LGA Peer Review be noted;
- (2) the improvement plan and feedback provided be noted;
- (3) the proposal for on-going monitoring of the plan through this Committee, the Cabinet Member - Adult Social Care and the Executive Director of Adult Social Care and Health, be confirmed; and
- (4) updates to the Committee on progress within the improvement plan, to enable robust assurance on progress, be provided as and when deemed necessary.

36. NATIONAL GP ACCESS SURVEY

The Committee considered the report of NHS Cheshire and Merseyside (Sefton) that presented the findings of the GP General Access engagement that had been carried out to gather feedback from residents on their GP practice. The findings outlined the following:

- Introduction and background
- Demographic profiling
- Experiences of accessing the GP practice during the pandemic
- Experiences of being triaged
- Experiences of appointments during the pandemic
- Experiences of using the GP practice website
- Summary of findings
- Next steps

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

- The way the data was presented within the survey for accessing GP practices by telephone.
- Different approaches taken by different receptionists.
- Patient care for different conditions.
- How the data contained within the survey had been obtained.
- Advice for patients struggling to access a GP.
- Concerns that opportunities for early diagnosis of conditions were being missed.

RESOLVED:

That the report be noted.

37. 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 NHS Cheshire and Merseyside, Sefton. The report outlined details of the following:

- An update from Primary Care 24
- Residents reminded about enhanced access service
- Keeping warm and well in the cold weather
- Winter planning
- Advice on Strep A in children
- HSJ Partnership Awards 2023 Shortlist Announcement
- New Sefton Partnership website

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

- Congratulations were extended to the team short-listed for an award.
- The re-opening of GP practices in Seaforth and Netherton was welcomed.
- An apparent lack of liquid form antibiotics for children with streptococcus A infections.

RESOLVED: That

- (1) the update report submitted by the Sefton Place Director, NHS Cheshire and Merseyside (Sefton) be received; and
- (2) the congratulations of the Committee be extended to the High Intensity Use (HIU) of Services team for being shortlisted at the HSJ

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Partnership Awards 2023.

38. NHS CHESHIRE AND MERSEYSIDE, SEFTON - 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 for North and South Sefton, 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.

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

- Ambulance response times.

RESOLVED:

That the information on Health Provider Performance be noted.

39. 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:

- Update on the National Assurance Update for Adult Social Care
- Integration and National Policy Update:
 - Sefton Partnership Maturity
 - New Sefton Partnership Website
- Life Course Commissioning:
 - Domiciliary Care
 - Day Opportunities
 - Care Homes
 - Winter Planning
 - Charging Reform
- Adult Social Care Budget
- Adult Social Care Complaints, Compliments and MP Enquiries
- Principal Social Worker Update (PSW)
- Performance and Key Areas of focus:
 - Admission into Care and Reablement
 - Self-directed support and direct payments
 - Employment

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- Housing
- Safeguarding
- Service User Engagement
- Learning and Development

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

Public Health:

- Public Health Risk Register
- Suicide Audit
- Flu and Respiratory Update
- Public Health Outcomes Framework

Leisure Update:

- Leisure Development
- Sefton Active Summer Holiday Programme
- Procure and Replacement Leisure Management System
- Essential Leisure Facility Repairs and Improvements

RESOLVED:

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

40. WORK PROGRAMME KEY DECISION FORWARD PLAN

The Committee considered the report of the Chief Legal and Democratic Officer that sought to: review the Committee's Work Programme for the remainder of the Municipal Year 2022/23; note that there were no items for pre-scrutiny by the Committee from the latest Key Decision Forward Plan; report on progress of informal briefing sessions for Committee Members held during 2022/23 to date and indicate if there were any further briefing sessions that Members would wish to be arranged; agree the recommendations made at the informal workshop session for Committee Members on health inequalities; receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; receive an update on the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board; consider the process to be undertaken during 2023 regarding draft Quality Accounts; and receive an update by Healthwatch Sefton.

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

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- Thanks were extended to Margaret Jones, Director of Public Health, for providing the informal workshop session for Committee Members on health inequalities.

RESOLVED: That

- (1) the Work Programme for 2022/23, 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 fact that there are no items for pre-scrutiny from the Key Decision Forward Plan that fall under the remit of the Committee, on this occasion, be noted;
- (3) progress of informal briefing sessions for Committee Members held during 2022/23 be noted and no further informal briefing sessions be arranged for the time being;
- (4) the Public Health Director be requested to submit the Public Health Outcomes Framework to the Overview and Scrutiny Committee (Adult Social Care and Health) on a six-monthly basis, for information;
- (5) the Head of Highways and Public Protection be requested to investigate the possibility of obtaining information on sales of vaping products, with a view to the Public Health Director identifying possible trends;
- (6) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted;
- (7) the update on the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board, be noted;
- (8) consideration of draft Quality Accounts during 2023 be delegated to the Chair and Vice-Chair of the Committee, in consultation with the Healthwatch representatives; and
- (9) the recent activities undertaken by Healthwatch Sefton, as outlined in Appendix B to the report, be noted.

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting	21 February 2023
Subject:	Cancer Alliance Update		
Report of:	Cheshire and Merseyside Cancer Alliance	Wards Affected:	All
This Report Contains Exempt / Confidential Information	No		
Contact Officer:	Jon Hayes, Cheshire and Merseyside Cancer Alliance		
Tel:			
Email:	Jon.hayes1@nhs.net		

Purpose / Summary of Report:

To provide an overview of the activities of Cheshire and Merseyside Cancer Alliance in Sefton.

Cheshire and Merseyside Cancer Alliance is an NHS organisation that brings together healthcare providers, commissioners, patients, cancer research institutions and voluntary & charitable sector partners to improve cancer outcomes for the local population.

The Alliance is responsible for:

- Delivering the NHS Long Term Plan objectives for cancer, including the ambition that, by 2028, 75% of cancers will be diagnosed at stages 1 and 2
- Reducing unwarranted variation in care, access, patient experience and outcomes
- Improving performance against cancer waiting times standards
- Supporting innovation and safeguarding the long-term sustainability of cancer services

The Alliance is funded by, and accountable to, the national cancer programme within NHS England. The Alliance is hosted by The Clatterbridge Cancer Centre NHS Foundation Trust.

The attached report highlights the work of the Alliance with particular reference to improving cancer outcomes for the population of Sefton.

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Recommendation(s)

This item is for information and discussion.

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2022/23 Programme Overview

Sefton



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Introduction



The outlook for cancer services, care and treatment across Cheshire and Merseyside (C&M) is very different from a year ago.

While COVID-19 has not gone away, thanks to the dedication of everyone who works in healthcare to deliver the coronavirus vaccines, the burden of its effects on our colleagues across the NHS has lessened considerably. For several months now, Cheshire & Merseyside Cancer Alliance (CMCA) has focused on the 'recovery' phase of the pandemic. We have been supporting primary, secondary and tertiary care in tackling cancer in many different ways to achieve the vision of the NHS Long Term Plan in saving thousands of lives each year by dramatically improving how we diagnose and treat cancer.

The main areas of our work include:

- **Reducing waiting times for diagnosis or treatment that some patients face in certain parts of the service**
- **Improving awareness of the symptoms of cancer so people are encouraged to come forward earlier with signs of disease**
- **Working with healthcare professionals to provide improved, personalised and faster treatments and care for patients and their families**
- **Creating new initiatives to prevent cancer developing in the first place**

This pack intends to provide an overview of our 2022/23 programmes of work, with a specific focus on projects and initiatives underway in Sefton.

All these initiatives are designed to enhance outcomes for people living with and beyond cancer in each area and community in C&M. To do this comprehensively in everything we do, we have concentrated on achieving equity of access to cancer care and treatment – by recognising and removing barriers that certain individuals and communities face in receiving it.

Our work would not be possible without the co-operation, support and partnership of not only the NHS and other healthcare organisations in C&M, but also of our dedicated colleagues in the charity, voluntary and public sectors who are keen to focus on cancer. By working together, we can return to the steady progress we were making before the pandemic in reducing the number of deaths due to cancer across C&M – and lessening the concern that people understandably feel when faced with a cancer diagnosis.

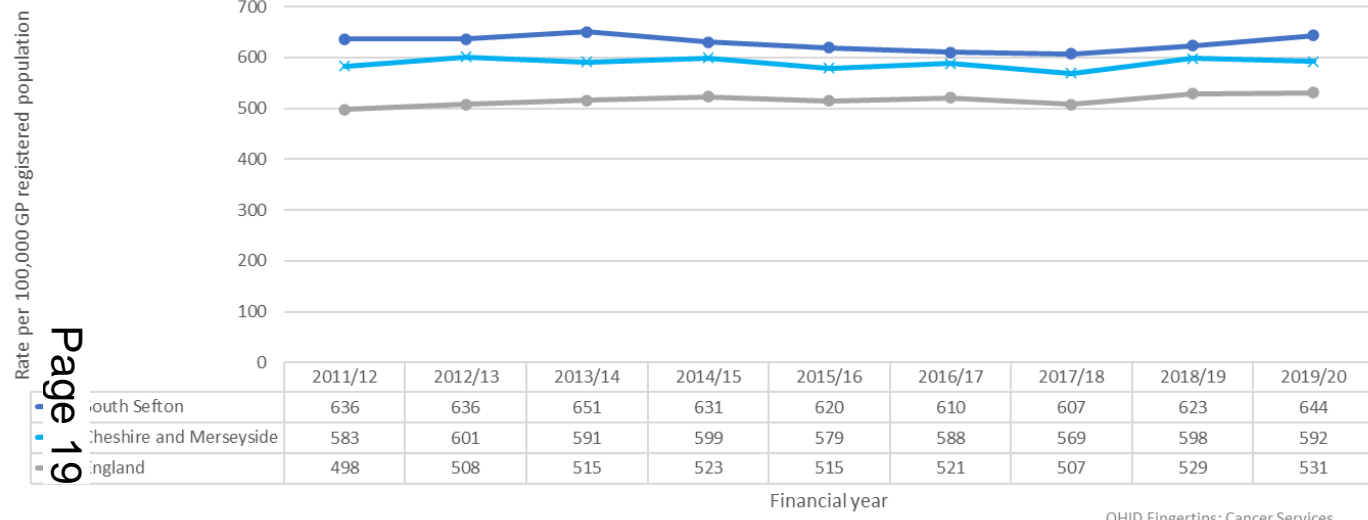
Ultimately, this means giving patients, their families and friends hope of a positive outcome that is cancer-free or having a full life while living with the disease. We hope this annual report outlines the many areas that cancer prevention, diagnosis, treatment and care is improving, to give hope to everyone touched by cancer across Cheshire and Merseyside – now and in the future.



Data: Cancer Incidence



**New cancer cases per 100,000 GP registered population
2011/12 – 2019/20**



The most recent cancer incidence data refers to 2019/20.

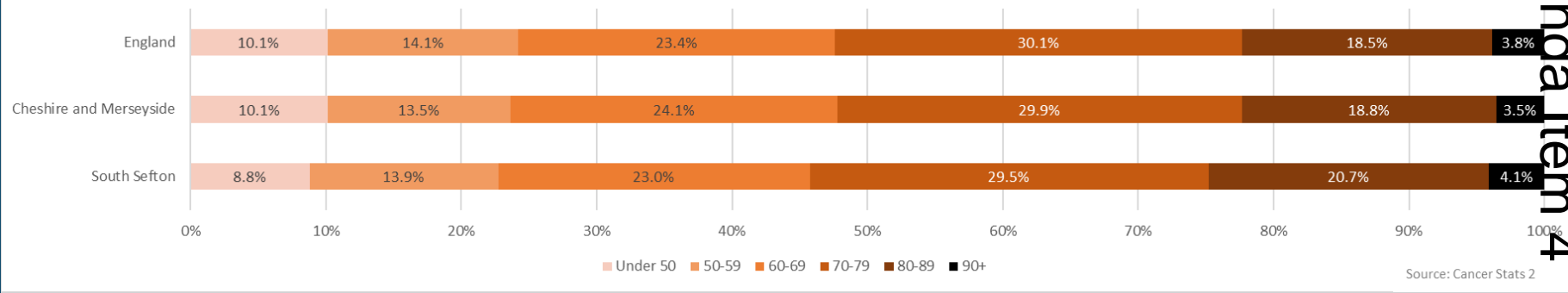
In South Sefton, **cancer incidence (rate per 100,000) is higher than in Cheshire and Merseyside**, and higher than in England as a whole.

For every 100,000 people registered with a GP practice in South Sefton, **644 were diagnosed with a new cancer in 2019/20** compared to 592 in Cheshire and Merseyside and 531 in England as a whole.

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The proportion of new cancers in each age range was statistically similar in South Sefton to both Cheshire and Merseyside and England as a whole in 2019.

**Cancer incidence 2019
by age range**

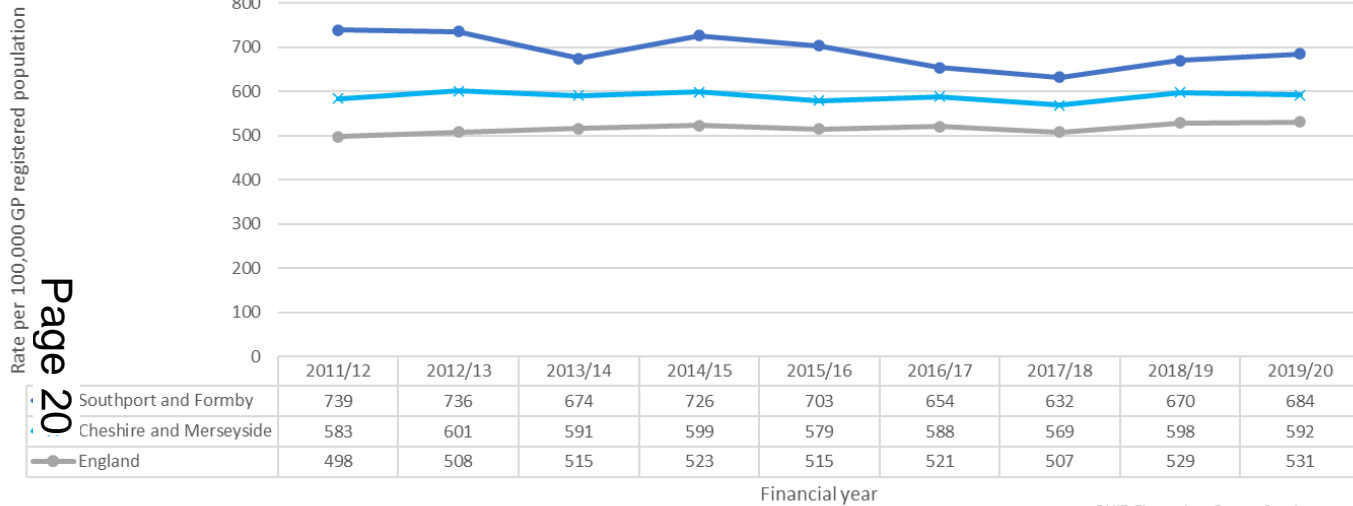


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Data: Cancer Incidence



**New cancer cases per 100,000 GP registered population
2011/12 – 2019/20**



The most recent cancer incidence data refers to 2019/20.

In Southport and Formby, **cancer incidence (rate per 100,000) is higher than in Cheshire and Merseyside**, and higher than in England as a whole.

This is in line with the relatively high proportion of people aged over 50 living in this area (49% vs 40% in Cheshire and Merseyside overall).

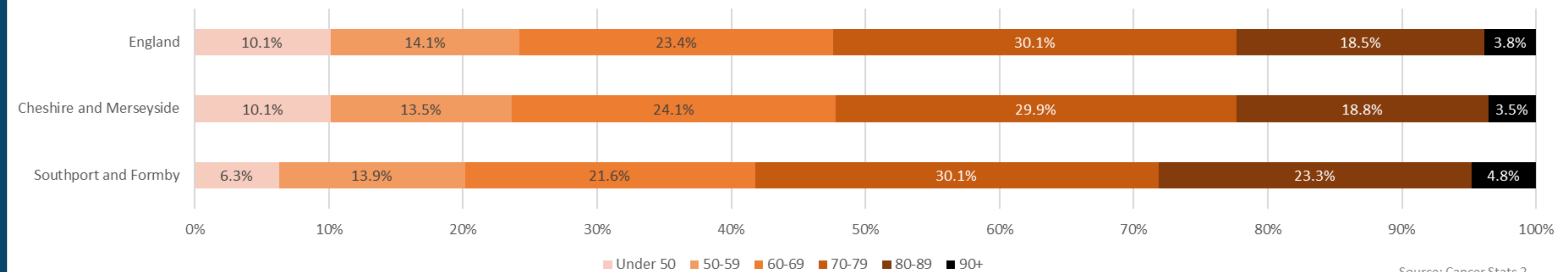
For every 100,000 people registered with a GP practice in Southport and Formby, 684 were diagnosed with a new cancer in 2019/20 compared to 592 in Cheshire and Merseyside and 531 in England as a whole.

In 2019, the proportion of new cancers in Southport and Formby in the 80-89 age range was significantly higher than the England average (23.3% vs 18.5%), and also significantly higher than the Cheshire and Merseyside average.

The proportion of new cancers in the under 50 age range was significantly lower than England (6.3% vs 10.1%), and also significantly lower than Cheshire and Merseyside.

The proportion of new cancers in the other age ranges were statistically similar to both Cheshire and Merseyside and England.

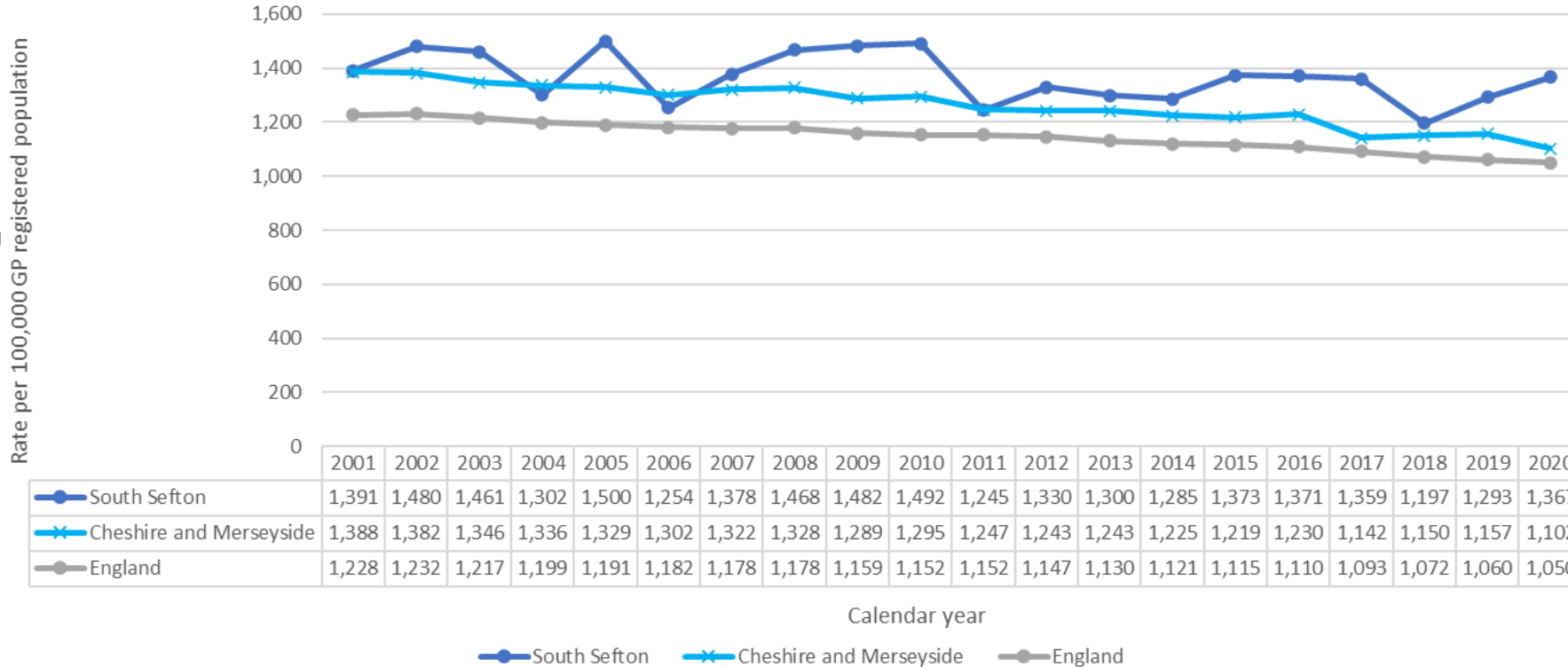
**Cancer incidence 2019
by age range**



Data: Cancer Mortality (65+)



Mortality rate from cancer, ages 65+ per 100,000 GP registered population
2001-2020



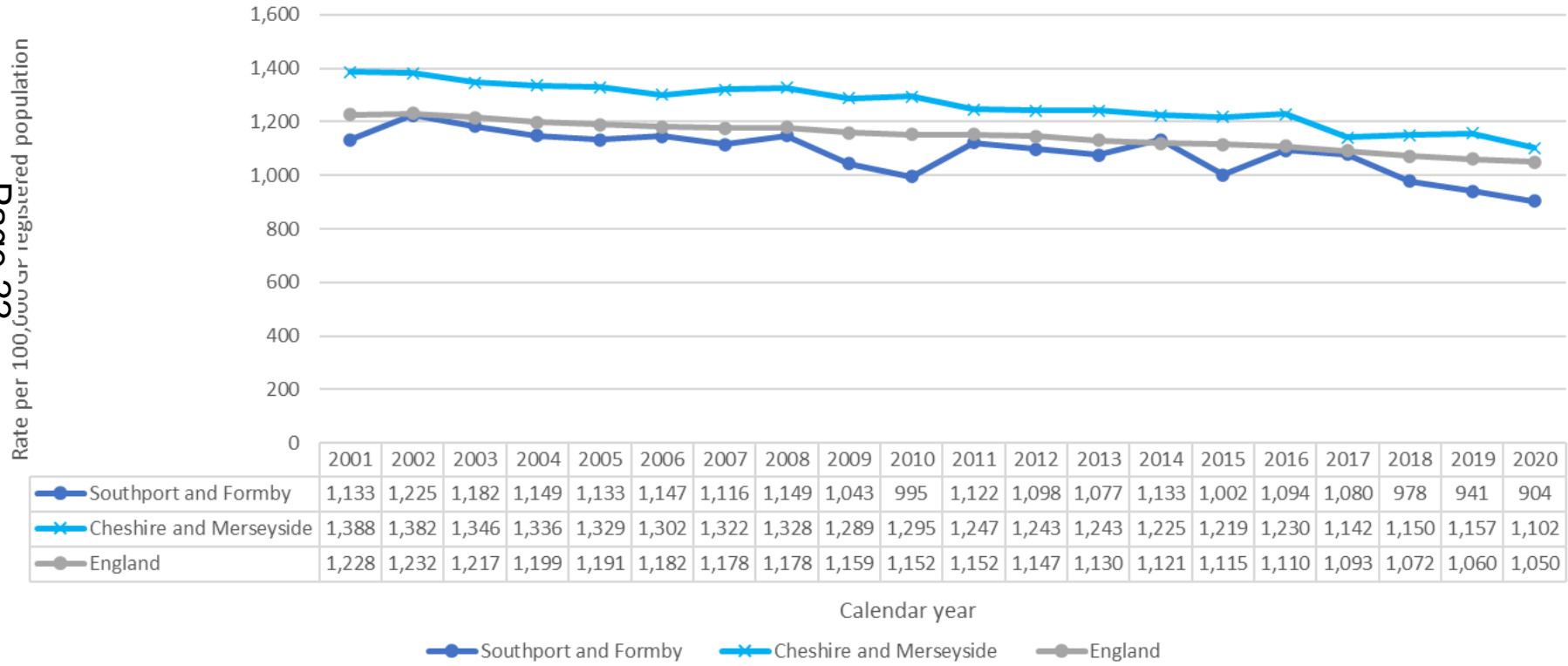
The most recent cancer mortality data refers to 2020.

In South Sefton, cancer mortality in people aged 65 and over (rate per 100,000) is higher than in Cheshire and Merseyside, and higher than in England as a whole.

Data: Cancer Mortality (65+)



Mortality rate from cancer, ages 65+ per 100,000 GP registered population
2001-2020



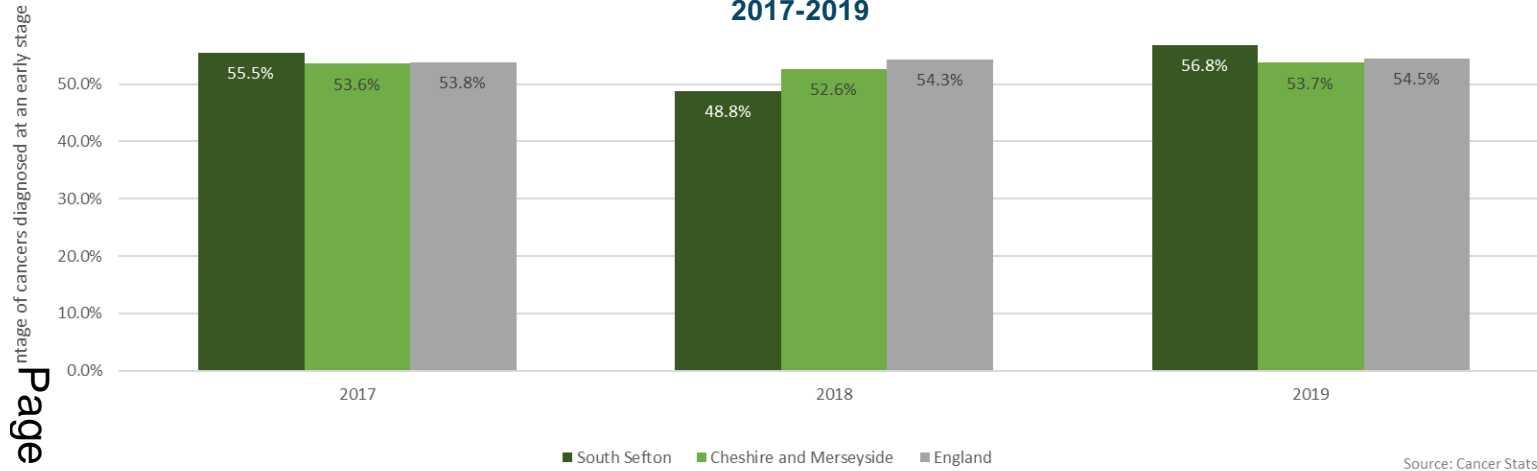
The most recent cancer mortality data refers to 2020.

In Southport and Formby, cancer mortality in people aged 65 and over (rate per 100,000) is lower than in Cheshire and Merseyside, and lower than in England as a whole.

Data: Early Diagnosis



Early diagnosis trend: cancers with a known stage
2017-2019



Early diagnosis in South Sefton increased between 2017 and 2019.

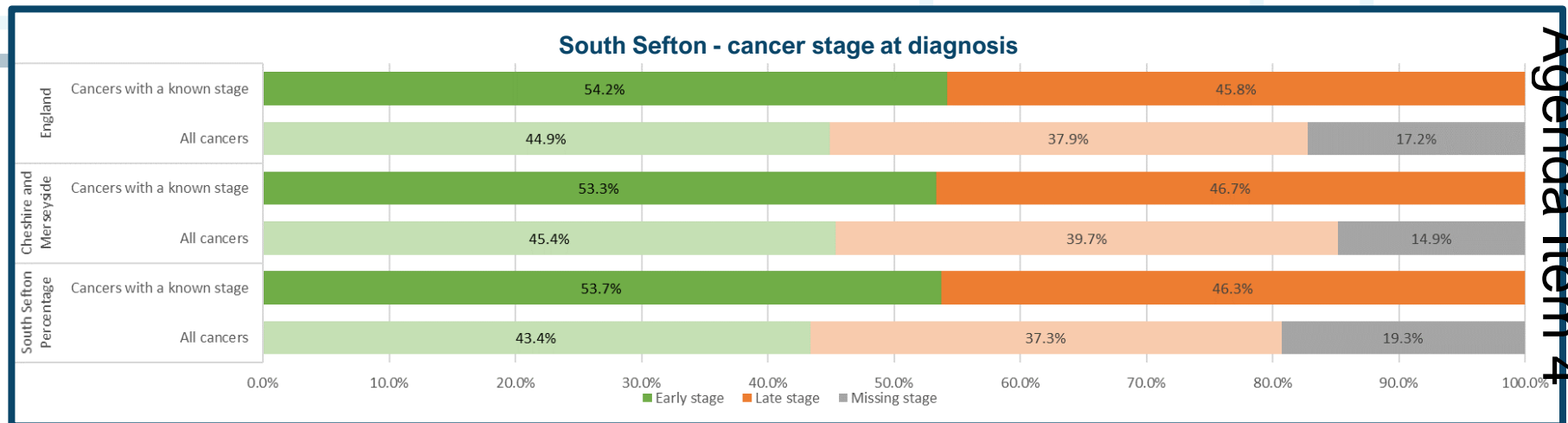
In Cheshire and Merseyside, early diagnosis rates increased slightly between 2017 and 2019, from 53.6% in 2017 to 53.7% in 2019. This is in line with England as a whole.

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In South Sefton, 53.7% of cancer diagnoses with a known stage between 2017 and 2019 (three years pooled) were diagnosed at an early stage. This is higher than the proportion of early diagnoses in Cheshire and Merseyside as a whole (53.3%), and lower than the proportion of early diagnoses in England (54.2%).

80.7% of all cancer diagnoses in South Sefton (2017-2019) had a known stage, compared to 85.1% in Cheshire and Merseyside and 82.8% in England as a whole.

South Sefton - cancer stage at diagnosis

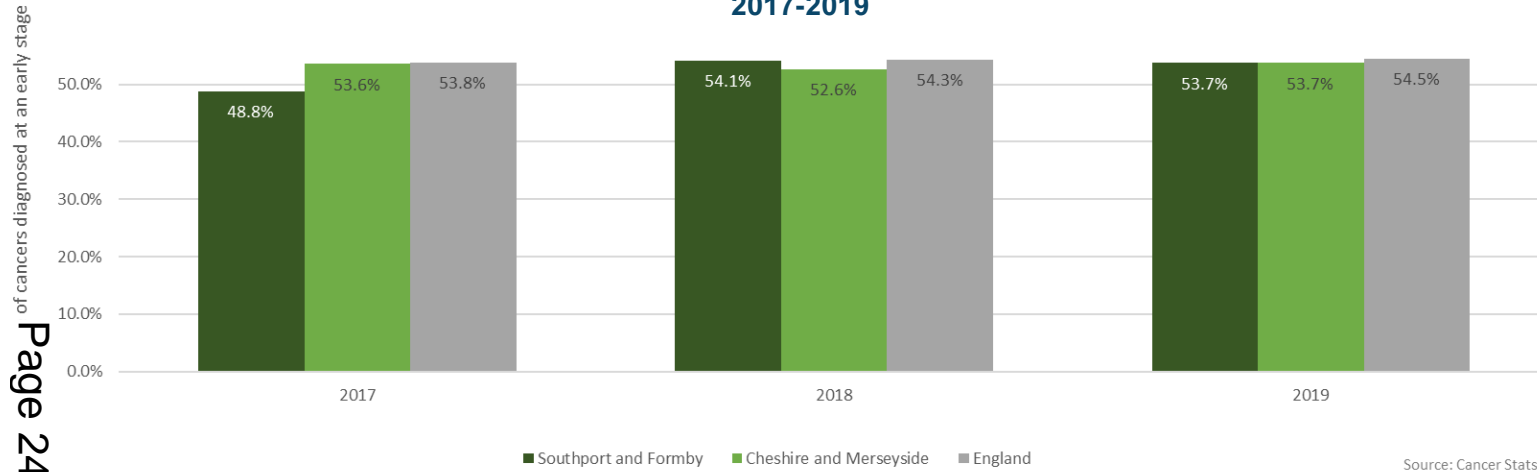


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Data: Early Diagnosis



Early diagnosis trend: cancers with a known stage 2017-2019



Early diagnosis in Southport and Formby increased between 2017 and 2019.

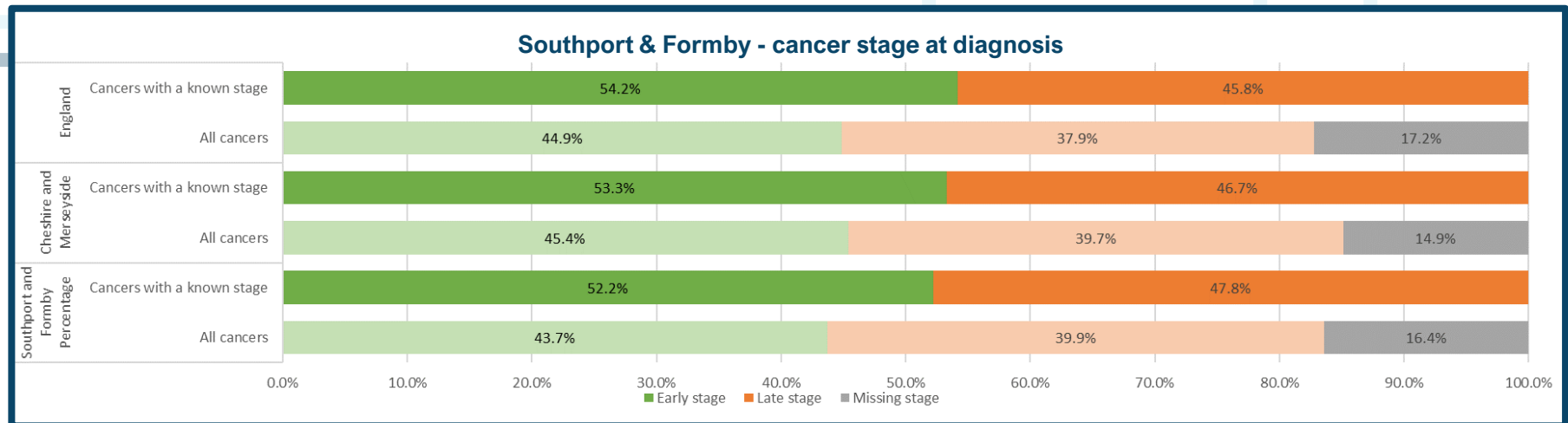
In Cheshire and Merseyside, early diagnosis rates increased slightly between 2017 and 2019, from 53.6% in 2017 to 53.7% in 2019. This is in line with England as a whole.

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In Southport and Formby, 52.2% of cancer diagnoses with a known stage between 2017 and 2019 (three years pooled) were diagnosed at an early stage. This is lower than the proportion of early diagnoses in Cheshire and Merseyside as a whole (53.3%), and lower than the proportion of early diagnoses in England (54.2%).

83.6% of all cancer diagnoses in Southport and Formby (2017-2019) had a known stage, compared to 85.1% in Cheshire and Merseyside and 82.8% in England as a whole.

Southport & Formby - cancer stage at diagnosis

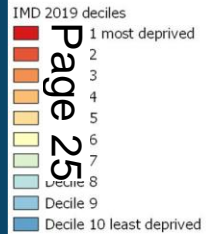
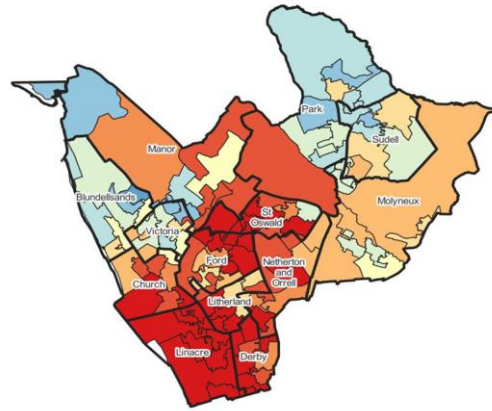


Data: Deprivation



Indices of Multiple Deprivation 2019 by neighbourhood (LSOA)

Overall levels of deprivation
South Sefton Clinical Commissioning Group
 Overlaid with Local Authority Ward Boundaries



Produced by Cheshire and Merseyside Cancer Alliance, June 2022
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Tackling health inequalities is a key priority of the Cancer Alliance. Part of the project initiation process includes consideration of the impact projects could have on health inequalities.

The Indices of Multiple Deprivation (IMD) rank neighbourhood areas called Lower Super Output Areas (LSOAs) in England based on seven domains of deprivation:

Income, Employment, Education, Health, Crime, Barriers to Housing and Living Environment.

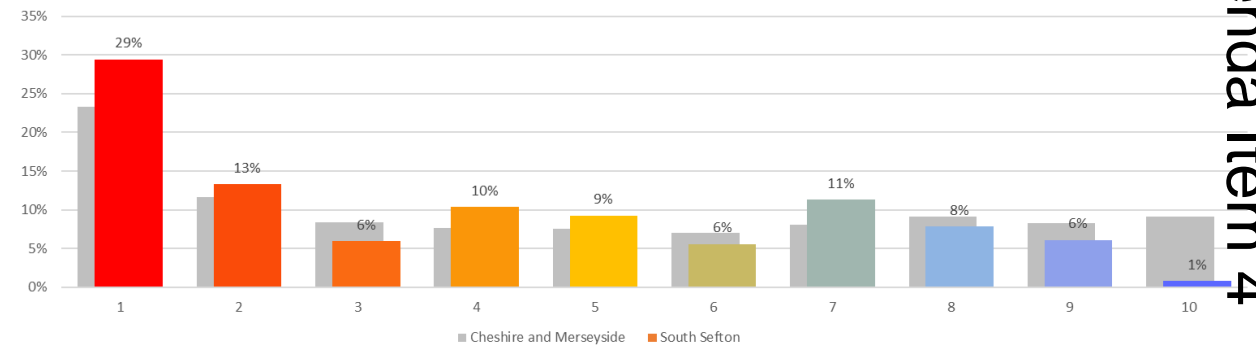
LSOAs are then grouped into Deciles, with Decile 1 being the top 10% most deprived areas in England and Decile 10 being the 10% least deprived areas in England.

Approximately 1,600 people live in each LSOA.

Of the 159,700* people living in South Sefton, **29% live in areas classed as the top 10% most deprived nationally. 43% live in areas classed as the top 20% most deprived nationally.**

*2020 Office for National Statistics Mid-Year Population Estimates

South Sefton Proportion of the population living in IMD deciles



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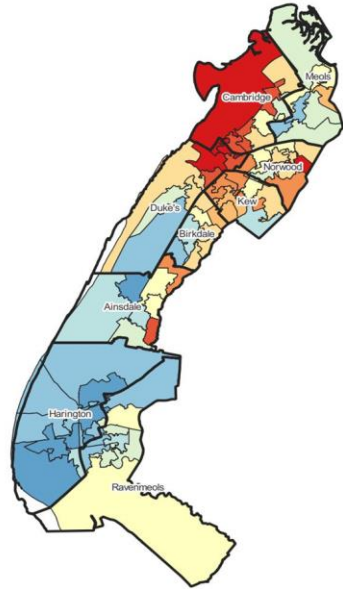


Data: Deprivation



Indices of Multiple Deprivation 2019 by neighbourhood (LSOA)

**Overall levels of deprivation
Southport & Formby
Clinical Commissioning Group**
Overlaid with Local Authority Ward Boundaries



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IMD 2 deciles
 [Red] Decile 1 most deprived
 [Orange] Decile 2
 [Light Orange] Decile 3
 [Yellow] Decile 4
 [Light Green] Decile 5
 [Green] Decile 6
 [Light Blue] Decile 7
 [Blue] Decile 8
 [Dark Blue] Decile 9
 [Very Dark Blue] Decile 10 least deprived

Produced by Cheshire and Merseyside Cancer Alliance, June 2022
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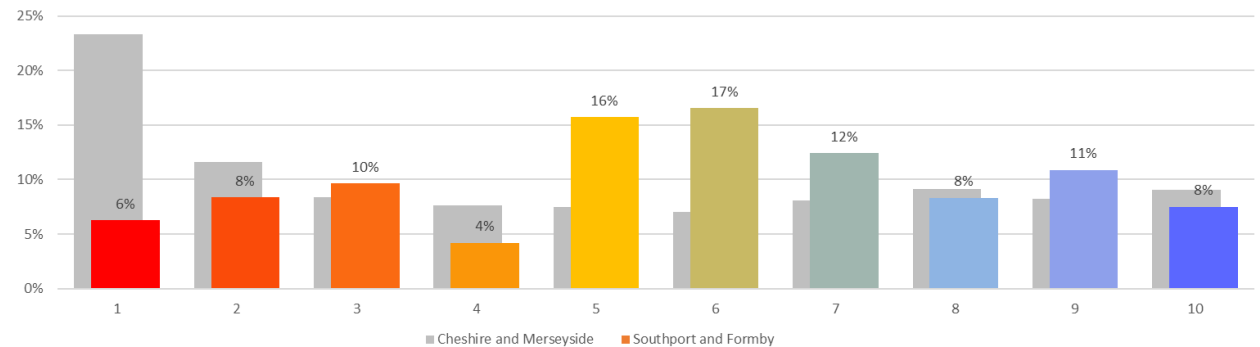
LSOAs are then grouped into Deciles, with Decile 1 being the top 10% most deprived areas in England and Decile 10 being the 10% least deprived areas in England.

Approximately 1,600 people live in each LSOA.

Of the 116,200* people living in Southport and Formby, **6% live in areas classed as the top 10% most deprived nationally. 15% live in areas classed as the top 20% most deprived nationally.**

*2020 Office for National Statistics Mid-Year Population Estimates

Southport & Formby Proportion of the population living in IMD deciles




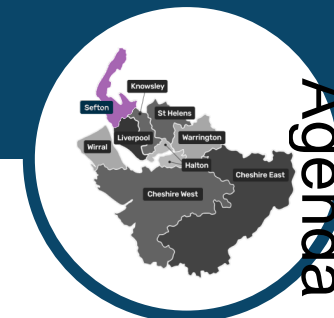
Programme Objectives



The 2022/23 CMCA Programme

For further information and an overview of the aims and objectives of each programme area detailed below, please visit our website [here](#).

Faster Diagnosis	Health Inequalities & Patient Experience	Personalised Care	FIT	Prevention & Early Detection	Workforce	Gynaecology	Primary Care
Complete the rollout of Non-Specific Symptom pathways to achieve 100% population coverage by March 2024	Embed a focus on health inequalities and patient experience into the work of Cheshire & Merseyside Cancer Alliance	Promote personalised care for all people with cancer	Implement an agreed, consistent model for provision of FIT to patients	Promote, encourage, and empower people to have healthier lifestyles	Develop an Online Cancer Education Platform	Establish a coherent gynaecological cancer programme	Provide primary care with practical support to implement early cancer diagnosis agenda
Implement the sequencing of pathways to achieve the maximum timeframes of all shed FDS Best Practice Timed Pathways	Reduce, and remove, unfair and avoidable differences in access to, and quality of, care received by patients in Cheshire & Merseyside	Implementation of stratified follow-up for all appropriate people with cancer at the end of treatment and where appropriate for those with a long term condition where there is a high risk of cancer	Work with local pathology networks to ensure that sufficient lab capacity is available	Diagnose more cancers through cancer screening programmes before signs and symptoms of cancer appear		Implement and deliver a first phase programme of work to deliver the future model of care	Provide primary care with clinical cancer expertise through GP lead roles
Implement a set of core improvements across all cancer pathways	Increase diversity amongst those consulted and involved	Understand quality of life data and develop improvement plans	Collect the FIT Minimum Dataset to ensure effective FIT uptake and effective use in clinical prioritisation	Empower patients to present early with possible signs and symptoms of cancer	Supporting ICS and Clinical Network Workforce Development	Identify required second phase projects to deliver the future model of care	Develop and deliver education for primary care to support with early cancer diagnosis
Define and deliver a locally agreed set of pathway innovations and improvements	Improve the patient experience of those living with and beyond cancer	Optimise patients who are suspected to have or have been diagnosed with cancer to improve their health, wellbeing and outcomes	Effective use of data on FIT uptake to ensure uptake is benefitting all patient groups	Modernising the tissue for genomics pathway(s) practice	Recruit, Retain and Upskill our Cancer Workforce	Work with partners to develop stronger working relationships across the system based on partnership	Support Primary Care to increasing participation in Cancer Screening Programmes
Work with ICSs and Providers to ensure that sufficient diagnostic capacity is available for use in cancer pathways	Sustainability of the HIPE programme	Reduce unwanted variation across the cancer treatment pathway	Engage with primary care to encourage provision of FIT kits, and with secondary care to ensure FIT results are informing decisions about onward investigation	Understand and start to tackle health inequalities and the impact of cancer	Support New Ways of Working and Delivering Care	Work with ICSs and Providers to ensure that sufficient diagnostic capacity is available for use in gynaecological cancer pathways	Provide primary care with IT templates to improve patient experience and outcomes



Health Inequalities & Patient Experience (HIPE) Programme

CMCA is committed to ensuring that a focus on health inequalities and patient experience is embedded and sustained within each of our programmes. We have introduced a HIPE champion within each CMCA programme, to act as an advocate for health inequalities and patient experience within their own area of work. The following HIPE initiatives cut across all of our work, including our projects in Sefton.

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Foundation for Engagement

The purpose of this project is to set out how CMCA engages with people in the planning, design, and delivery of projects. It enables CMCA to **proactively listen to the views of the local community**, and to address health inequalities by tailoring projects to meet a diverse range of needs.

The first stage of the project provides an initial step to involving patients, carers and public members in the planning, design and delivery of projects and enabling them to **make a real difference** to the services provided.

Stage two involves developing a menu of options for involvement in partnership with patients, carers, and public members. It will enable CMCA to work directly with communities to ensure that they are collaborated with in each aspect of a decision, or that a community-development approach to projects is taken, to allow **participation to become more meaningful**.

CMCA Roadshow

CMCA travelled to **10 locations across Cheshire and Merseyside**, in partnership with Healthwatch and Macmillan Cancer Support, between May and July 2022. The purpose of this Roadshow was to listen to people's cancer experiences, and understand how people are feeling about cancer services in their local area. More than **300 interactions** were had with the public and with representatives from community organisations.

A secondary aim of the Roadshow was to recruit patient representatives from diverse backgrounds; and, a total of **29 people volunteered** to share their patient story/become a patient representative.

Findings from this pilot will be shared with stakeholders across Cheshire and Merseyside, and outcomes will continue to be monitored during 2023/24



Diverse Patient & Carer Representatives

The purpose of this project is to recruit diverse patient and carer representatives to CMCA, and to create a patient and carer network. It will enable CMCA to proactively listen to the views of a wide range of people, and address health inequalities by tailoring projects to meet a diverse range of needs.

An efficient governance system for involving patients, carers, and public representatives has been developed, and we started to create a patient and carer network to provide assistance and support to new and existing representatives.

Surveys

This initiative will promote and act upon the results of national annual cancer surveys including the National Cancer Patient Experience Survey (CPES), Under 16 Cancer Patient Experience Survey and Quality of Life Survey.

Health Inequalities Staff Network

We will develop and establish a regional health inequalities staff network for NHS colleagues working in cancer services who have an interest in tackling health inequalities

Deaf & Hard of Hearing Community Project

This project aims to work with the deaf and hard of hearing community to co-produce interventions that support and empower D/deaf people to recognise and act on the potential signs and symptoms of cancer. It will also empower CMCA to understand and act upon the needs of D/deaf people within all stages of project development. This will include:

- Engagement with the deaf and hard of hearing community
- Co-produce development and promotion of a British Sign Language Library
- Create a platform to embed two-way communication with the deaf and hard of hearing community and CMCA
- CMCA project managers trained in deaf awareness

Faster Diagnosis



Faster Diagnosis Programme

CMCA is working in partnership with **Liverpool University Hospitals NHS Foundation Trust** and **Southport and Ormskirk Hospital NHS Trust** to establish a comprehensive programme that will oversee the development and implementation of Faster Diagnosis services across all cancer pathways by 2024. Implementation is planned in a phased approach over two years, with plans expected to be approved in Q3 2022/23.

Faster Diagnosis implementation will help to ensure a timely and effective service provision to patients presenting with cancer symptoms and will help to provide the highest quality care to patients, whilst reducing variation in patient access to diagnostic and treatment options.

Faster Diagnosis Programme Objectives	
Page 29	NSS Pathway rollout to 100% population coverage
	<p>Best Practice Timed Pathways Implementation</p> <p>By March 2024, BPTPs will be published for all suspected cancer pathways, including for Non-Specific Symptoms</p> <p>Teledermatology and Community Spot Clinics should be made available</p>
	<p>Priority Pathway Improvements</p> <div style="display: flex; justify-content: space-between;"> <div>Single point of contact and appointment reminders</div> <div>Cancer Decision Support Tools</div> <div>Electronic Referrals</div> <div>Straight to test and clinically-led triage</div> <div>Coordinated Testing</div> <div>Optimal and appropriate onward referral</div> <div>More effective feedback loops</div> </div>
<p>Locally Defined Pathway Innovations</p> <p>e.g. self-referral, virtual triage hubs, combined pathway approaches, supporting accessibility and reducing health inequalities</p>	
<p>Work with ICS and Providers to ensure that sufficient diagnostic capacity is available</p>	

Faster Diagnosis Key Principles		
<p>1. Early identification of patient where cancer is possible, including outreach to target existing health inequalities</p>	<p>2. Timely referral based on standardised referral criteria and appropriate filter function tests</p>	<p>3. Broad assessment of symptoms resulting in effective triage, determining whether and which tests should be carried out and in what order, based on individual patient need</p>
<p>4. Coordinated testing which happens in fewer visits and steps for the patient, with a significantly shorter time between referral and reaching a diagnosis</p>	<p>5. Timely diagnosis of patients' symptoms, cancer or otherwise, by a multi-disciplinary team where relevant, and communicated appropriately to the patient</p>	<p>6. Appropriate onward referral to the right service for further support, investigation, treatment and/or care</p>
<p>7. Excellent patient coordination and support with patients having a single point of contact throughout their diagnostic journey, alongside access to the right information, support and advice.</p>		
<p>8. The team will be aware of clinical trials and research opportunities available with their speciality and will support all eligible patients to access this.</p>		

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Workforce Programme

The CMCA Workforce programme aims to support our cancer workforce to reach their full potential through the delivery of training and education. We support the transformation of our workforce to respond to new challenges, deliver new ways of working and offer the best possible patient care. Our programme is delivered in partnership with Health Education England (HEE).

The Cancer Academy

The Cancer Academy is a **free online cancer education and resource platform** for health professionals, funded by CMCA. Launched in November 2022, the first phase of the project has focused on the provision of high-quality education, training and resources for **Cancer Support Workers** and **Primary Care** professionals.

The Cancer Academy is available for all healthcare professionals [here](#)

CMCA is committed to the long-term development of The Cancer Academy and further content and online training resources will be published in a phased approach over the next 2-3 years.

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MDT Coordinator Training

A key enabler of the MDT Optimisation work across C&M was recognition of the need for investment and support in the training and development of the MDT Workforce.

We are delivering an online e-Learning solution for MDT Coordinators at **Liverpool University Hospitals NHS Foundation Trust** and **Southport and Ormskirk Hospital NHS Trust**, to train and educate regarding the latest Cancer Waiting Times standards.

Cancer Support Worker Framework

CMCA is leading on a HEE-funded programme of work for England, Wales, Scotland and Northern Ireland, to develop a competency, education, and career framework for Cancer Support Workers (CSWs).

We have now joined the national HEE-led **ACCEnD programme** to collaborate on the development of a career and education development framework for the nursing and AHP cancer workforce.

Supportive/enabling roles	Pre-registration	Registered	Enhanced/advanced	Consultant and strategic
Nationally agreed career and education pathway	Curriculum resources & learning modules in patient pathway	2A: Early career/general education and training/role development programme	3A: Enhanced specialist clinical leader	Cancer strategic leadership/Consultant
Education, training, and support for CSWs matched to ACCEnD capability framework	Careers and placement opportunities	2B: Enhanced practice Qualification in Speciality/Apprenticeship/PG Cert	Accredited modules	Education and training offer
Standardisation of the role and requirements of the CSW	Council of Deans collaboration for student leadership award in Cancer		3B: Advanced Practice in Cancer	PhD students in cancer

5. National career, pathway and education framework for nurses and AHPs (Vanessa Taylor)

Principles of Cancer Care Programme

CMCA offers a wide range of personalised education resources, including access to our **Principles in Cancer Care Programme (PCCP)**, which aims to help to standardise education and good practice amongst the cancer supportive workforce.

We will be offering over 100 training places this year, embedding expert knowledge of cancer, psychological and communication skills to ensure Cancer Support Workers can release their full potential and integration of the role within cancer services.

“The Cancer Academy provides a collaborative platform, working with healthcare, charities, social care and voluntary sectors to create high quality resource to improve knowledge and confidence around cancer related matters from prevention through to treatment.”

Dr Debbie Harvey
GP & Clinical Lead for The Cancer Academy

HEE Training & Development

CMCA continues to work in collaboration with the **HEE (North West) Cancer Workforce Programme** to increase the workforce and develop knowledge and skills in the priority specialisms identified in the HEE National Cancer Workforce Strategy.

Gynaecology & FIT



Gynaecology Programme

A new Gynaecology Programme has been established to take forward the recommendations from the **2022 Gynaecology Cancer Pathway Review** commissioned by CMCA and undertaken by the NHS Transformation Unit.

The review used a mixed methods approach to review data, guidance, service configuration, workforce, current practice, and transformational opportunities for cervical, ovarian, vulval and endometrial cancers both suspected and diagnosed. The review explored services from patient presentation in primary care through to diagnosis and first definitive treatment.

The outcome of the review was used to inform the collaborative development of a **vision and new model of care**, which supports standardised and consistent service delivery and best clinical practice across all sites.

It is expected that this programme will deliver significant early benefits in 2022/23 and will run over multiple years. The core aims of the programme for the next 12 months are:

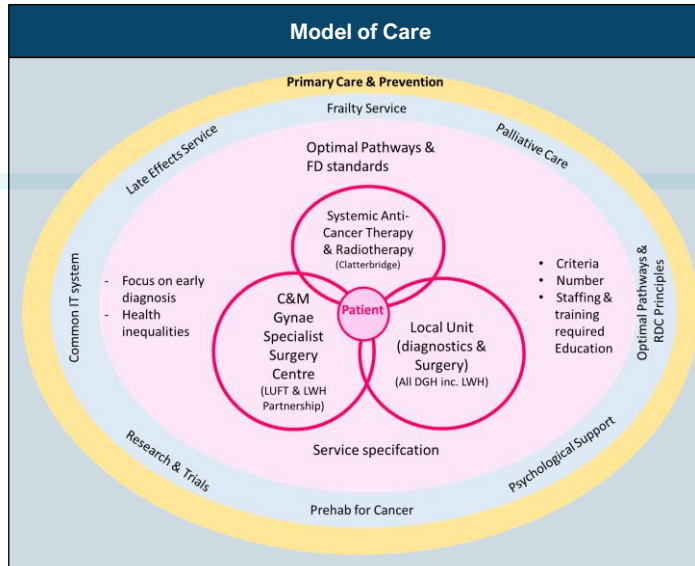
- 1 **Improving time to diagnosis and treatment decision making**
- 2 **Development of a C&M approach to follow up, including the use of digitally supported follow up tools**
- 3 **Establishment of Cancer Units at WHH and S&O**
- 4 **Improving cervical screening rates across C&M in collaboration with other programmes of work**

Vision

For all gynaecological cancer services in C&M to work as a partnership and collectively be recognised for excellence in patient care, teaching, education and research.

Mission

To provide patient centred, personalised, timely responsive, high quality, evidence-based care for patients with proven or suspected gynaecological cancer.



FIT Programme

The aim of the Faecal Immunochemical Testing (FIT) programme is to build on progress made from 2018 to 2022, ensuring that a consistent FIT model is in place, supported by an effective pathology model and that all patients with Lower GI (LGI) symptoms receive a FIT where clinically appropriate and in line with guidance and emerging evidence.

What is FIT?

FIT is a stool test that is designed to identify possible signs of bowel disease by detecting faecal occult blood (hidden blood).

In combination with clinical review, FIT testing provides a safe, minimally invasive, rapid and accurate way to determine a patient's risk of having a LGI cancer.

The test has a high negative predictive value of at least 97% which means that FIT is an effective diagnostic test and superior to symptoms in predicting pathology in patients with suspected cancer symptoms.

CMCA is supporting **Liverpool University Hospitals NHS Foundation Trust** and **Southport and Ormskirk Hospital NHS Trust** to implement the new symptomatic FIT pathway and secondary care negative pathway, in collaboration with primary care and pathology stakeholders. Furthermore, the programme aims to ensure that there is appropriate evaluation and closure of the backlog/surveillance FIT project that has supported endoscopy recovery.

CMCA is working with **NHS Cheshire & Merseyside ICB** to ensure FIT is sustained for 2022/23 and beyond, to provide sufficient commissioned capacity so that every urgent suspected LGI cancer referral is accompanied by a FIT result where clinically appropriate (Current national target 80%).

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Working in partnership with:

Personalised Care



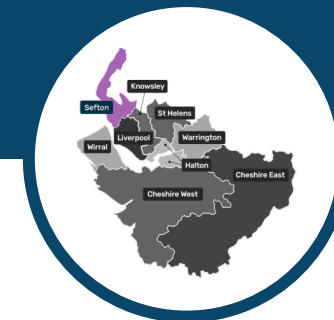
Personalised Care Programme

Cancer affects many residents of Cheshire and Merseyside all with their own specific needs. It is therefore essential that care received is personalised and tailored to ensure that experience of cancer care is as positive as possible and that best outcomes for patients are achieved. Our projects have a focus on personalised care, but critically on how this will empower cancer patients to take more control and responsibility for their holistic needs with necessary support provided closer to home utilising mainstream community provisions as much as possible.

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<p>Personalised Stratified Follow-Up (PSFU)</p> <p>PSFU is a vital part of improving patient care and experience but also helps to address the serious challenges of demand and capacity throughout cancer pathways.</p> <p>There are now over 10,000 patients registered for PSFU across Cheshire & Merseyside and we estimate that over 27,500 outpatient appointments will have been released by patients moving to remote PSFU by the end of 2022/23.</p> <p>CMCA will continue work with Liverpool University Hospitals NHS Foundation Trust and Southport and Ormskirk Hospital NHS Trust to develop and implement successful PSFU pathways.</p>	<p>Holistic Needs Assessments (HNAs)</p> <p>CMCA is collaborating with Macmillan to scope the current uptake and quality of HNAs across Cheshire & Merseyside.</p> <p>This information will identify local barriers to the use of HNA systems, support shared learning and the development of solutions, and inform HNA development.</p> <p>A report will be published in Q3 which includes recommendations for Sefton to take forward a plan which will help to improve the quality and patient experience of HNAs.</p>	<p>Patient Initiated Follow-Up (PIFU)</p> <p>PIFU is supported self-managed follow-up for those with a wide range of health conditions, including those at high risk of cancer, utilising the principles of PSFU used for cancer patients.</p> <p>CMCA is working in partnership with Liverpool University Hospitals NHS Foundation Trust to implement a PIFU pre-prostate cancer pathway. We are developing surveillance and patient-initiated follow-up in non-cancerous conditions of the prostate to identify those who require clinical review, investigation and repeat MRI or biopsy, enabling improved patient safety and personalised care.</p>	
<p>Prehabilitation</p> <p>In August 2021, a model of prehabilitation for onco-geriatric patients at Aintree Hospital was developed with the intention to expand the service across all Liverpool University Hospitals NHS Foundation Trust sites.</p> <p>We are offering prehabilitation to patients undergoing surgical interventions for upper gastro-intestinal (UGI), hepato-pancreato-biliary (HPB) and colorectal cancer, prioritising those patients with the greatest clinical need and providing a focus on improving the support for frail patients that are undergoing surgery. This project will continue until March 2023 with evaluation commencing in June 2022.</p>		<p>Cancer Care Map</p> <p>CMCA is collaborating with Cancer Care Map to develop an online, reliable source of regularly updated cancer services for patients, their families and friends.</p> <p>This resource will promote self-management through the identification of local support services, which can be accessed directly.</p> <p>We will promote this service to ensure cancer patients have access to vital services and support.</p>	<p>Quality of Life Survey (QoL)</p> <p>CMCA is proactively working to understand the needs and make improvements in the QoL survey for patients with cancer. We will be delivering communication and engagement activities to achieve a higher response rate to the QoL survey and increase uptake within under-represented groups.</p> <p>We are collaborating with key stakeholders to map psychosocial support services, pathways and training in C&M, and produce a development plan for their improvement</p>

Prevention & Early Detection



Prevention & Early Detection (PED) Programme

Earlier diagnosis of cancer will save or extend more lives and improve quality of life for people affected by cancer. CMCA's PED programme is supporting and empowering Cheshire and Merseyside communities to reduce their risk of developing preventable cancers and supporting cancer professionals to detect and refer cancers earlier.

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Tobacco Control	Obesity	Genomics
<p>Smoking is the largest cause of preventable cancers linked with nearly 1 in 5. CMCA is working with partners throughout Cheshire & Merseyside to reduce smoking rates, leading on a number of targeted activities to promote, encourage and empower people to stop smoking, including:</p> <ul style="list-style-type: none"> • A region-wide Maternity service driven smoking in pregnancy programme • A paediatric version of the national tobacco plan with Alder Hey Children's Hospital. 	<p>Obesity is the second largest cause of preventable cancer. CMCA has committed to a five-year programme of funding to enable a long-term, sustainable approach to increase the overall volume and reach of initiatives designed to improve rates of overweight and obesity.</p> <p>We are also working with Health Equalities Group (HEG) on a region-wide, whole system approach, that aims to increase connectivity across the system, to bring a greater focus on overweight and obesity as an issue, and further facilitate activity and impact across the region.</p>	<p>NHS Galleri Trial The NHS-Galleri trial is investigating a new blood test to see if it can help the NHS detect cancer early when used alongside existing cancer screening. Early clinical trials have reported that the test can detect more than 50 types of cancer, often before symptoms occur.</p> <p>The trial is a partnership between NHS England and GRAIL (the company who developed the test) and is coordinated by The Cancer Research UK & King's College London Cancer Prevention Trials Unit. The trial launched in Cheshire and Merseyside in August 2021 and will return to Sefton this year for participants' second (12 month) appointments.</p> <p>Lynch Syndrome Testing Around half of all people with Lynch syndrome develop colorectal cancer. CMCA is working with the North West Genomic Medicine Service Alliance, Cheshire and Merseyside Pathology Network and Clinical Services to implement the Lynch syndrome pathway. We are ensuring that each colorectal and endometrial MDT is engaged, with active champions that are trained and supported to fully adopt Lynch syndrome testing as a mainstream practice. National data indicates that this change could improve overall early diagnosis rates by 0.9%, which is a significant gain in our aims.</p> <p>Improving the Molecular Pathway and Cancer Turnaround Times (IMPACTT) Project Early genomics pathway auditing work has shown that there can be significant variance across turnaround times. If the modernisation of these pathways is to happen in a systematic way, then dedicated resource needs to be applied to transform how processes, and systems, operate. CMCA will recruit a Project Manager to work with stakeholders and system leaders to sustainably modernise the tissue for genomics pathways.</p> <p>CMCA will work with each appropriate tumour pathway across the region to fully integrate genomic testing in cancer pathways, mitigating variance and ensuring adoption of best practice. This will include a focus on working with CQGs, MDT's, pathology departments, and links into the GLH, transforming current practice and working to achieve the outcomes set out in the NHS Long Term plan.</p>
<p style="text-align: center;">Cancer Screening</p> <p>Cancer screening provides an opportunity to diagnose cancer at an earlier stage before signs and symptoms have developed when treatment may be less complex and outcomes better. Improving screening uptake is a priority and given significant local variation in uptake, there is opportunity to reduce local variations in outcomes.</p> <p>CMCA is assisting with the new pilot NHS Targeted Lung Health Checks (TLHC) Programme. It aims to help diagnose lung cancer at an earlier stage when treatment may be more successful. The public aged between 55 and 74 who either smoke or used to smoke will get an invite for an assessment.</p> <p>CMCA is working in partnership with CHaMPs to deliver cancer screening projects across Cheshire & Merseyside to improve uptake and develop a cancer screening programme toolkit.</p>		

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Primary Care Programme

CMCA is supporting primary care with the delivery of the early diagnosis components of their contracts, to enable patients to be diagnosed early and improve their short term and long-term health outcomes. By continuing to improve detection via Urgent GP referral, emergency presentation rates should drop and there will be a higher likelihood that cancers will be detected at an early stage, giving improved outcomes for patients.

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Cancer Engagement Leads

Cancer engagement leads will **provide leadership, facilitation and engagement support to primary care** to enable system wide change to support delivery of CMCA objectives and priorities identified within NHS England's Long Term Plan, the local cancer delivery plan and primary care requirements for cancer within the contracts and specifications of the Direct Enhanced Service (DES) and Quality and Outcomes Framework (QOF).

Our cancer engagement leads are responsible for the **planning, development and implementation of key complex quality improvement projects** that supports primary care to improve the quality of their services in line with the DES/national requirements, and work towards achieving cancer-related objectives. A key part of this will be focused on education.

The cancer engagement leads will work as part of a team of three, each within a sector of C&M, prioritising support through a needs-based and inequalities focused approach, driven by available data and evidence and considering where resources already exist. The team of cancer engagement leads will work closely with the CMCA GP Cancer Leads in 'Place' and the CMCA primary care lead.

CMCA Cancer Engagement Lead for Sefton:
Edward Bourne (ccf-tr.cmcaprimarycareengagement@nhs.net)

Screening Support Roles

CMCA will commence the **recruitment of support roles with a specific focus on screening**, to support with increasing participation of the bowel and breast screening programmes, including restoration and enable the roll out of age extension for bowel screening.

Place-based GP Clinical Leads

Place-based GP clinical leads will provide CMCA with **primary care clinical leadership that facilitates engagement and relationships with a defined Place**.

GPs will, on behalf of CMCA, work with primary care to drive improvements in the agendas of prevention, screening, early detection and cancer pathways, as outlined in the PCN DES and QOF contracts, and personalised care.

GPs will work closely with their respective primary care engagement lead to provide key links to primary care and PCNs to gather soft intelligence, identify issues and share learning. Plus support with the formation of three large communities of practice across Cheshire & Merseyside.

CMCA Place-based GP Lead for Sefton:
Dr Octavia Stevens

Primary Care Education

Cancer engagement leads and Place-based GP leads will **develop and deliver specific education for primary care**. Educational resources will support primary care educational requirements to deliver early cancer diagnosis agenda.

Primary Care Templates

CMCA is working with Informatics Merseyside to provide primary care with IT templates which will **improve patient experience and outcomes**.

We are further developing the safety netting template to provide primary care with an auditable and electronic template to safely track patients.

We will develop a suite of suspected cancer referral templates and educational tools for GP's to improve the quality of referrals, assist GP's in recognising early signs & symptoms and optimise suspected cancer referrals.

Cheshire & Merseyside Cancer Alliance

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- Faster Diagnosis
- Workforce
- FIT
- Health Inequalities & Pt. Experience
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Chief Executive announces next steps in proposed partnership

11:50 AM // 6TH FEBRUARY 2023

LATEST NEWS



Chief Executive announces next steps in proposed partnership

11:50 AM // 6TH FEBRUARY 2023

Since September 2021, St Helens and Knowsley Teaching Hospitals NHS Trust and Southport and Ormskirk Hospital NHS Trust have been working closely together and have produced some significant successes that have benefited patients and staff at both organisations.

Get a free health check and COVID-19 jab this weekend in Sefton

9:05 AM // 2ND FEBRUARY 2023

Since September 2021, St Helens and Knowsley Teaching Hospitals NHS Trust and Southport and Ormskirk Hospital NHS Trust have been working closely together and have produced some significant successes that have benefited patients and staff at both organisations.

The success of this relationship has meant both Trusts have been able to share best practice and learn from each other as they look to continually improve the care provided to local communities. Together, we have secured significant investment to further enhance services, improve patient experience, and offer greater scope for staff development.

The next step in further developing and strengthening this relationship is to come together formally to create one single, unified organisation.

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This means that staff working at both organisations will be brought under one umbrella brand, but the individual names of the Trusts' hospitals and buildings will remain the same.

As a single organisation, our size will help us better address the challenges faced. This should also help us attract investment and improve our ability to recruit talented colleagues across sites.

This is a proposal at this stage, and we are engaging with staff to gain their views in the coming weeks. People across our communities will be informed at every stage of the move, which is designed to develop even better services for patients across Merseyside and West Lancashire.

Thank you for your continued support.

Ann

Ann Marr OBE

Chief Executive

The 'Living Well' bus will be making two stops in Sefton this weekend to offer...

Planned telephone downtime

1:16 PM // 1ST FEBRUARY 2023

Public telephone calls made to wards at Southport Hospital from 9:30pm on Wednesday 1 February...

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Agenda Item 7

Report to:	Overview & Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	21 February 2023
Subject:	Sefton New Directions - 2021/22 Outturn Review of Council Wholly Owned Companies		
Report of:	Executive Director Adult Social Care and Health – NHS Place Director	Wards Affected:	All Wards
Cabinet Portfolio:	Adult Social Care		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

The aim of this report is to allow Members to carry out effective scrutiny of Council companies which gives a level of assurance that both the Council's interests and the services or products provided by companies to our residents, are safe and well managed and offer good value for money.

Recommendation(s):

That Members of the Overview and Scrutiny Committee:

- (1) consider the content of the report in respect of Sefton New Directions;
- (2) provide feedback on key issues arising and advise on further information that would support the scrutiny review in future years;
- (3) provide feedback on current performance (operational and financial) and how this supports the council's strategic aims and ambitions and aligns with the objectives and reasons for setting up the company; and
- (4) seek clarification or additional information from officers as appropriate within the meeting in order to carry out the scrutiny function.

Reasons for the Recommendation(s):

The recommendations will support the effective and transparent governance of the Council's 3 wholly owned Council companies and best practice.

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

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No alternative options have been considered

What will it cost and how will it be financed?

(A) Revenue Costs

Key financial issues and implications are included within the body of the report

(B) Capital Costs

Key financial issues and implications are included within the body of the report

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): Any resource implications arising are included in the body of the report	
Legal Implications: There are no legal implications arising	
Equality Implications: There are no equality implications	
Climate Emergency Implications: The recommendations within this report will	
Have a positive impact	Yes
Have a neutral impact	No
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes

Contribution to the Council's Core Purpose:

The Council's 3 wholly owned companies were set up with specific objectives that would support the delivery of the council's core purpose. These objectives are set out in the body of the report and between the 3 companies contribute to the delivery of each element of the Council's core purpose.

Protect the most vulnerable:
Facilitate confident and resilient communities:
Commission, broker and provide core services:
Place – leadership and influencer:
Drivers of change and reform:

Facilitate sustainable economic prosperity:
Greater income for social investment:
Cleaner Greener

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.6993/22) and the Chief Legal and Democratic Officer (LD.5193/22.) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Engagement and information provision was sought from each of the 3 companies in the production of this report

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Telephone Number:	
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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1 The Council aims to ensure that the governance of its wholly owned companies meets best practice within the sector. As information and guidance becomes available then the council's approach will similarly evolve.
- 1.2. The next step in the governance cycle is to provide members with a review of performance for the previous financial year. As such this report provides that for Sefton New Directions.
- 1.3. Members should be aware that as part of the continual drive to ensure that best practice is followed a self-assessment for each of the council's company's is currently being undertaken against the Local Partnerships document 'Local Authority Company Guidance Document'- this review will be led by the council's

Agenda Item 7

Monitoring Officer. This document has helped inform the areas to be reported within this report.

2. Aims of the Annual Report

- 2.1. The aim of this report is to allow Members to carry out effective scrutiny of council companies which gives a level of assurance that both the Council's interests and the services or products provided by companies to our residents, are safe and well managed and offer good value for money by:
- a. Challenging the suitability of their business plans and objectives in meeting the needs of the council, service users and residents
 - b. Testing the financial benefits to the council and economic benefits to the community
 - c. Reviewing the outcomes and achievements of commercial operations against their original plans
 - d. Testing whether the value of the Council's investment into these vehicles is being protected and public funds are not exposed to excessive risk ; and
 - e. Checking that responsible business standards are met.

3. Expected Outcomes

- 3.1. In considering the following detail, the key outcome will be to provide effective scrutiny of Sefton New Directions to give a level of assurance that both the Council's interests in and the services provided by the company to Sefton residents are safe, well managed and offer good value for money. This report is provided for consideration following all 3 companies being the subject of review at the recent meeting of the Overview and Scrutiny Management Board.

4. Sefton New Directions

What are the council's objectives for the Company?

Council Objectives for the Company

New Directions was set up as a wholly owned company by the Council in 2007 as a private company limited by shares. Under procurement law the company is regarded as a 'Teckel company' which means that the Council can make direct awards of contracts to the company without going through a procurement process. In turn the company is bound by the Public Contract Regulations.

As outlined in their business plan the key aims of the company are:

- **Being Provider of Choice** – This is a New Directions objective set by their Board. New Directions are aiming to be the Council's key provider for delivering services such as services to support people with complex

needs and the delivery of the joint Sefton Intermediate Care Strategy. In addition, further work with the Council on existing and new contractual arrangements. However, this needs to be set in the context of the New Directions capacity to provide sufficient provision to meet demand. The Council through the DASS retains its duty to ensure that there is a sufficient supply of good quality care and support to meet need as outlined in the Care Act 2014.

- **Being Employer of Choice** – development of a well-trained, resilient and capable workforce which can deliver required services, and which is supported through a comprehensive Learning & Development Programme, and through robust organisational and performance management arrangements
- **Delivery of good quality services** – which are outcomes focussed and informed by gaining feedback from people receiving services and supported through effective systems, processes and training.

These aims link to the Council's core purpose in terms of:

- **Protecting the most vulnerable** - Under contractual arrangements New Directions provide care and support services to vulnerable people in Sefton and the plan outlines work to take place to ensure ongoing provision of quality services
- **Commission, broker and provide core services** - The Council has a contractual arrangement with New Directions and the plan outlines how this arrangement will be taken forward and also how New Directions can support the Council to deliver its strategic objectives and future commissioning intentions
- **Facilitate sustainable economic prosperity** – in terms of New Directions will seeking to operate as a Provider and Employer of choice

New Directions are seen as a key strategic partner in supporting Adult Social Care with delivering the aims of having services to support people with complex needs, supporting people to remain independent in their own homes, delivery of enabling services and offering day opportunities for people. However, this is set within the context of the Market Position Statement and the emerging Market Sustainability Plan.

Further work will be ongoing to establish how the key priorities for Adult Social Care can be supported by New Directions in a challenging market and landscape. The approach will consider agreed Adult Social Care strategies in place to deliver the Adult Social Care Vision and Market Sustainability Plan and will require a response from New Directions in its adapting or developing models of support to align to these strategies.

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The Council has appointed a shareholder representative in the Cabinet Member for Adult Social Care who is an observer to the Board.

As 100% shareholder in the company there are matters reserved for the Council to decide upon, for example, to make any material change to the nature of the business. Council Officers also hold regular meetings with the Managing Director of the Company to discuss company performance and key issues.

Commissioners have regular meetings with members of the New Directions Leadership, however it is recognised that there is a need to formalise these arrangements and ensure that there are associated processes in place for reporting key actions and decisions and identifying and escalating risks.

In 2019 a Partnering Charter was agreed which outlines how the Council and New Directions will work together to provide quality services to local people.

With respect to the New Directions 2022-25 Strategic Business Plan this was submitted by Adult Social Care to Cabinet on 23rd June 2022.

Prior to this submission Adult Social Care Officers worked with New Directions on its formulation and required content.

Going forward it is recognised that there is a need to review the 2022-25 plan on a regular basis to ensure that the action plans within it are delivered and reported.

Governance arrangements in place for the company in 2021/22

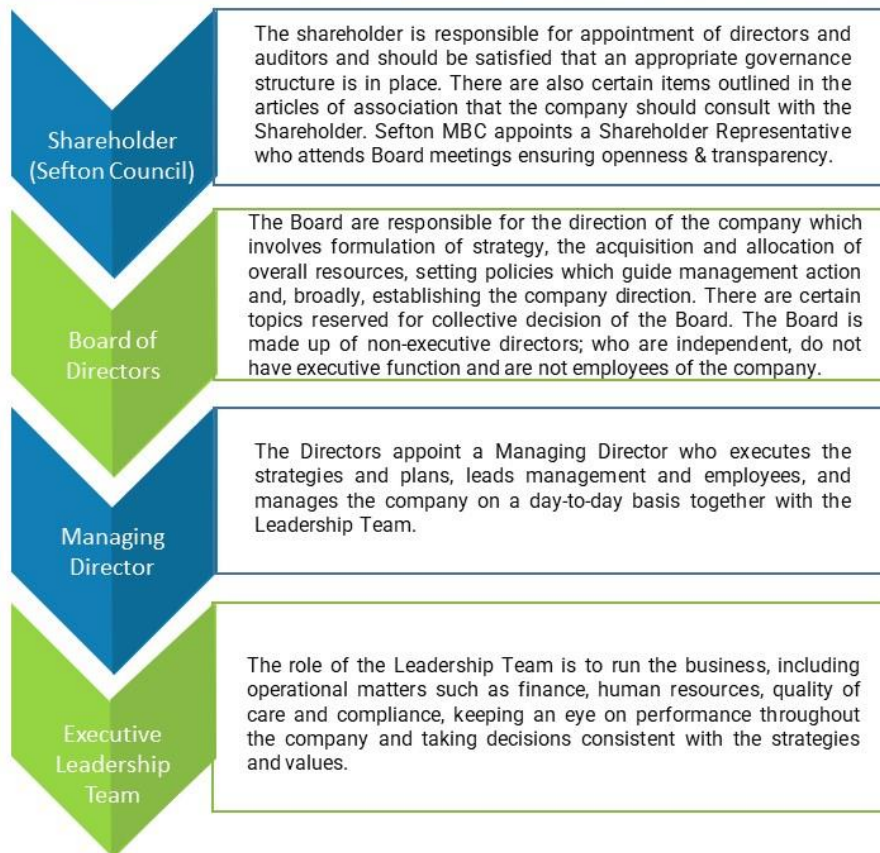
New Directions Governance Arrangements

The governance arrangements are set out in the articles of association. These were reviewed and updated in 2020 in consultation with the Shareholder.

The Board has in place a scheme of delegation which outlines the responsibilities of the executive leadership team. This was updated in 2020 and is due to be reviewed in 2022.

The governance responsibilities of the Shareholder Representative, Non-Executive Directors, Executive Leadership Team and interface arrangements with the Council are set out in the following chart:

New Directions, established by Sefton MBC, is a private company limited by shares which means it exists as a separate legal entity from its owners (Sefton MBC) and is responsible for its own finances and decisions. Any surplus is either invested back into the company or given to the sole shareholder (Sefton Council) as a dividend. To ensure good governance there are two distinct relationships between Sefton MBC and the company. Firstly, a shareholder ⇄ company relationship for governance assurance and secondly a commissioner ⇄ provider relationship focused on providing quality adult social care services meeting the needs of individuals locally.



The Managing Director has monthly meetings with the Shareholder representative and quarterly meetings with the Chief Executive of SMBC. Members of the Leadership Team have regular meetings with commissioners. The Board is made up of independent non-executive directors, who do not have an executive function and are not employees of the company.

Board meetings are at least every two months. Each sub-group has six meetings per year; with an annual 'away day' for focused strategic planning. Occasionally special meetings are convened, for example, during the Covid Pandemic board meetings were held monthly.

The Shareholder Representative receives board packs and minutes as part of transparency and good governance and regularly attends most Board meetings.

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The Board has previously conducted a skills matrix to identify and understand the skills available to the board; this will be revisited in 2022 with the departure and introduction of two nominee non-executive directors.

There is a need to test the robustness of the internal governance arrangements through an assessment by the Council's Internal Audit Officers.

Key Objectives for the Company as per the Business Plan in 2021/22

It is firstly important to highlight that there was no specific 2021/22 plan. The plan submitted to Cabinet was a Strategic Business Plan for 2022-25.

However, key objectives for the Company in 2021/22 were

- **Being a Provider of Choice** – Customers, Commissioners and Partners choosing them to deliver services
- **Employer of Choice** – working to attract, retain and develop a committed workforce to support with the above aim of being a Provider of Choice
- **Financial Stability** – positioning the company to maximise opportunities for growth
- **Governance and Strategic Arrangements** – framework in place which includes a growth strategy
- **Engagement and Communication** – having an effective framework to engage with Staff and Service Users and their Families to create effective working relationships and improve services
- **Quality** – working to aspiration of making all services rated as Outstanding

Review of Performance 2021/22

In 2021/22 New Directions achieved the following:

- Over 50,000 hours of Domiciliary Care delivered
- 902 supported through the Reablement service – with average length of stay in reablement is 23 days in comparison to the national average of 34 days
- 719 nights of respite care provided
- 1,091 Hospital Discharge cases accepted by New Directions
- 1,325 outreach meals provided during the lockdown period
- 12,490 hours of outreach support provided during the lockdown period
- Work on remodelling of Day services – including consultation with people who currently use day services to refresh understanding of their needs in developing the day services offer and approach
- One 'Outstanding' CQC regulated service
- Remodelling of Woodlands short-term service for people with Mental Health Conditions

Performance in 2021/22 was affected by the Pandemic (as with other Providers) and New Directions did work on adapting their services, for example offering alternative types of support to people who were not able to attend Day Centres. However, performance was also affected by the ability of certain services to adapt to emerging priorities and deliver services in a more flexible way.

There are also ongoing issues with New Directions position in certain care markets and their future intentions on continuing to deliver services in these markets.

Financial Performance 2021/22

The company has been trading since 2007. Turnover for the year ended 31 March 2022 was £10,365,292 (2021 - £10,442,218) with a pre-tax profit of £26,420 (2021 - loss of £580,081).

The annual accounts 2022/23 were provided to the Council in August 2022 and will be published at Companies House.

Future employer pension contributions in respect of the defined benefit pension scheme will be expensed to the profit and loss account as incurred/paid. Net assets following the derecognition of the pension liability increased from net liabilities of £505,120 to net assets of £4,230,840.

Key challenges facing New Directions are of inflation and the proposed increases to pay scales linked to NJC negotiations. These inflate the cost base for New Directions significantly. The company continues to look for efficiency savings and new and innovative ways of creating value for money for the Council but without inflationary uplifts, the viability of some services is in question. The company has a strong cash base, which provides financial resilience in the short to medium term for the company.

The company continues to drive efficiencies in the provision and improved outcomes for the people of Sefton and is in discussions with Sefton about future funding arrangements.

A key issue is the internal financial planning, budget management and oversight arrangements within New Directions and how elements such as unit costs for services are reviewed and calculated, as previous exercises conducted have reported different outcomes which have then impacted on Adult Social Care financial planning and expenditure calculations. In addition, this has caused a delay in relation to the progression of key market intentions for Strategic Commissioning. This has been further exacerbated by the lack of consistency in relation to the Head of Finance for New Directions.

Key areas of risk during the year

New Directions have identified the need to strengthen their approach to risk management, specifically establishing the risk appetite of the organisation and

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ensuring that it is aligned with strategy.

At their meeting on 25 July 2022, the Board agreed to use a risk appetite framework, similar to that utilised in the NHS, which supports better risk sensitivity in decision making. This more robust approach to risk management will be finalised at a board away day in November 2022; the Shareholder Representative attends these sessions.

New Directions takes all necessary measures to prevent fraud and bribery by developing an open and transparent culture with which everyone can identify and subscribe. Anyone who has suspicions or evidence of fraud or bribery occurring in any aspect of the running of the company is expected to report their concerns and will be protected as a result of doing so by the whistleblowing policy.

New Directions has a comprehensive system of auditing and accounting in place, which makes sure that any financial transactions involving staff are always open and above board and the business is conducted to achieve the highest standards of probity. The finance team regularly receive fraud awareness training through their Bank, NatWest.

There is a code of conduct policy which sets out the standards expected for all staff at Sefton New Directions and a register of interests is in place for the Board to prevent any conflicts of interest.

The Board of New Directions has established a board assurance framework, which is an annual cycle of internal company controls. Company Directors and the Shareholder Representative receive these reports

New Directions are in the process of strengthening its arrangements by developing an Anti-Bribery policy.

The Shareholder Representative has full delegated authority from the Cabinet to act as the Shareholder in respect of all Shareholder decisions relating to the New Directions companies, including:

- Appointing and dismissing directors of the Boards.
- Assessing and making recommendations in respect of the performance of the Boards and individual directors.
- Approving the Annual Business Plans.
- Approving any in-year changes to the approved Annual Business Plans, including new investments to be made by the Companies.
- Making decisions in respect of Reserved Matters.
- Chairing the Annual General Meetings (AGMs).
- Voting on behalf of the Shareholder at the AGMs.

The Shareholder Representative is supported by the Council's Executive Leadership Team in ensuring the performance of the company and the continued alignment of the business of the company with the objectives of the Council. They may also seek further consultation or approval from Cabinet on any matters for which they feel this would be appropriate, at their discretion, or for which this is required under the Council's constitution. This may simply be to gain support in

assessing information and making decisions.

Risks identified are that there is no definitive information on costs for each individual service delivered under the block contract arrangements and that there is a need for greater transparency on the internal governance and audit arrangements for the Company. There are also no formal contractual arrangements in place linked to each area of provision, with no routine monitoring of compliance or quality. In addition, there has been no formally agreed approach to the future modelling of annual inflationary uplifts.

Evaluation of performance in 2021/22 compared to Council objectives for setting up the company and approved Business Plan for the year

The performance reported in this report has supported the Council to meet its objectives around the continuation of services and/or putting in place alternative service provision arrangements during the pandemic, the drive to support more people in their own homes and to ensure that services are in place to support with hospital discharges and therefore reduce pressures in the wider Sefton Place Health and Social Care system.

The main challenge has been around workforce impacted on due to COVID, recruitment challenges, however, this has started to improve.

Going forward, the focus will be to improve accessibility of reablement over winter to meet the performance requirement of the NHS which funds the service through the BCF – Better Care Fund. There is an expectation that there will be sufficiency of reablement to meet both community and hospital discharge demand and prevent avoidable delays to people returning home from hospital. This will enable the wider system to maintain hospital flow and ambulance turn around times and although this service is a small part of the wider health and care system the service supports discharges for Sefton patients from a hospital which is under performance scrutiny. It is therefore important that this service continues to improve and develop capacity to meet demand.

Full performance has been difficult to access due to upgrade of the New Directions I.T. systems.

As with other adult social care providers, performance during 2021/22 was impacted by the pandemic. Council officers will work with New Directions on its competitor analysis work that is identified as being a key workstream in its 2022/23 action plan.

A full performance review will take place in Quarter 4 of 2022/23 and will inform the development of new contractual arrangements.

What are the Delivery and Improvement Plans for 2022/23

As identified in the **Strategic Business Plan 2022-25**, the key objectives for

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2022/23 for New Directions are:

- **Provider of Choice**
 - Stabilisation of the block contract with agreed processes for uplifts
 - To be instrumental in the delivery of Intermediate Care/Reablement strategy
 - To support proportionately more people with complex needs, behaviours that challenge, people with autism and dementia
 - Expand into mental health services, with a specific focus on the recovery model and adolescent support to meet the local gap and commissioning need
 - Create an innovative approach to support 16-19-yearolds through the shared lives model
 - To create a supported employment programme
- **Employer of Choice**
 - Implement a collaborative Learning and Development (L&D) culture
 - Develop leaders and managers to promote effective performance management and enhance organisational, team and individual practice outcomes
 - Develop a highly capable and resilient operational workforce to ensure services are specialist providers in their field
 - Initiate a holistic wellbeing approach designed to enhance the resilience of the workforce
- **Improving Quality of Care**
 - Collate, measure and use data more effectively – demonstrating outcomes
 - Undertake an annual mock inspection of all services (including non-CQC registered services)
- **Effective Engagement and Participation**
 - Ensure individuals who use the service will be involved in decisions about their support - Co-production is embedded into all future decisions; and people tell us they feel they have control over their daily life
 - Improve levels of staff engagement to maximise business performance
- **Effective, Efficient and Financial Sustainability**
 - Ensure performance systems are in place that monitors effectiveness
 - Develop high-level performance management indicators for the board
 - Develop a digital strategy to support the effective and efficient operation of the business
 - Create an investment plan in line with 'the offer' and service expansion and redesign
 - Conduct a competitor analysis of local competitors in key markets.
 - Identify and secure areas of new business growth
 - Minimise the risk associated with the pension liability
 - Implement a financial investment strategy with financial targets

- Produce a medium-term financial plan
- Review and implement a new internal audit programme

From an Adult Social Care perspective there is firstly a need to ensure that is a synergy between New Directions 2022/23 plans and its own plans and commissioning priorities.

It is also the view of Adult Social Care that governance arrangements for New Directions need to be strengthened to ensure that Adult Social Care commissioning decisions and plans are communicated fully within New Directions and its Board.

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Agenda Item 8

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	21 February 2023
Subject:	Adult Social Care Performance Update		
Report of:	Assistant Director of Adult Social Care	Wards Affected:	All Wards
Portfolio:	Adult Social Care		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

This report is presented to the Committee to provide an update on progress within Adult Social Care against key performance metrics.

Recommendation(s):

(1) Committee are asked to note the contents of the report and be assured on the actions being taken in any area requiring increased focus.

Reasons for the Recommendation(s):

To ensure transparency, oversight, and challenge in relation to Adult Social Care Performance.

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

None

What will it cost and how will it be financed?

(A) Revenue Costs

There are no revenue costs as a direct result of this report

(B) Capital Costs

There are no capital costs as a direct result of this report

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Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):	
There are no direct resource implications as a result of this report	
Legal Implications:	
Ensures compliance to requirements detailed within the Care Act 2014	
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	No

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Ensuring effective discharge of statutory duties under the Care Act 2014, utilising national and local metrics to assess performance:
Facilitate confident and resilient communities: promoting independence and supporting people to delay the need for formal support and live at home for longer:
Commission, broker and provide core services:
Place – leadership and influencer:
Drivers of change and reform:
Facilitate sustainable economic prosperity:
Greater income for social investment:
Cleaner Greener:

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7133/23) and the Chief Legal and Democratic Officer (LD.5333/23) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

None

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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

Social Care assesses performance against a number of national and local measures. Monitoring of performance is undertaken at strategic and operational levels. There is a well established Strategic Performance and Business meeting in place and a new Quality, Performance and Finance Board has been established to provide further oversight on all areas of performance. This includes Finance, Performance, Professional Practice, Transformation and Commissioning. There are now dedicated business meetings in place for all these key areas. Key aspects of the data reviewed, is detailed within this paper and further work is in progress to further enhance oversight of quality to ensure alignment to the new national assurance framework.

Overview reports are shared directly with the Executive Director and Cabinet Member. Mitigation plans are put in place for any performance areas required specific focus, with progress reported to the specific business meeting and up to the Performance Board for assurance and further scrutiny. Risk oversight is a standard agenda item on all governance meetings. Further training on risk management and risk registers has taken place with some staff and will continue throughout Q4 with support from the Corporate Risk & Resilience team. Identifying items for risk and escalation are now standard agenda items on all key meetings. Performance is driven by statutory requirements, best practice and benchmarking.

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2. Key Performance Updates

2.1 Contacts and Activity

During this financial year Adult Social Care has provided long term support services to four thousand, one hundred individuals and carers. Carer numbers have been increasing steadily over the past twelve months. During this period, the service has received over twenty-two thousand contacts. Activity is detailed below in Fig.1 and 2.

Fig 1

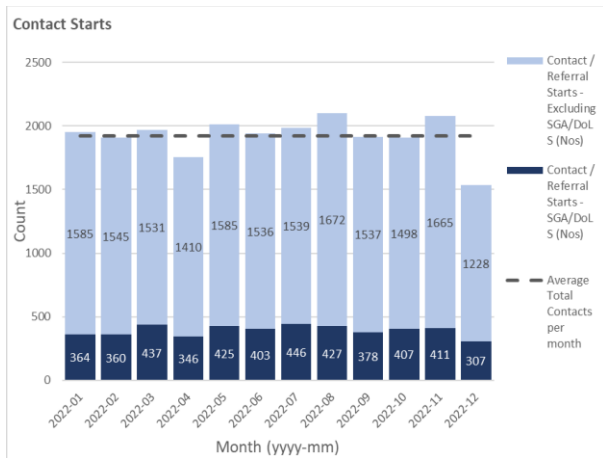


Fig 2



During Quarter 3, over three thousand, six hundred contacts were received, this represents a reduction of 8% on the previous quarter and this is a pattern replicated most years as a result of a decline in the number of contacts received over the Christmas period. In previous years, contact numbers in Quarter 4 rise back up to normal levels.

Of the total contact received during Quarter 3, 17% of people were provided with advice and information which includes support to access community and voluntary sector support. We are expecting to see this number increase as we continue to enhance our front door offer. Of the contacts that resulted in new referrals, 27% went on to have a full Care Act assessment (Fig 3). A snapshot of key activity during the last twelve months is shown in Fig 4, however this does not include specialist assessments undertaken nor unplanned reviews, both of which also represent a substantial amount of activity.

Fig 3

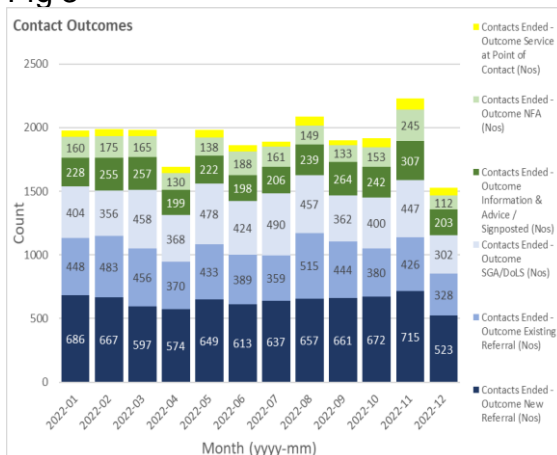
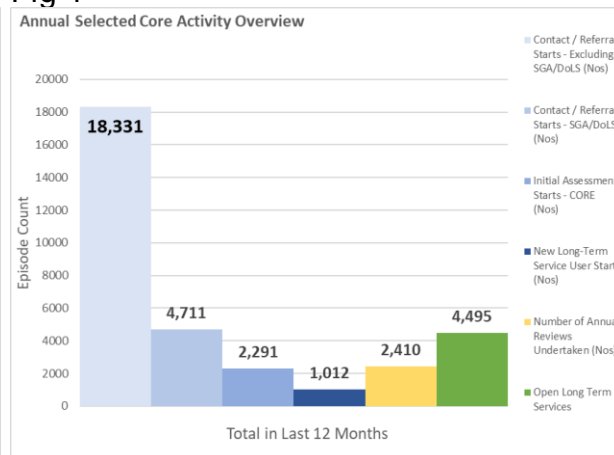


Fig 4



2.2 Assessments and Reviews

Whilst Adult Social Care has continued to undertake a large number of assessments, there remain challenges in respect of increased demand and workforce pressures. Sefton, like all other local authorities continues to face recruitment difficulties for key posts such as Social Workers, Occupational Therapists and Approved Mental Health Practitioners. The current vacancy rate within Adult Social Care is 9.3% across all roles and for social work and occupational therapy, specifically, the vacancy rate is 12.1% and 12.5% respectively. Agency staff are utilised to fill vacant posts, wherever possible, and this has supported the mitigation of immediate risk, however, recruiting agency staff is also difficult.

The capacity of Senior Leadership team is in the process of being strengthening which was a key recommendation of the Adult Social Care Local Government Association (LGA) Peer Review which has held in 2022. Interviews have recently been held and additional posts recruited to. Strengthening front-line provision remains a key focus and there is now a rolling recruitment programme in place. Adult Social Care is also working with corporate Human Resource Colleagues to undertake a market evaluation in relation to the recruitment and retention of key adult social care posts.

Like other Local Authorities Adult Social Care is experiencing high numbers of individuals requesting assessments (Fig 5) and reviews (Fig 6). This has been exacerbated by the impact of Covid. Ensuring robust oversight and effective communication with individuals and carers is essential. To ensure effect risk management, the following measures are in place across Adult Social Care:

- All new referrals are triaged daily, with urgent referrals being assessed within forty-eight hours. Qualified social work practitioners and managers oversee this.
- In situations where an individual requires an assessment, but the situation is not deemed 'urgent' these cases are passed to the relevant community teams. Both teams have systems in place in to determine priority in terms of allocation to social workers. All individuals awaiting an assessment are contacted on a regular basis to ensure cases are re-prioritised, where needed, as well as ensuring regular oversight of wait times. All waiting times are scrutinised at the Adult Social Care Strategic Performance Meeting.
- Whilst the number of people on Occupational Therapy caseloads remains high and the volume of referrals continues to exceed capacity, there has been improvement. All referrals undergo an initial screening and prioritisation with urgent cases being actioned as soon as possible. Additional Occupational therapists are being recruited, where possible, and succession planning is being maximised through the implementation of an OT apprenticeship scheme.
- Reviews remain a key area of focus and whilst the number of reviews being completed has been increasing (Fig 5), Quarter 3 did see a reduction due to the impact of the Christmas period. In the past four years, review numbers in Q3 have seen decreases ranging from 8% to 22%. In three of the past four years, review numbers have picked up again in the following quarter. A key focus remains increasing the numbers of scheduled reviews (Fig 6) and a dedicated work programme is in place.

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- A dedicated Covid Recovery Programme has now been launched to provide further focus on assessments and reviews which will include the utilisation of a dedicated weekend taskforce to target cases waiting for further assessment and intervention.

Fig 5

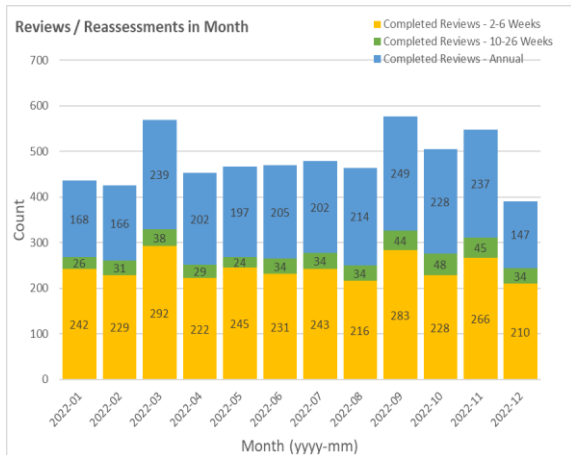
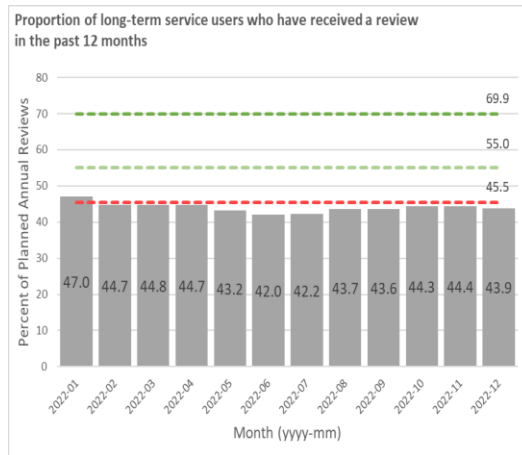


Fig 6



2.3 Support Services

Adult Social Care continues to support increasing numbers individuals at home with domiciliary care and reablement services with over four thousand people being supported during 2021/22 (Fig 7). This is aligned to our key strategic aim of supporting as many people as possible to remain living at home for a long as possible. Capacity within the market does remain a challenge due to a number of factors including financial sustainability, workforce pressures, increased acuity, and demand, however recent procurement of block booking arrangements and a continued focus on supporting the market has seen an increase in the numbers of people accessing domiciliary care (and a reduction in those awaiting packages). The number of domiciliary care hours being procured have been rising steadily and is now just under nineteen thousand per week.

The recent discharges monies have also been utilised to further support the market and a new procurement for domiciliary care to ensure longer term sustainability is due to commence in the autumn.

The overall number of long term placements being made has also been falling (Fig 8) and this has been impacted particularly on a reduced number for people over sixty-five being admitted into residential or nursing care. Placements for those aged eighteen to sixty-four has, however, stayed high, and we remained in the bottom quartile regionally. This is a continued area of focus and will be supported by the extra care strategy and new models of care being developed in collaboration with supported living providers.

Fig 7

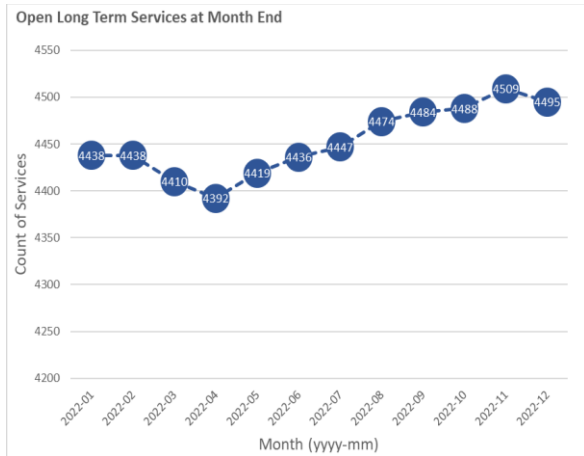
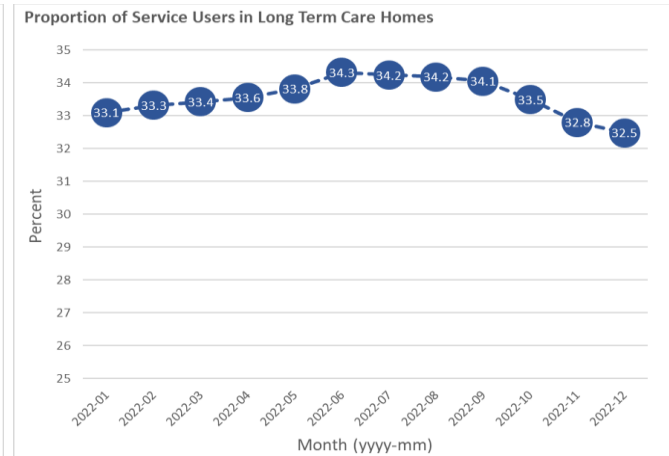


Fig 8



The success of reablement has remained a positive with just over 90% of clients sixty-five plus, discharged from hospital, remaining at home ninety-one days after receiving reablement services. Capacity within reablement has remained a challenge although this has been slowly increasing (Fig 9) and work is currently in progress to facilitate an extension of this service. Where reablement is not available, alternative services are offered to ensure people are kept safe and needs are met. At the present time, there remains a high use of alternatives to reablement services to ensure needs are met (Fig 10).

Fig 9

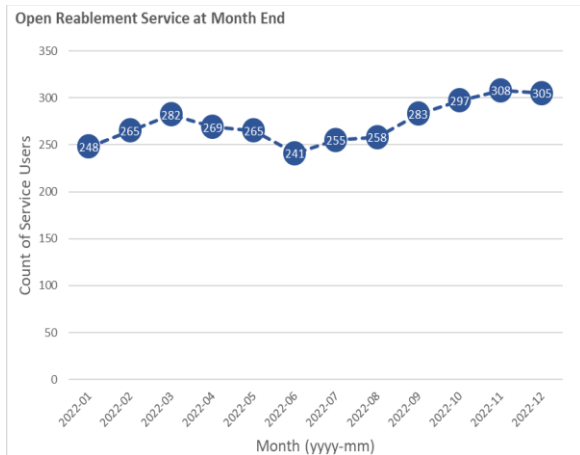
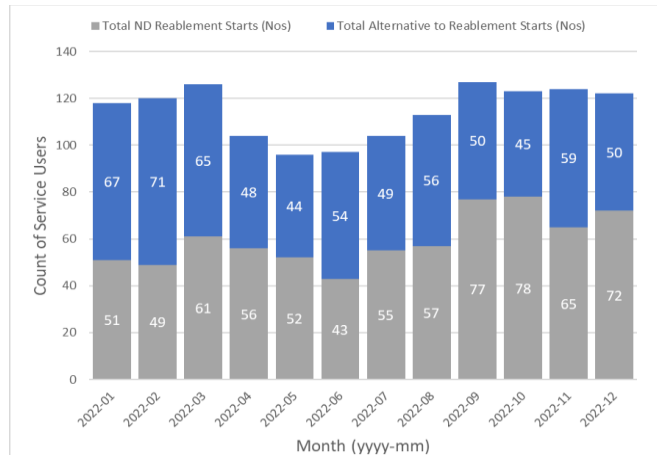


Fig 10



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2.4 Safeguarding

Undertaking safeguarding investigations remains a critical statutory duty for Adult Social Care, with teams continuing to manage and address key activity within these areas (Fig 11, 12). Many of these investigations are complex and often involving care providers, requiring substantial staff resources and senior management oversight, together with a sustained focus with colleagues from Health, the Police and Advocacy Services.

Fig 11

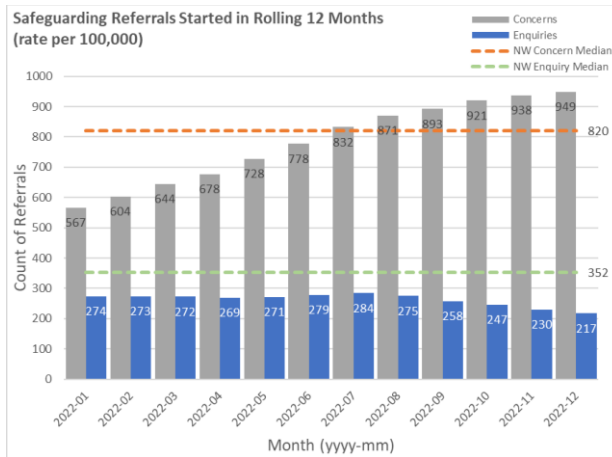
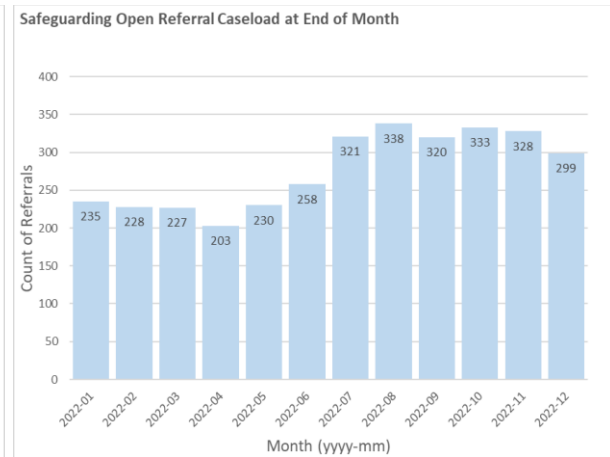


Fig 12



Adult Social Care continued to perform well in the timely handling of safeguarding contacts and referrals with just over 96% of contacts resolved within seven days and 67% of referrals resolved within twenty-eight days.

Sefton also continued to perform well in Making Safeguarding Personal with nearly 98% of those expressing a preferred outcome having that preference either fully, or partially met.

2.5 Adult Social Care Outcomes Framework (ASCOF)

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.

Additional key points on Sefton’s performance are listed below

Employment:

Sefton continues to rank in the top quartile for the proportion of adults in contact with secondary mental health services in employment, both in the North West and nationally.

A very small increase was noted in December for the proportion of adults with learning disabilities going into paid employment. Sefton remained just outside of the bottom quartile in the North West but in the bottom quartile, nationally. A multi-agency, dedicated task and finish group chaired by the Cabinet Member is due to launch in February 2023.

Housing:

Sefton compares well to other local authorities on clients in settled accommodation. Just under 90% of clients in contact with secondary mental health are living independently. Over 88% clients with learning disabilities are living in their own home or with their family. This puts us in the top quartile in England for each of these metrics.

Self-directed support & direct payments:

Provision of services to clients by either self-directed support or direct payments has remained relatively consistent over the last twelve months.

The proportion of carers receiving a direct payment continued to increase. December saw a highest figure for this metric in the last twelve months. Work done by the Carers Centre to distribute more direct payments looks to be having a small impact on the measure. Further work needs to be done to reach the top quartile with all carers needing to have received a direct payment to hit this target.

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Agenda Item 9

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	21 February 2023
Subject:	Liverpool Clinical Services Review - Stakeholder Update		
Report of:	Chief Legal and Democratic Officer	Wards Affected:	(All Wards);
Portfolio:	Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

To submit a stakeholder update that provides information on the Liverpool Clinical Services Review .

Recommendation(s):

- (1) That the report and stakeholder briefing be noted; and
- (2) That, in the event that Committee Members have concerns about the review or wish to receive clarifications, this could be arranged this for the first meeting of the new Municipal Year 2023/24.

Reasons for the Recommendation(s):

The stakeholder briefing outlined information that falls under the remit of the Committee.

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

No alternative options have been considered as the Overview and Scrutiny Committee needs to be aware of potential developments relating to hospital Trusts within Cheshire and Merseyside.

What will it cost and how will it be financed?

There are no direct financial implications for the Council as a result of this report.

(A) Revenue Costs

See above.

(B) Capital Costs

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See above.

Implications of the Proposals:

<p>Resource Implications (Financial, IT, Staffing and Assets): There are no direct resource implications for the Council as a result of this report.</p>									
<p>Legal Implications: There are no direct legal implications for the Council as a result of this report.</p>									
<p>Equality Implications: There are no equality implications as a result of this report.</p>									
<p>Climate Emergency Implications:</p> <p>The recommendations within this report will</p> <table border="1"> <tr> <td>Have a positive impact</td> <td>No</td> </tr> <tr> <td>Have a neutral impact</td> <td>Yes</td> </tr> <tr> <td>Have a negative impact</td> <td>No</td> </tr> <tr> <td>The Author has undertaken the Climate Emergency training for report authors</td> <td>Yes</td> </tr> </table> <p>There are no direct climate emergency implications as a result of this report.</p>		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
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								

Contribution to the Council's Core Purpose:

<p>Protect the most vulnerable: The stakeholder briefing refers to acute and specialist provider NHS Trusts within the Liverpool City Region which provide treatment and services to the most unwell residents, particularly those living in the south and east of the Borough.</p>
<p>Facilitate confident and resilient communities: As above.</p>
<p>Commission, broker and provide core services: As above.</p>
<p>Place – leadership and influencer: As above.</p>
<p>Drivers of change and reform: As above.</p>
<p>Facilitate sustainable economic prosperity: N/A</p>
<p>Greater income for social investment: N/A</p>
<p>Cleaner Greener:</p>

N/A

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7134/23) and the Chief Legal and Democratic Officer (LD.5334/23) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

The stakeholder briefing has been received from the Head of Communications, NHS Cheshire and Merseyside, Liverpool, and has been shared with Councillors in Liverpool CC, Knowsley MBC and Sefton MBC.

Implementation Date for the Decision

Immediately following the Committee meeting.

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

Appendices:

The following appendix is attached to this report:

- Appendix A - Liverpool Clinical Services Review, Stakeholder Update, dated 20 January 2023, from NHS Cheshire and Merseyside

Background Papers:

There are no background papers available for inspection.

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1. Introduction/Background

1.1 The attached stakeholder briefing refers to an independent review commissioned by NHS England that has identified recommendations for greater collaboration between Liverpool's acute and specialised hospital trusts.

1.2 The review has identified 12 opportunities for greater collaboration. Of the 12 opportunities, three priorities have been identified to be taken forward immediately, either because they present the greatest risk or offer clear opportunities. These are:

1) Solving the clinical sustainability challenges affecting women's health in Liverpool.

2) Improving outcomes and access to emergency care, making optimal use of existing co-adjacencies at the Aintree, Broadgreen and Royal Liverpool Hospital sites.

3) Significant opportunities to achieve economies of scale in corporate services.

1.3 According to the briefing, if the recommendations are approved, this would mean:

1) A reset of the Future Generations Programme, currently led by Liverpool Women's NHS Foundation Trust. Under the recommendations, the ICB would lead a piece of work to identify a solution to the long-standing issues affecting women's health services in the city. Making this a system-wide priority would reflect the fact that solutions will need to involve wider partners, not just Liverpool Women's as a single organisation.

2) In order to take forward the priority around emergency care, joint ways of working would be created at Aintree, Broadgreen and Royal Liverpool sites, allowing the separate organisations based on each site to deliver the best and most effective care, without being held back by organisational boundaries. To take this site-based approach forward, three joint committees would be established, made up of:

- Liverpool Heart and Chest Hospital FT and Liverpool University Hospitals FT for the Broadgreen site
- Liverpool University Hospitals FT and The Walton Centre FT for the Aintree site
- Clatterbridge Cancer Centre NHS FT and Liverpool University Hospitals FT for the Royal Liverpool site

3) Discussions with Cheshire and Merseyside Acute and Specialist Trusts (CMAST) to bring together recommendations from the review with Cheshire and Mersey-wide priorities for realising economies of scale in corporate services.

1.4 While the review recommendations set out routes for addressing key challenges and opportunities within the local health and care system, the briefing paper does not consider any of them to be a specific proposal for service change.

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- 1.5 The full report was presented to the Cheshire and Merseyside Integrated Care Board at its meeting on 26 January 2023 for approval.
- 1.6 Any proposals for service change that emerge from the work will be subject to further engagement or consultation with staff, stakeholders and the public, as required.

2. Current Position and Next Steps

- 2.1 This report and the stakeholder briefing are submitted to the Committee for information. In the event that Committee Members have concerns about the review referred to within the briefing or wish to receive clarifications, this could be arranged this for the first meeting of the new Municipal Year in 2023/24. Members are requested to indicate their views at the meeting.

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Liverpool Clinical Services Review

Stakeholder update

20 January 2023

On 26 January 2023, NHS Cheshire and Merseyside Integrated Care Board (ICB) will be presented with a report into the Liverpool Clinical Services Review¹.

This update provides stakeholders with background into the review, and the recommendations set out in the report. Please note that these recommendations are all subject to approval by the ICB at its meeting on 26 January.

Background

In spring 2022, Cheshire and Merseyside Integrated Care System (ICS²) was asked by NHS England to commission an independent review that identified recommendations for greater collaboration between Liverpool's acute and specialised hospital trusts.

Compared to other areas, Liverpool has a high number of acute and specialist provider trusts. While many of these provide outstanding care, there are challenges around fragmentation of services, variation in quality, financial positions, experiences of care, workforce capacity and sustainability.

The review was also to consider alignment and interdependencies with the One Liverpool strategy, the city's health and wellbeing strategy and the wider Cheshire and Merseyside system.

The six organisations within the scope of this review were:

- Alder Hey Children's NHS Foundation Trust
- Clatterbridge Cancer Centre NHS Foundation Trust
- Liverpool Heart and Chest NHS Foundation Trust
- Liverpool University Hospitals Foundation Trust
- Liverpool Women's NHS Foundation Trust
- The Walton Centre NHS Foundation Trust

Other stakeholders involved with the review included:

- Mersey Care NHS Foundation Trust

¹ Meeting papers will be available here when published:
<https://www.cheshireandmerseyside.nhs.uk/get-involved/upcoming-meetings-and-events/nhs-cheshire-and-merseyside-integrated-care-board-meeting-january-2023/>

² The ICS is a partnership of organisations across Cheshire and Merseyside that come together to plan and deliver joined up health and care services.

- General practice, including the Local Medical Committee and the city's ten Primary Care Networks (PCNs)
- Liverpool City Council
- Cheshire & Merseyside Acute & Specialist Trusts (CMAST) provider collaborative and Cheshire and Merseyside Mental Health and community collaborative

The review was overseen by the One Liverpool Partnership Board, which is made up of key partners within the Liverpool health and care system, including the NHS, local authority and voluntary sector.

Report recommendations

The review has identified 12 opportunities for greater collaboration, which are set out in the full report³. Some of these are already being implemented through the One Liverpool strategy⁴, the city's joined up plan for the local health and care system, and through wider Cheshire and Merseyside programmes of work.

Of the 12 opportunities, the One Liverpool Partnership Board has identified three priorities which it believes should be taken forward immediately, either because they present the greatest risk or offer clear opportunities. These are:

- 1) Solving the clinical sustainability challenges affecting women's health in Liverpool.
- 2) Improving outcomes and access to emergency care, making optimal use of existing co-adjacencies at the Aintree, Broadgreen and Royal Liverpool Hospital sites.
- 3) Significant opportunities to achieve economies of scale in corporate services.

If the recommendations are approved, this would mean:

- 1) A reset of the Future Generations Programme, currently led by Liverpool Women's NHS Foundation Trust. Under the recommendations, the ICB would lead a piece of work to identify a solution to the long-standing issues affecting women's health services in the city. Making this a system-wide priority would reflect the fact that solutions will need to involve wider partners, not just Liverpool Women's as a single organisation.
- 2) In order to take forward the priority around emergency care, joint ways of working would be created at Aintree, Broadgreen and Royal Liverpool sites, allowing the separate organisations based on each site to deliver the best and most effective care, without being held back by organisational boundaries. To take this site-based approach forward, three joint committees would be established, made up of:

³ The report will be available in meeting papers when they are published:

<https://www.cheshireandmerseyside.nhs.uk/get-involved/upcoming-meetings-and-events/nhs-cheshire-and-merseyside-integrated-care-board-meeting-january-2023/>

⁴ https://www.cheshireandmerseyside.nhs.uk/media/gr4pve2b/000918_one_liverpool_strategy_v6.pdf



Cheshire and Merseyside

- Liverpool Heart and Chest Hospital FT and Liverpool University Hospitals FT for the Broadgreen site
 - Liverpool University Hospitals FT and The Walton Centre FT for the Aintree site
 - Clatterbridge Cancer Centre NHS FT and Liverpool University Hospitals FT for the Royal Liverpool site
- 3) Discussions with Cheshire and Merseyside Acute and Specialist Trusts (CMAST⁵) to bring together recommendations from the review with Cheshire and Mersey-wide priorities for realising economies of scale in corporate services.

While the review recommendations set out routes for addressing key challenges and opportunities within the local health and care system, none of them are a specific proposal for service change.

Pending the ICB's approval of the review recommendations, and agreement with trust boards, any proposals for service change that emerge from the work will be subject to further engagement or consultation with staff, stakeholders and the public, as required.

Next steps

- The report will be presented to Cheshire and Merseyside ICB at its meeting on 26 January.
- Following the decision of the ICB the governance processes and structures will be established to deliver the recommendations.

ENDS

⁵ CMAST is a provider collaborative – a group of NHS trusts who work together to benefit their population.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting	21 February 2023
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.

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Update for Overview and Scrutiny Committee (Adult Social Care)



February 2023

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.

Sefton Partnership Board

The Integrated Care System has now begun to provide additional clarity of its strategic intentions through the publication of its draft strategy in December 2022. This was followed by the publication NHS operational planning and priorities guidance. In January 2023 the Government also announced that its consultation on its proposed action on major conditions and diseases will commence, with the outputs of this resulting in a Major Conditions Strategy for the NHS. All of this now provides further clarity for how places can be aligning their programmes of work.

The Sefton Partnership Board (SPB) has now been running for 12 months with the last six months under more formal arrangements. As we head into 2023-2024 there is the opportunity to review and refine the way in which we operate. It is proposed that we use the SPB meeting in April as a development session to enable time for reflection and to consider what our priorities and reporting requirements are for the year ahead.

Sefton Place review meeting

At the end of January our Place Director and members of our Sefton team met with NHS Cheshire and Merseyside Integrated Care Board (ICB) executive team members to review progress to date. The meeting was positive and constructive, with general feedback as below:

- Good progress in respect of primary care with a suggestion that we could develop this into a strategic document to reflect transformation ambition
- Recognition in relation to urgent care in relation to North West Ambulance Service and in mapping 111 data to inform commissioning plans and hospital discharge
- There will be challenging cost improvement plans so there is a continued need to focus on areas of spend within our control
- Continue to develop integrated approaches across all partner organisation. The team noted that there is good evidence of this in Sefton with strong partnerships with primary care networks (PCNs) and experienced leadership through clinical directors and PCN leaders
- Patient experience and good quality outcomes should continue to be at the centre of commissioning and transformation and good evidence of this with examples given
- The next meeting will focus on our Partnership priorities. This will be discussed in more detail at our development session in April

Industrial action

In response to recent industrial action we have been informing Sefton residents where to seek healthcare support if they need it, as well as continuing to plan and prepare for the future strikes by Royal College of Nursing, GMB, Chartered Society of Physiotherapy and North West Ambulance Service.

The NHS continues to do everything it can to go ahead with planned procedures – especially for patients in greatest clinical need – and will contact people if their appointment needs to be

rescheduled. Anyone who has not been contacted should please attend their appointment as planned.

Local services are keeping their websites and social media accounts up-to-date with information about service disruption – so we ask that people please check before they travel.

Irrespective of any industrial action and ongoing system pressures, we ask that people please do not hesitate to come forward to access care if they need it.

We're urging people to make NHS 111 Online their first port of call if they need urgent health advice on days of strike action and reminding them that NHS 111 Online can tell you:

- Where to get help for your symptoms
- How to find general health information and advice
- Where to get an emergency supply of your prescribed medicine
- How to get a repeat prescription

Upcoming strike dates and the latest information can be found here:

www.cheshireandmerseyside.nhs.uk/posts/nhs-industrial-action/

System pressures

Across Cheshire and Merseyside, NHS services continue to experience high demand – including high numbers of people attending emergency departments (A&E) and GP practices.

A position statement issued at the start of February gave an overview of measures introduced across the system to help relieve current pressures including:

- Work with NHS Trusts to ensure all possible capacity across the healthcare system is utilised and to support the release of ambulance crews
- National funding is being utilised across Cheshire and Merseyside to support hospital discharge processes and ensure more care packages are available in the community
- Significant investment is being made in virtual wards to support more people to be treated out of hospital. There is investment in reablement services, while the national additional roles reimbursement scheme is helping to create capacity in primary care

The statement also reminded people to ensure their flu and COVID-19 vaccinations are up to date and continue to follow self care advice, using NHS 111 online when they need access to healthcare services but its not an emergency.

You can read the statement here: <https://www.cheshireandmerseyside.nhs.uk/posts/nhs-cheshire-and-merseyside-update-on-system-pressure-4/>

Update on COVID-19 vaccination campaign

The Joint Committee on Vaccination and Immunisation (JCVI) announced interim recommendations for the future of the COVID-19 vaccination programme at the start of February.

It followed news from NHS England signaling the end of the current autumn booster campaign on 12 February.

In summary, the JCVI recommendations are:

- Plans should be made for those at higher risk of severe COVID-19 to be offered a further booster vaccination during Autumn 2023
- For a smaller group of people, such as those who are older and those with a weakened immune system, an extra booster vaccine dose may be offered in Spring 2023 (further guidance is still being discussed)
- Emergency surge vaccination response may be required, for example in response to a new variant
- The offer of a non-seasonal booster dose for people aged 16 to 49 years, who are not in a clinical risk group (including people who are pregnant or have an underlying health condition) will also end in England on 12 February, except with clinical discretion
- The 'evergreen' primary course (usually the first and second dose) should move during 2023 to become a targeted offer made during vaccination campaigns to protect those at higher risk of severe COVID-19 (ie not continually available)

You can read more about the JCVI's interim advice here:

<https://www.gov.uk/government/news/jcvi-advises-an-autumn-covid-19-vaccine-booster>

Promoting flu and COVID-19 vaccines

We have been continuing to remind eligible residents to make sure they are up to date with both their flu jabs and COVID-19 vaccines.

This has included intense social media activity and more traditional methods, such as leaflets ahead of the end for the current COVID-19 autumn booster campaign on 12 February.

- For eligibility on the flu vaccination visit: www.nhs.uk/conditions/vaccinations/flu-influenza-vaccine/
- For information and eligibility of COVID-19 vaccinations please visit: www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination.

Respiratory hubs come to Sefton

Additional support is aiming to provide more effective support to residents with acute and persistent breathing infections during the winter period.

NHS England allocated each region with funding to open an [acute respiratory infections \(ARI\) hub model](#) in Autumn 2022.

The hubs are being introduced to give additional capacity to support primary and secondary care pressures matching the needs of each population and hubs are due to close 31 March 2023 when the funding ends.

Here in Sefton, Southport's hub opened on 23 January at Southport Hospital and south Sefton residents will soon have access to a hub at Maghull Health Centre which is planned to open on 14 February.

Each hub is for acute respiratory illnesses and patients are referred to the hubs by their GP practice if they recommend a face to face appointment through triage to the clinically led sites.

The Southport hub is at Southport Hospital in the same building as the GP On Call and operates morning (9.30am – 1.30pm) and afternoon (2pm – 6pm) Monday to Friday for adults and children subject to clinical cover.

The south Sefton hub is aiming to open on 14 February at Maghull Health Centre. The service will be available Monday, Tuesday and Friday from 10am – 6pm. At first the service will be open to adults via referral and they plan to open this up to children in the coming weeks.

Long COVID – Eric story

We have been raising awareness of the support available locally for people with Long COVID with the help of Sefton resident Eric Morris.

Eric caught COVID-19 in 2022. He continued to suffer ongoing symptoms, completely losing his mobility and independence, before eventually finding out he had Long COVID.

Even after testing negative for COVID-19 with the virus, Eric's health continued to deteriorate, resulting in breathlessness, loss of his physical abilities and what he terms 'brain fog' – he has no memory of the early days of suffering from the condition.

Eric eventually sought help from his GP who recognised the signs of Long COVID and referred him to the Mersey Care Long COVID clinic in Southport for treatment.

The team assessed his condition and started him on a programme of rehabilitation and support including breathing exercises, physiotherapy, mobility support and equipment to help improve his condition and support him to become more independent at home again.

If you think you might have Long COVID, do contact your GP and they can refer you into our service. We have GPs, physiotherapists and social prescribers on site to help you, but can also refer you into community services such as occupational therapy.

The service is available to all Sefton residents. For more information visit:
www.mersecare.nhs.uk/our-services/southport-formby/long-covid-service.

Watch Eric's video here: www.youtube.com/watch?v=ObZ26eGirCA

Social prescribing service – Danny's story

Danny's experience of our local NHS social prescribing services is encouraging others to reach out and get help from the service when they need it.

The 26 year old Southport resident was experiencing anxiety and depression when he found the social prescribing service. Danny spoke to his GP and was referred to the service.

Social prescribing is designed to help people with their health and wellbeing by linking them with local services for practical, social, physical and emotional support.

The social prescribing service is a collaboration between Sefton CVS, Southport and Formby Primary Care Network and South Sefton Primary Care Network.

Across Sefton, people can be referred to the social prescribing service by anyone in their GP practice. People can find out more about their social prescribing service and how to access it by talking to their GP practice.

You can see videos of Danny and social prescribing link worker, Niki Williams on our website along with more information about the service here: www.seftonpartnership.org.uk/social-prescribing

Crisis Café – Brittney's story

Sefton resident Brittney, who suffers with severe depressive episodes, has thanked the Crisis Café in Southport for saving her life after she had experienced suicidal thoughts earlier this year.

Brittney lives in Southport and hit a really low point while struggling with poor mental health. On one evening in particular she was suffering from very strong suicidal thoughts and had taken steps to harm herself. Fearing the worst, she decided to visit the Sefton Crisis Cafe in Southport - a local mental health support service - to find help.

A support worker at the Crisis Cafe sought immediate help for Brittney, giving her emergency assistance to de-escalate the crisis situation she was in, preventing her from taking her own life and supporting her to get back to a safer mental state.

The Sefton Crisis Cafes are based in Crosby and Southport, and offer out of hours support to anyone aged 18 years or over in Sefton experiencing a mental health crisis. They offer drop-in sessions from 5pm to 11pm on Friday, Saturday and Sunday evenings to give local residents a place of safety as an alternative to A&E.

The Sefton Crisis Cafe service was set up thanks to the local NHS in Sefton, Sefton Council, Mersey Care NHS Foundation Trust, Sefton CVS and Parenting 2000.

Find out more about the Sefton Crisis Cafes at: www.seftoncvss.org.uk/project/crisis-cafe or get in touch with the team by emailing: crisiscafe@seftoncvss.org.uk or calling 0300 323 0197.

Further information on mental health and wellbeing support and services in Sefton can be found by following #SeftonInMind on social media.

Read more here: www.seftonpartnership.org.uk/crisis-cafe-saves-womans-life

Board meetings

NHS Cheshire and Merseyside's Board meetings continue to rove across the region, with the next taking place on 23 February in Knowsley. The session will be held at Whiston Town Hall, L35 3QX from 10am to 12.30pm.

All meetings are live streamed via NHS Cheshire and Merseyside's Youtube channel for anyone not able to attend.

You can details of all forthcoming meetings here:

<https://www.cheshireandmerseyside.nhs.uk/get-involved/upcoming-meetings-and-events/>

Papers from all previous meetings can be found here:

<https://www.cheshireandmerseyside.nhs.uk/get-involved/meeting-and-event-archive/>

Follow Sefton Partnership on Twitter [@SeftonPartners](https://twitter.com/SeftonPartners) and on [Facebook](https://www.facebook.com/SeftonPartners) or see a range of short films on You Tube for [Sefton Partnership](https://www.youtube.com/SeftonPartners)

Visit the Sefton Partnership website here: www.seftonpartnership.org.uk or NHS Cheshire and Merseyside website here: www.cheshireandmerseyside.nhs.uk

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting	21 February 2023
Subject:	Health Provider Performance Dashboard		
Report of:	NHS Cheshire and Merseyside, Sefton	Wards Affected:	All
This Report Contains Exempt / Confidential Information	No		
Contact Officer:	Luke Garner		
Tel:	07557 205 544		
Email:	luke.garner@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 November 2022

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

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

Sefton Place – North Sefton



Key Performance Area	Time Period	Performance	C&M	National	Target	Trend
A&E 4 hour Waits, All Types (Southport & Ormskirk)	Nov-22	74.20%	69.60%	68.85%	95%	
Cancer 2 Week Waits (Southport & Ormskirk)	Nov-22	88.20%	77.30%	78.77%	93%	
Cancer 62 Day - Screening (Southport & Ormskirk)	Nov-22	No patients 0%	65.43%	61.00%	90%	
Cancer 31 Day 1st Treatment (Southport & Ormskirk)	Nov-22	81.94%	94.25%	91.56%	96%	
RTT -18 Weeks Incomplete (Southport & Ormskirk) snapshot	Nov-22	65.92%	56.52%	60.07%	92%	
C.Difficile (Southport & Ormskirk) cumulative YTD	Nov-22	35	-	-	2022-23 Target <=49	
MRSA (Southport & Ormskirk) cumulative YTD	Nov-22	0	-	-	zero tolerance	
Stratification: 80% of Pts spending 90% of time on Stratification Unit, Southport & Ormskirk	Oct-22	63.20%	66.0%	-	80%	
% of Pts assessed and treated within 24 hours (Southport & Ormskirk)	Oct-22	66.70%	-	-	60%	
Ambulance Response Category 1 Mean 7 minute response time (NS Place Level)	Nov-22	00:09:59	00:08:53 (NWAS)	00:09:08	<=7 Minutes	
Ambulance Category 1 90th Percentile 15 minute response time (NS Place Level)	Nov-22	00:18:52	00:15:08 (NWAS)	00:16:20	<=15 Minutes	
Ambulance Category 2 Mean 18 minute response time (NS Place Level)	Nov-22	01:06:47	00:44:16 (NWAS)	00:42:44	<=18 Minutes	
Ambulance Category 2 90th Percentile 40 minute response time (NS Place Level)	Nov-22	02:29:56	01:35:33 (NWAS)	01:33:20	<=40 Minutes	
Ambulance Category 3 90th Percentile 120 minute response time (CCG Level)	Nov-22	08:14:00	08:22:53 (NWAS)	05:41:13	<=120 Minutes	
Ambulance Category 4 90th Percentile 180 minute response time (NS Place Level)	Nov-22	18:18:54	09:10:29 (NWAS)	07:27:56	<=180 Minutes	
Mental Health: Care Programme Approach (Quarterly) E.B.S.3 (NS Place Level)	Qtr 2 Sep-22	85.7%	-	-	80%	
Mental Health: IAPT 16.8% Access (NS Place Level)	Nov-22	0.94%	-	-	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (NS Place Level)	Nov-22	53.0%	43.3%	-	50%	
Mental Health: IAPT waiting <6 weeks (Quarterly)	Qtr 2 Sep-22	45.0%	94.8%	-	75%	
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 2 Sep-22	100.0%	98.6%	-	90%	

<<-- October latest data

<<-- October latest data

<<-- NWAS National data only up to Aug-22

Southport & Ormskirk Hospital NHS Trust

Friends & Family



Cheshire and Merseyside

Measure	Time Period	Southport & Ormskirk	C&M	National (Target)	Trend
Inpatient – Response Rate	Nov-22	33.5%	29.8%	20.0%	
Inpatient Recommended	Nov-22	94.0%	95.0%	94.0%	
Inpatient Not Recommended	Nov-22	5.0%	3.0%	3.0%	
A&E – Response Rate	Nov-22	19.8%	16.4%	9.8%	
A&E Recommended	Nov-22	82.0%	74.0%	75.0%	
A&E Not Recommended	Nov-22	13.0%	18.0%	17.0%	

Sefton Place – South Sefton

Key Performance Area	Time Period	Performance	C&M	National	Target	Trend
A&E 4 hour Waits, All Types (LUHFT)	Nov-22	66.47%	69.60%	68.85%	95%	
Cancer 2 Week Waits (LUHFT)	Nov-22	54.28%	77.30%	78.77%	93%	
Cancer 62 Day - Screening (LUHFT)	Nov-22	81.25%	65.43%	61.00%	90%	
Cancer 31 Day 1st Treatment (LUHFT)	Nov-22	88.31%	94.25%	91.56%	96%	
RTT -18 Weeks Incomplete (LUHFT) Snapshot	Nov-22	48.55%	56.52%	60.07%	92%	
C.Difficile (LUHFT) cumulative YTD	Nov-22	135	-	-	2022-23 Target <=134	
MRSA (LUHFT) cumulative YTD	Nov-22	2	-	-	zero tolerance	
Stroke: % of Pts spending 90% of time on Stroke (LUHFT)	Qtr 1 Jun-22	63.3%	66.0%	-	80%	
% TIA missed and treated within 24 hours (LUHF)	Nov-22	-	-	-	60%	
Ambulance Category 1 Mean 7 minute response time (SS Place Level)	Nov-22	00:09:51	00:08:53 (NWAS)	00:09:08	<=7 Minutes	
Ambulance Category 1 90th Percentile 15 minute response time (SS Place Level)	Nov-22	00:16:24	00:15:08 (NWAS)	00:16:20	<=15 Minutes	
Ambulance Category 2 Mean 18 minute response time (SS Place Level)	Nov-22	01:04:44	00:44:16 (NWAS)	00:42:44	<=18 Minutes	
Ambulance Category 2 90th Percentile 40 minute response time (SS Place Level)	Nov-22	02:16:03	01:35:33 (NWAS)	01:33:20	<=40 Minutes	
Ambulance Category 3 90th Percentile 120 minute response time (SS Place Level)	Nov-22	10:17:58	08:22:53 (NWAS)	05:41:13	<=120 Minutes	
Ambulance Category 4 90th Percentile 180 minute response time (SS Place Level)	Nov-22	12:53:08	09:10:29 (NWAS)	07:27:56	<=180 Minutes	
Mental Health: Care Programme Approach (Quarterly) E.B.S.3 (SS Place Level)	Qtr 2 Sep-22	100.0%	-	-	80%	
Mental Health: IAPT 16.8% Access (SS Place Level)	Nov-22	1.12%	-	-	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (SS Place Level)	Nov-22	49.0%	43.3%	-	50%	
Mental Health: IAPT waiting <6 weeks	Qtr 2 Sep-22	51.0%	94.8%	-	75%	
Mental Health: IAPT waiting <18 weeks (Quarterly)	Qtr 2 Sep-22	100.0%	98.6%	-	90%	

<<- Q1 Stoke data from taken from Public View

<<- NWAS National data only up to Aug-22

Liverpool University Hospital NHS FT

Friends and Family

Measure	Time Period	LUHFT	C&M	National (Target)	Trend
Inpatient – Response Rate	Nov-22	25.1%	29.8%	20.0%	
Inpatient Recommended	Nov-22	91.0%	95.0%	94.0%	
Inpatient Not Recommended	Nov-22	60.0%	3.0%	3.0%	
A&E – Response Rate	Nov-22	18.0%	16.4%	9.8%	
A&E Recommended	Nov-22	60.0%	74.0%	75.0%	
A&E Not Recommended	Nov-22	29.0%	18.0%	17.0%	

Section VII: NWS – Paramedic Emergency Services (PES) Summary

Data Source: Provider Level (NWS)



Cheshire and Merseyside

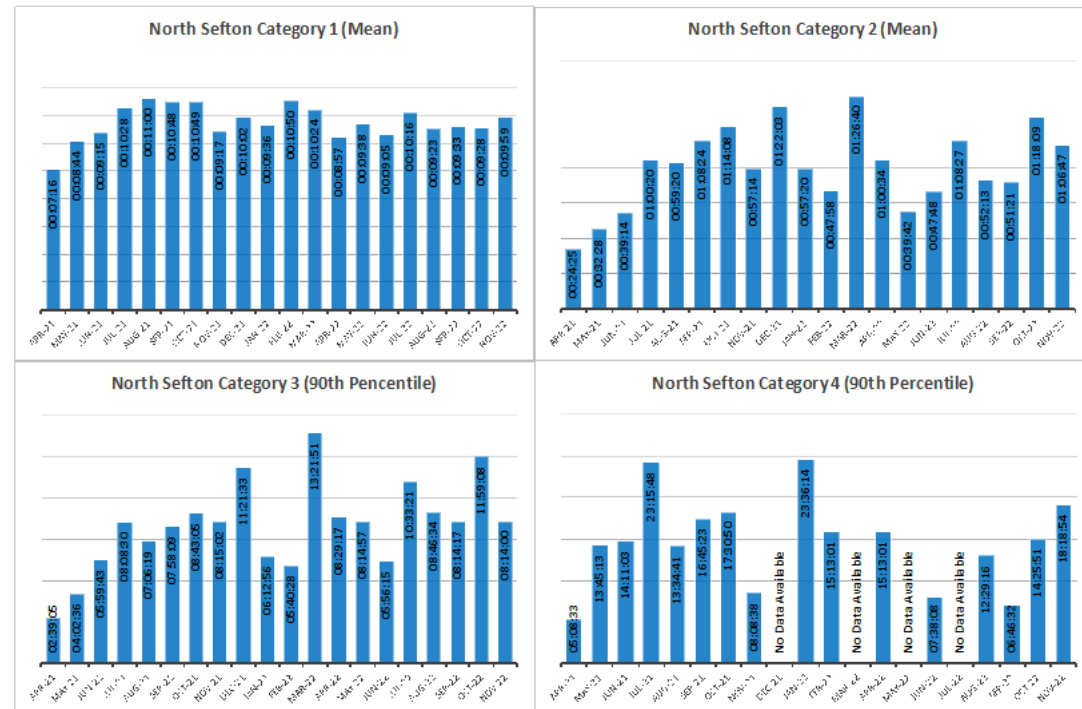
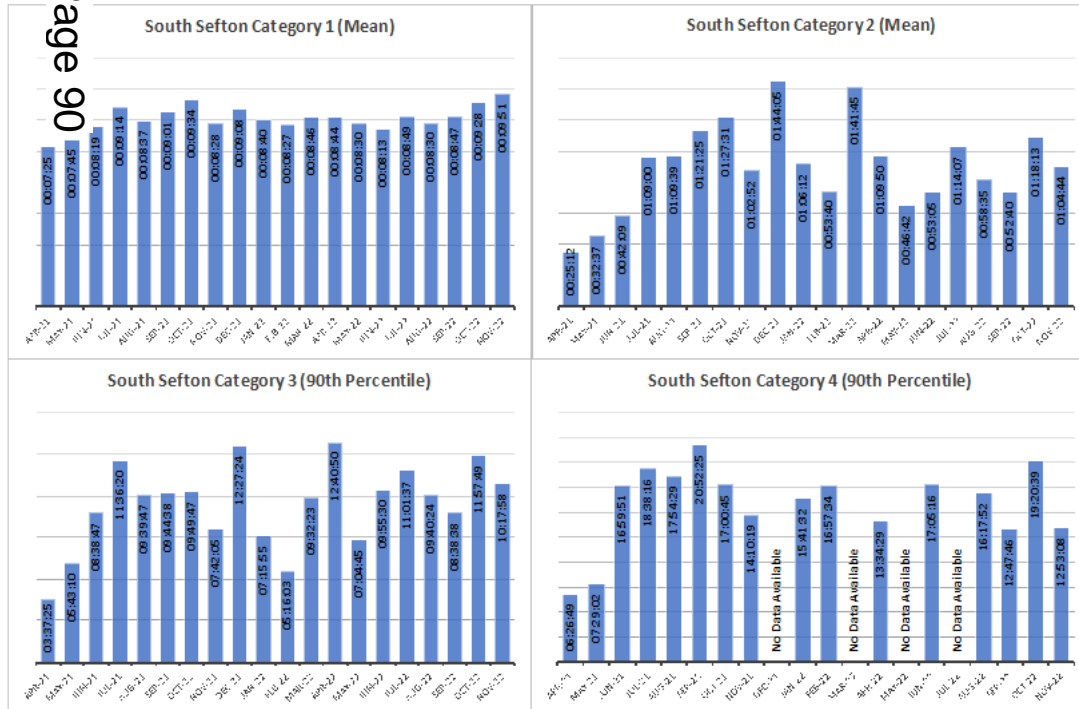
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Dashboard

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

Nov-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	00:09:51	01:04:44	10:17:58	12:53:08
North Sefton	00:09:59	01:06:47	08:14:00	18:18:54
NWS	00:08:53	00:44:16	08:22:53	09:10:29
Risk	▲	▲	▲	▲
Data	Published	Published	Published	Published

Performance Charts



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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	21 February 2023
Subject:	Cabinet Member Reports – January - February 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.

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(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	December 2022 - January 2023

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

Adult Social Care continues to prepare for the introduction of the new National Assurance Framework which will be introduced in April 2023. The final report from the service’s Local Government Peer Review was presented to Cabinet in November and Overview and Scrutiny Committee in January, along with an action plan to address any areas required for strengthening. Regular update reports on progress will be provided to Committee for assurance.

The Department of Health and Social Care (DHSC) has recently provided a final draft of the planned assurance framework, whilst the Association of Directors of Adult Social Services (ADASS) have provided further guidance to support preparation including a self-assessment proforma and recommendations to ensure robust corporate oversight and governance. The Executive Director has recently taken an update on progress to the Executive Leadership Team and a new Executive oversight group will be formed shortly, alongside an internal and external reference group. Ensuring a whole Council approach to being “assessment ready” is fundamental to the success of this preparation.

An update from CQC has been issued at the end of November 2022 in relation to the proposed assurance framework, which includes further developments to the framework, including the introduction of an additional quality statement. This is within the Working with People theme and is to capture “Equity in experience and outcomes”.

Workshops with Adult Social Care staff were held throughout November and December 2022 to provide an update on what the National Assurance Framework will mean for staff and the service. Groups discussed the four themes: Working with People, Providing Support, Ensuring Safety and Leadership, and staff input was captured around what is working well and identified suggested areas for development. The workshops have been well received and feedback will be included in plans for National Assurance preparation. Further workshops are currently being planned for February/March 2023 in order to ensure the workforce are fully engaged in the process.

Progress to date in relation to the themed areas include:

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Working with People – engagement with Healthwatch to progress collation of people’s views with lived experience; the customer journey approach to embed personalisation and

strengths-based practice, including lessons learnt from complaints, case files audits, etc; and a task and finish group has been established to scope numbers and resources needed to establish a specialist Learning Disability Team.

Providing Support – review of direct payment provision and processes has commenced including how to take forward recommendations from the internal audit completed; and the market position statement is to be refreshed.

Ensuring Safety - the transition of safeguarding work to area teams has commenced and this is being carefully monitored as work to formally establish the Safeguarding Hub progresses.

Leadership - policy and strategy audit completed, and policies that require updating are now being progressed. An ASC strategy will also be developed.

2. Integration and National Policy Update

2.1 Sefton Partnership Maturity

The latest review meeting with the Cheshire and Merseyside Integrated Care System senior leaders was held on the 24th of January. There was positive feedback on work with Primary Care which will be developed in a strategic document. Management of those patients who are ready for discharge was cited as positive also and recognition that this remains a very challenging area for Health and Social Care. Further work with the Northwest Ambulance Service and the 111 service is needed still although there was recognition that the relationships across the Sefton partnership are exceptionally strong. Sefton is achieving a good patient experience through good quality outcomes-based commissioning and transformation and there is good evidence of this in Sefton. The next meeting will focus on our Partnership priorities.

2.2 Integrated Care Teams Development

A joint workshop with ASC staff (frontline practitioners, lead practitioners and team managers) and current Integrated Care Co-ordinators (MerseyCare Colleagues) has been held in January 2023. This workshop was to review the approach, what is working well and what changes need to be made to make a difference. All agreed that the approach has helped all to understand roles and responsibilities, that the Multi-Disciplinary Team (MDT) meetings held work well, and that the roll out of the ICT working in the North, especially in relation to support of the care home market, throughout Covid and the pace at this was introduced was exceptional. As a result of the initial workshop held, further workshops will now be organised to take this area of work forward. There is a need to look at how a consistent approach is embedded within North and South Sefton, given the MDTs have different formats across Sefton Place, as well as who attend these and whether this needs to include other disciplines. The workshops also identified the need to consider how this work can link to the locality huddle approach within communities to enhance this method of working, with an aim of holding a stakeholder event whereby engagement with residents of Sefton can be undertaken to develop understanding of the

Integrated Care Team working, and what residents want from this within their local community. As a result of the workshop, strategic priorities were also agreed in relation to exploring use of estates, where staff can be co-located in terms of MDT meetings, and how to progress shared IT systems. This is a crucial area of work to progress the Sefton partnership delivery and help Sefton to realise the benefits of Integration.

3. Life Course Commissioning

Key focuses for Adult Social Care Commissioning include the following:

3.1 Domiciliary Care

As previously reported, there is a new tender set to be published in February 2023 for a new service to be mobilised by August 2023. This new service will seek to meet the current challenges being experienced throughout the care market.

Further work has taken place with Healthwatch Sefton to ensure that the service specification and model of service reflects findings of a recent survey that they conducted with Service Users.

Capacity issues within the domiciliary care market remain, in part, due to factors such as workforce recruitment, retention, and an increased acuity of the people being referred, however we are seeing an improved position with respect to the number of people in the community awaiting a package of care.

Adult Social Care received additional funding from Central Government and has used a high proportion of this to increase fee rates paid to care providers to further support them with addressing these issues.

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 taking place on establishing similar capacity in the South of the Borough.

Linked to Domiciliary Care and wider strategic aims of supporting more people in their own homes, work is taking place on seeking to expand the Reablement Service.

3.2 Day Opportunities

We have recently published the outcome of our consultation on Day Opportunities and have worked to co-produce the specification in three lots which look to support service users with a more flexible community-based offer.

Work is taking place on finalising arrangements for a procurement exercise.

3.3 Supported Living

Work is taking place on utilising the current LCR Flexible Purchasing System to procure services. An associated report will be submitted to Cabinet. A public consultation on the future model of Supported Living closed on the 29th of January and a report is being finalised.

3.4 Care Homes

Engagement with the market is ongoing an online survey for Providers to complete was conducted, however response rates were low, so further engagement is required. The survey was an opportunity for care homes to submit information on details such as changes in demand for their services and cost pressures such as increases to utility bills.

We continue to engage regularly with Care Homes through Strategic Partnership and Finance Forum meetings.

Market analysis is taking place, including contacting care homes to get more detailed information on bed vacancies and top-up fees in order to assess the viability of current and proposed fee rates and the ability of Adult Social Care to make placements at its standard contracted fee rates. At present there are issues in terms of care homes requesting additional funding to meet Service User needs and either starting to levy or increasing their top-up fees. Providers are reporting issues with increased staffing costs and other cost pressures such as those related to significant utilities cost increases.

Evaluations of bids received from care homes for Capital Improvement funding are to be evaluated and work is also taking place on awarding grants to care homes for Digital transformation.

3.5 Fee Rates and Cost of Care Exercises 2023/24

Work is taking place to formulate and agree 2023/24 fee proposals. Once agreed, consultation with Provider markets will then commence.

Sefton Council, as with all other Local Authorities, are required by the Department of Health and Social Care to publish their Fair Cost of Care reports for Care Homes and Domiciliary Care by 1st February. Once published, further engagement with Providers will take place, including highlighting issues with the data submitted by Providers.

There is no requirement / commitment for Local Authorities to immediately implement the outcomes of the report and their publication is separate to 2023/24 fee proposal exercises.

3.6 Winter Planning

Following the announcement of national funding, work has taken place on the implementation of various schemes, including:

- Providing additional block-booked Domiciliary Care capacity to support with hospital discharges, reducing waiting times.
- Creating a 'Discharge Hub' with a greater Social Work and Occupational Therapy capacity.
- Expanding the Intermediate Care / Transitional care home bed capacity.
- Providing support through the Voluntary Sector to meet other Social Care and Housing needs.

- Providing further support to Market Management and strengthening brokerage offers, assisting to find the most appropriate service quicker.
- Helping providers to support people with higher needs and acuity.

There has been further national funding announced relating to the purchasing of care home placements for people being discharged from Hospital and arrangements for this are being progressed, including seeking expressions of interest from care homes that may have beds available.

3.7 Charging Reform

The Autumn Statement of 17th November 2022 included an announcement that there would be a delay in rolling out Adult Social Care Charging Reform from October 2023 to October 2025. The government has stated that it remains committed to delivering the adult social care charging reforms and supporting people drawing on care and support. The delay covers implementation of the extended means test, a lifetime cap on personal care costs and new arrangements for self-funders.

The delay will give local authorities additional time to prepare for the rollout of these reforms. Local plans to support implementation of the Charging Reform are being reviewed in light of no additional funding being provided as part of the government budget settlement. System development to support this area of work is now being considered.

4. Adult Social Care Budget

Monitoring of the 2022/23 Adult Social Care budget for December continued to reflect a forecast of a potential deficit of £1.4m based on a number of assumptions about expenditure and income for the remainder of the year.

There are ongoing pressures relating to increased package costs (increases in areas including Residential/Nursing and Supporting Living), however increases in income from client contributions and joint funded packages will help to mitigate and the net position is currently forecast as a deficit of £3.7M.

Staffing remains 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 will offset some of the pressures on the ASC forecast position.

Hospital Discharge Funding (national allocation £500M) has been allocated to Sefton (£1.250m) and this will assist with care package costs following discharge and may mitigate against costs currently included in the forecast. An additional allocation of Hospital Discharge (national allocation £200M) has recently been allocated to Sefton Place and will assist with placement costs for new discharges for four weeks.

There remain a number of uncertainties around the assumptions that may impact on this position before the year-end. The use of additional temporary funding may improve the current deficit. ASC has a programme of savings as part of Transformation and Demand Management which are reviewed regularly. Also, the introduction of a new budget

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monitoring system across Sefton will allow for budget managers increased oversight of the current and forecast financial position.

5. Adult Social Care Complaints, Compliments and MP Enquiries

Between December 2022 and January 2023, Adult Social Care have received fourteen complaints to date – a decrease of 26% from the previous two months. For these complaints, 86% were resolved upon receipt, responded to within the twenty-five working day target or remain within this timescale.

Two of the complaints related to decision-making, one related to financial charges and funding, nine complaints related to the quality of the service we provide – this includes communication issues and delays. We also received one complaint about the information and advice offered to a family and the final complaint concerns staff attitude which remains under investigation.

For the complaints which have been concluded we upheld 40% of these, either partially, or in full. The reasons for complaints being upheld were as follows:

- Delays in progressing cases.
- Delays in communication.
- Failing to complete regular reviews of the support plan.

In the same period, Adult Social Care received twenty-two compliments and nine MP enquiries.

Oversight of complaints is maintained via the Senior Leadership Team Meeting and in one-to-ones with the Assistant Director for Adult Social Care and Health and Executive Director. Learning and is presented via the Practice Forum so lessons learned from complaints can be shared with frontline practitioners, as well as senior managers. During Q4 there are plans to further strengthen this learning and quality improvement approach across the service and we are considering how we can incorporate rapid learning reviews into our consideration of complaints.

We received a Final Decision from the Local Government and Social Care Ombudsman which found fault with the Council as we had completed an assessment but had been unable to identify a domiciliary care provider to deliver the support. We agreed to apologise to the complainant and pay a financial remedy recognition of the distress caused to the complainant.

At present we are awaiting the Final Decisions from the Ombudsman in relation to two complaints about the Council being unable to identify care providers to deliver the assessed support for two adults.

The Ombudsman's Equal Justice focus report highlights how the Ombudsman will now consider everyday human rights in its future decisions. This report has been shared at the Quality Improvement Forum and the Principal Social Worker is reviewing to ensure compliance with recommendations.

6. Principal Social Worker Update (PSW)

Preparations are taking place for World Social Work Day which will be held on Tuesday, 21st March 2023. This year's theme is Respecting Diversity through Joint Social Action.

Working collaboratively with colleagues from Children's Services and the Learning and Organisational Development Team plans are in place to hold a market event at Bootle Town Hall to celebrate the many facets of social work practice. So far, we have twenty-two tables with different teams. These consist of internal teams and social network groups and external agencies that are both Children and Adults focused. This event is an opportunity for Social Workers across the Council to come together, peer network and learn more about other teams and how they fit with their own teams and role.

The event will also show Research in Practice Webinars linked to diversity, inclusion, and social action – with a timetable of events so people can dip in and out as they wish. These will be relevant to the theme of World Social Work Day (Respecting Diversity through Joint Social Action). The event will take place between 1-4pm.

7. 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:

Total Care Home admissions in December remained below the annual average. The rate of admission for those aged 18-64 stayed high, and we remained in the bottom quartile.

The rate of admission for over 65s continued the downward trajectory, keeping us outside of the bottom quartile.

Reablement numbers remain low, although rate of clients over sixty-five receiving reablement saw a small increase in December. The impact of the expansion of the Rapid Response service run by New Directions is yet to be seen, recruitment commenced at the end of August. The success of reablement remained a positive with just over 90% of clients 65+ discharged from hospital remaining at home ninety-one days after receiving reablement services.

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. The proportion of carers receiving a direct payment continued to increase. December saw a highest figure for this metric in the last twelve months. Work done by the Carers Centre to distribute more direct payments looks to be having a small impact on the measure. Further work needs to be done to reach the top quartile with all carers needing to have received a direct payment to hit this target.

Employment:

Sefton continues to rank in the top quartile for the proportion of adults in contact with secondary mental health services in employment, both in the Northwest and nationally. A very small increase was noted in December for the proportion of adults with learning

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APPENDIX A

disabilities going into paid employment. Sefton remained just outside of the bottom quartile in the Northwest but in the bottom quartile nationally.

Housing:

Sefton compares well to other local authorities on clients in settled accommodation. Just under 90% of clients in contact with secondary mental health are living independently. Over 88% clients with learning disabilities are living in their own home or with their family. This puts us in the top quartile in England for each of these metrics.

Safeguarding:

The number of safeguarding referrals remaining open at month-end remained an issue, although the number reduced in December and reached the lowest point in last six months.

The team continued to perform well in the timely handling of safeguarding contacts and referrals with just over 96% of contacts resolved within seven days and 67% of referrals resolved within twenty-eight days. Sefton also continued to perform well in Making Safeguarding Personal with nearly 98% of those expressing a preferred outcome having that preference either fully or partially met.

CABINET MEMBER UPDATE		
Overview and Scrutiny Committee (Adult Social Care) – 21 February 2023		
Councillor	Portfolio	Period of Report
Ian Moncur	Health and Wellbeing	Dec 22 & Jan 23

Public Health

0-19 Children’s Services Re-commission

On 23rd June 2022 Cabinet approved the request for the re-procurement of the 0-19 Healthy Child Programme (up to 25 with SEND) for commencement on 1st April 2023; to run for a period of 5 years, with the option to extend for a further two years. The Director of Public Health was authorised to conduct a Light-Touch Regime procurement exercise and given delegated authority, in consultation with the Cabinet Member for Health and Wellbeing, to award the contract to the highest scoring bidder resulting from the procurement and to award any extension thereof.

On 20th September 2022 the invitation to tender was advertised on the CHEST, in the FTS and on Contracts Finder, closing on 18th October 2022. Financial provision of £6,029,312 per annum was allocated for the re-procurement of the service from the Public Health 0-19 Healthy Child Programme Budget.

Evaluation of tenders involved a two-staged process; a stage 1 pass / fail selection questionnaire, and at stage 2 the bid was evaluated against the award criteria of quality (70%), price (10%), social value (10%) and presentation / interview (10%).

At the time of presenting a verbal update to Cabinet Member, although the interview stage had been completed, the appointed panel felt that it was necessary to ask some further clarification questions via the chest. Panel were in the process of publishing the clarification questions, with a response deadline of 5th December 2022, after which discussions would be held regarding how to progress the procurement process.

Drugs & Alcohol Services Re-commission

On 23 June 2022 Cabinet approved the request for the re-procurement of a Young People and Families Substance Use Service. The Director of Public Health was authorised to conduct a Light-Touch Regime procurement exercise and given delegated authority, in consultation with the Cabinet Member for Health and Wellbeing to award the contract to the highest scoring bidder. On 15/09/22 the invitation to tender was advertised on the CHEST, in the FTS and on Contracts Finder.

Financial provision of £354,350 per annum was allocated for the re-procurement of the service from the Public Health Substance Use Budget.

Following the completion of the evaluation exercise it was recommended and agreed to award the contract for Young People and Families Substance Use Service to Change, Grow, Live Service Ltd (CGLS Ltd).

The service is now in the mobilisation stage with planning in place for the safe transfer of services and clients for commencement of the new contract on 1st April 2023; to run for a period of 5 years with the option to extend for a further two years.

Young Person Living Well Sefton Rename

The briefing provided an update relating to the work that had been undertaken to ascertain the name for the Children and Young Peoples Integrated Wellness Service (CYPiWS), 'Happy 'N' Healthy Sefton'.

The CYPiWS consists of a range of public health commissioned partners working collaboratively to improve children and young people's health and wellbeing by promoting a holistic approach, whilst reducing health inequalities. Partners include 0-19 Healthy Child Programme, Kooth, Active Sefton, We Are With You, ABL and sexual health, with the CYPiWS core team acting as the central point to co-ordinate integrated working, as well as providing specialist advice, easy navigation into other services, training, and relationship management with wider partners.

The team wanted to ensure that the name of the service resonated with those that would access it. As a result, CYPiWS sought the views and feedback of children and young people.

To do so, the CYPiWS team planned to engage with 50 children and young people across different demographics within Sefton by arranging to attend venues accessed by groups and deliver engagement sessions to gather their views and feedback. A questionnaire was devised, which described the service, its aims, and gave a list of name suggestions that the groups were able to rate, in addition to the option to add their own suggestions.

Through partnership work with Sefton CVS, the first engagement session took place with Sefton's Young Advisors, during which the questionnaire was piloted to ensure that it was user friendly. Further groups were then arranged, including Thornton's Youth Participation group at Thornton Family Wellbeing Centre, Brunswick Youth Club, Parenting 2000 in Crosby and Parenting 2000 in Southport.

57 children and young people provided feedback on the name for the service, including 39 males and 18 females, with an age range of 10-20 years.

After completing all engagement sessions, the name suggestions included Living Well Sefton, Growing Well, Happy 'N' Healthy, Be Healthy Hub, Wellness Matters

and WISH (Wellness Integrated Services Hub). Happy 'N' Healthy was the most popular name, which has strong alignment with the Children and Young People's Plan.

The Team now plan to share the name with all public health commissioned partners, in addition to wider stakeholders, including Early Help, Children's Social Care and Sefton CVS. A communications and marketing plan will be created, which will be used to launch the service online with members of the public and to create web content in order to raise awareness amongst families, children and young people. The service will also reach out to wider health colleagues and settings (e.g. schools) who will be able to signpost children, young people and families into the service for support with their health and wellbeing.

Mental Health We're Here Campaign

In January 2023, a presentation detailing the signposting campaign "We're Here" was presented to myself at Cabinet Member Briefing meeting. The presentation gave examples of the types of assets and branding intended to be used as part of this multi-agency cross partnership campaign. It is intended to be launched in the Spring of 2023, with accompanying radio and digital promotional campaigns to accompany it. It was agreed an update on progress and reach of the campaign would be brought back to Cabinet Member Briefing meeting after the campaign had been locally embedded in Sefton.

Obesity Update

Reason for Briefing

- Present the impact of the cost-of-living crisis on access to healthy food and opportunities to be physically active, which is likely to be impacting on healthy weight.
- Provide relevant information to highlight how this impact will not be felt equally across society, with lower income households facing mounting challenges when it comes to managing finances.
- Present local successes, challenges and barriers which the obesity task force teams are currently managing.
- Make recommendations as required in the context of the current cost of living crisis and its impact on making healthy food choices.

Context

The report focused on the current context and how the cost-of-living crisis is impacting on healthy weight and included issues such as access to healthy food and food choices, the impact on a household's ability to prepare healthy and nutritious food and provide access to physical activity. The report outlined how, when budgets are tight, households are forced to make decisions on food choices based on price rather than nutritional value, and also highlighted an issue around food preparedness and cooking methods detailing households are opting for cold food or using microwaves to cook or heat food.

Successes & Challenges

The report presented the successes and challenges of the 3 operational obesity task groups in Sefton working across the whole system and are represented by partners across communities, council, education, housing, NHS and the VCF. A summary and update from each of the task groups is available in the full report.

Recommendations

In summary, the report considered the complexity and impact of the cost-of-living crisis in Sefton related to the impact on overweight and obesity. Recommendations to manage obesity and overweight within the current cost of living crisis were included as below:

- The obesity and overweight action plan be redeveloped to ensure it is realistic and fit for purpose within the current cost of living crisis and linked to the Sefton childhood poverty strategy and WRAP agenda.
- Work with NHS colleagues to ensure the commitments included in the Cheshire and Merseyside Health and Care Partnership embeds movement, physical activity and sport across the Cheshire and Merseyside health and care system.
- All opportunities to influence healthier choices will be maintained and our providers are working at a local level to do this, however we must be both realistic and supportive where families are struggling to make the best food and exercise choices.
- Work with providers to ensure consideration is given regarding the messaging and focus of support in relation to healthy weight to ensure that it considers the cost-of-living crisis and opportunities to eat healthily and exercise more is both realistic and achievable.
- Task groups continue to work with Food Active/ Health Equalities Group who are lobbying national government to work with local authorities to implement measurable plans to improve the uptake of benefits such as Pension Credit and the Healthy Start Scheme. Food Active are also lobbying government to consider immediately extending Free School Meals to the 800,000 children living in poverty who are currently not eligible.

Public Health Risk Register

I received an update, the only item of note was the removal of the risks associated with the 0-19 commission, as this has been completed and the new contract awarded.

Leisure Update

Leisure

Membership levels across the six Active Sefton Leisure Centres reduced slightly between October – November 2022, with a fall of 141 members, taking the total to 11,931 as of 30th November. Due to the cost-of-living crisis, membership figures are

being monitored, as residents are making tougher decisions regarding their leisure spend.

Projects undertaken in the Centres have included:

- Essential works to the leisure pool railings and steelworks at Bootle Leisure Centre, with the pool re-opened as scheduled. During the close down period, repairs were also carried out in the changing rooms, and disco lights were also installed to the leisure pool to add a unique selling point for parties.
- Meetings have begun between the architects, mechanical and electrical engineers at Crosby Lakeside to start planning the Bunk Barn. Work is planned to commence in early February, and it is hoped that the scheme will be completed early September 2023.
- Completion of all electrical work is still to be concluded at Splash World, with a new reported mid – January completion date proposed, after which further works will be completed led by Leisure’s Management Team. Splash World toilets have been refitted with new cubicles, toilets and hand basins and new replacement showering facilities have been installed. The Café is currently under refurbishment too, with new cooking equipment installed and new seating and tables currently onsite. The Splash World website is currently undergoing improvements and will be launched early next year.
- The Team is still continuing to work with ICT on a full audit network and hardware audit as referenced in the last report.

The leisure development officer continues to provide a range of services and programmes across Sefton, delivered by Active Sports, Active Lifestyles and Active Workforce teams.

October half term saw a range of activities provided across the borough through Be Active. Sessions included a Halloween dance camp, Ditch the Stabilisers and football camps delivered in partnership with LFC Foundation, as well as well attended swim and splash sessions at the pools. As part of Operation Banger, the team also delivered Park Nights sessions Monday – Thursday during w/c 24th October and 31st October, in parks identified in partnership with Merseyside Police, Area Coordinators and Green Sefton colleagues.

Recruitment days were held for Aspiring Instructors at the end of November, followed by interviews, although there was less than anticipated interest in the programme. The programme is run in partnership with DWP and Sefton@Work. Through discussions it has been agreed the programme will be delivered on a reduced scale, incorporating one pathway for all participants rather than three. Sessions will also be delivered by Sefton Community Learning Service to support participants with interview skills and CV writing.

The Active Lifestyles Team continue to oversee the following Public Health commissioned Services: Exercise Referral (GP / Health Professional referral), NHS

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Health Checks (self-referral), Weigh Forward Weight Management Programme (self-referral), and Falls Prevention – Active Ageing (GP / Health Professional referral). All programmes have seen an increase in referrals, with operational challenges overcome with the recruitment of two members of staff to support with the administration of the services.

The Active Sports team continue to deliver children and young people programmes, including the 121 service in the community and secondary schools to improve the mental wellbeing through physical activity. The team also oversee the children's weight management programme, Move It, and work with school nurses and partners to promote the programme. The School Health team have called parents and carers of any children who were classified as overweight or very overweight as part of the NCMP, which has led to a significant increase in referrals. To combat this, community classes have continued to be provided at Bootle Leisure Centre, Netherton Activity Centre and Litherland Sports Park as part of a 6-week group programme.

Active Workforce continue to deliver a comprehensive staff wellbeing offer to a range of organisations. A key piece of work has been raising awareness of the menopause. Working in partnership with UNISON, the service is providing support and awareness in all workplaces, with the aim of improving the lives of those going through the menopause by creating more understanding and knowledge across organisations.

Physical Activity Strategy Update

As part of the development of a new physical activity strategy for Sefton, a procurement process has been completed, with external consultants Miova appointed. Initial meetings have been held in December to discuss the vision of the strategy and the scope of work.

The new strategy will align to Sefton Place and existing work such as Start Well, Live Well and Age Well. It will also compliment other strategies both in the physical activity sector such as Sport England's 'Uniting the Movement', the new Cheshire & Merseyside 'All Together Active' strategy and MSP 'Moving Together', and recently released Sefton strategies such as the new Child Poverty strategy, as well as aligning to the Health & Wellbeing strategy.

The strategy will involve consultation and engagement with the public, service users and stakeholders, and as such is scheduled for Consultation and Engagement Panel on 10th March, during which Miova will be presenting the proposed plan. It will involve stakeholder events to engage with a range of organisations, gaining feedback and shaping the strategy with quantitative and qualitative data. The findings will then be reported back to the Consultation and Engagement Panel at their 15 July meeting, with the strategy launched later in the year.

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Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	21 February 2023
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;
- receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee;
- receive an update on the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board;
- receive an 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;
- (2) items for pre-scrutiny from the Key Decision Forward Plan which fall under the remit of the Committee, as set out in Appendix B to the report, be considered and any agreed items be included in the work programme referred to in (1) above;
- (3) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted;

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- (4) the update on the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board, be noted;
- (5) the recent activities undertaken by Healthwatch Sefton, as outlined in Appendix C 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

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. 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

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

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Appendices:

The following appendices are attached to this report:

- Appendix A - Work Programme for 2022/23;
- Appendix B - Latest Key Decision Forward Plan items relating to this Overview and Scrutiny Committee;
- Appendix C - Update of recent activities undertaken by Healthwatch Sefton TO FOLLOW

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 of the Committee. The Work Programme has been submitted to each meeting of the Committee during 2022/23 and updated, as appropriate.
- 1.3 Previous suggestions for formal agenda items have included the following:
 - Southport and Ormskirk Hospital NHS Trust, for general update;
 - NHS Cheshire and Merseyside Place Plan;
 - update on primary care estate strategy; and
 - a full report on the Cheshire and Merseyside Cancer Alliance.
- 1.4 **The Committee is requested to comment on the Work Programme for 2022/23, as appropriate, and note that any additional items may be submitted to future meetings of the Committee during the 2023/24 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 31 January 2023, is attached at **Appendix B** for this purpose. For ease of identification, items listed on the Forward Plan for the first time appear as shaded.
- 2.6 There is just one item within the current Plan that falls under the remit of the Committee on this occasion, namely:
- Adult Social Care - Supported Living, Strategic Approach and Commissioning
- 2.7 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.
- 2.8 **The Committee is invited to consider items for pre-scrutiny from the Key Decision Forward Plan as set out in Appendix B to the report, which fall under the remit of the Committee and any agreed items be included in the Work Programme referred to in (1) above.**

3. LIVERPOOL CITY REGION COMBINED AUTHORITY OVERVIEW AND SCRUTINY COMMITTEE

- 3.1 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).
- 3.2 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.
- 3.3 In accordance with the above decision, information on the LCRCA O&S is set out below.
- 3.4 **Role**

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

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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.

3.5 **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.

3.6 **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.

3.7 **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.

3.8 **Meetings**

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

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

Latest Meeting – 19 January 2023

The latest meeting of the LCRCAO&S was held on 19 January 2023 and the Committee considered the following items:

- Combined Authority Budget 2023/24

- Corporate Plan 2021-24; Quarter 2 (July to September) 2022-23 Performance Update
- Fair Employment Charter: Implementation and Next Steps
- Appointment to the Audit and Governance Committee

The next meeting of the LCRCOA&S will be held on 1 March 2023. At the time of drafting this report, the agenda for the meeting has not yet been published. Matters discussed at the meeting, and the following meeting scheduled for 19 April 2023, 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

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

4. CHESHIRE AND MERSEYSIDE INTEGRATED CARE SYSTEM JOINT HEALTH SCRUTINY COMMITTEE

- 4.1 On 1 July 2022 the Health and Care Act required the Cheshire and Merseyside Integrated Care Board to commence operation.
- 4.2 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 Councillor Brodie-Browne and Councillor Lunn-Bates.
- 4.3 Knowsley MBC is acting as secretariat to the Joint Cheshire and Merseyside Scrutiny Committee and agendas and Minutes of formal meetings of the Joint Scrutiny Committee are included on their website.
- 4.4 The Inaugural Meeting of the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee was held on 11th November 2022, in Huyton and the following agenda items were considered:
- Appointment of Chairperson of the Committee for 2022/23
 - Appointment Of Vice-Chairperson of the Committee for 2022/23
 - Joint Health Scrutiny Committee Arrangements and Adoption of Rules of Procedure
 - Cheshire and Merseyside Integrated Care System Update Report
 - Joint Health Scrutiny Committee Work Programme for 2022/23
- 4.5 Councillor Michelle Sweeney of St. Helens Council was appointed as the Chair of the Joint Health Scrutiny Committee for 2022/23 and Councillor Kate Cernik of Cheshire West and Chester Council was appointed as the Vice-Chair.
- 4.6 Details of the meeting of the Joint Health Scrutiny Committee can be found via the following link:

[Browse meetings - Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee - Knowsley Council](#)

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4.7 The next meeting of the Joint Health Scrutiny Committee will be held on 10 March 2023, 2.00 p.m., in the Council Chamber, Municipal Buildings, Huyton.

4.8 The Committee is requested to note the update on the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee.

5. HEALTHWATCH SEFTON

5.1 At the time of drafting this report, an update of recent activities undertaken by Healthwatch Sefton is anticipated to be provided as **Appendix C** to this report, for information.

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



**OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)
WORK PROGRAMME 2022/23**

Tuesday, 21 June 2022, 6.30 p.m., Town Hall, Bootle		
No.	Report/Item	Report Author/Organiser
1.	NHS Cheshire and Merseyside, Sefton - Update Report	Laura Gibson/Lyn Cooke
2.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Jan Leonard/Tracy Jeffes/Laura Gibson
3.	Public Health Outcomes Framework	Helen Armitage
4.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Debbie Campbell
5.	Work Programme Update	Debbie Campbell

Tuesday, 6 September 2022, 6.30 p.m., Town Hall, Southport		
No.	Report/Item	Report Author/Organiser
1.	Domestic Abuse Update	Steven Martlew
2.	Sefton Partnership Development Update	Eleanor Moulton
3.	Overview & Scrutiny Mental Health Review	Eleanor Moulton
4.	NHS Cheshire and Merseyside, Sefton - Update Report	Laura Gibson/Lyn Cooke
5.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Jan Leonard/Tracy Jeffes/Laura Gibson
6.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Debbie Campbell
7.	Work Programme Update	Debbie Campbell

Tuesday, 18 October 2022, 6.30 p.m., Town Hall, Bootle		
No.	Report/Item	Report Author/Organiser
1.	Liverpool University Hospital NHS Foundation Trust - Update	Dr. Clare Morgan, Director Strategy, LUHFT
2.	Safeguarding Update	E
3.	NHS Cheshire and Merseyside, Sefton - Update Report	Laura Gibson/Lyn Cooke
4.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Jan Leonard/Tracy Jeffes/Laura Gibson
5.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Debbie Campbell
6.	Work Programme Update	Debbie Campbell

Tuesday, 3 January 2023, 6.30 p.m., Town Hall, Southport		
No.	Report/Item	Report Author/Organiser
1.	Southport and Ormskirk Hospital NHS Trust	Debbie Campbell/ Anne-Marie Stretch/Lesley Neary
2.	Paediatric Radiotherapy Services	Debbie Campbell/ North West Specialised Commissioning Team – NHS England
3.	The Cost-of-Living Crisis	Deborah Butcher/Margaret Jones/Eleanor Moulton
4.	Winter Plan	Deborah Butcher/Eleanor Moulton
5.	Adult Social Care Local Government Association Peer Review	Sarah Alldis
6.	National GP Access Survey	Jan Leonard
7.	NHS Cheshire and Merseyside, Sefton - Update Report	Laura Gibson/Lyn Cooke
8.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Jan Leonard/Tracy Jeffes/Laura Gibson
9.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Debbie Campbell
10.	Work Programme Update	Debbie Campbell

Tuesday, 21 February 2023, 6.30 p.m., Town Hall, Bootle		
No.	Report/Item	Report Author/Organiser
1.	Cheshire and Merseyside Cancer Alliance	Jon Hayes, Managing Director, Cheshire and Merseyside Cancer Alliance
2.	Southport and Ormskirk Hospital NHS Trust - Next Steps in Proposed Partnership	Anne-Marie Stretch, Managing Director, Southport and Ormskirk Hospital NHS Trust
3.	Safeguarding Update	Michelle Creed, independent Chair of the Safeguarding Adults Board
4.	Sefton New Directions - 2021/22 Outturn Review of Council Wholly Owned Companies	Deborah Butcher
5.	Adult Social Care Performance Update	Sarah Aldis
6.	Liverpool Clinical Services Review - Stakeholder Update	Debbie Campbell
7.	NHS Cheshire and Merseyside, Sefton - Update Report	Laura Gibson/Lyn Cooke
8.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Jan Leonard/Tracy Jeffes/Laura Gibson
9.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Debbie Campbell
10.	Work Programme Update	Debbie Campbell



SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

FOR THE FOUR MONTH PERIOD 1 MARCH 2023 - 30 JUNE 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, Oriol 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 13

APPENDIX B

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
Adult Social Care - Supported Living, Strategic Approach and Commissioning	Eleanor Moulton eleanor.moulton@sefton.gov.uk

SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	<p>Adult Social Care - Supported Living, Strategic Approach and Commissioning</p> <p>The report sets out the strategy for re-commissioning of Supported Living services. Supported living is a combination of suitable accommodation with some form of care and support on site or as in reach.</p> <p>In Sefton, Adult Social Care spend was approximately £24.6m per annum for the year 22/23 on supported living services for people with disabilities in order to support them to live independently in the community rather than in a residential setting.</p> <p>The proposed approach contained within this report is intended to promote independence for the residents of Sefton and in so doing support them to live the life of their choosing within their local communities.</p>			
Decision Maker	Cabinet			
Decision Expected	9 Mar 2023			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Lead Director	Executive Director of Adult Social Care and Health			
Persons/Organisations to be Consulted	Cabinet Member for Adult Social Care			
Method(s) of Consultation	The report reflects work of the Strategic Commissioning Team with the Liverpool and City Region Framework team, Procurement, and Legal			
List of Background Documents to be Considered by Decision-maker	Adult Social Care - Supported Living, Strategic Approach and Commissioning			
Contact Officer(s) details	Eleanor Moulton eleanor.moulton@sefton.gov.uk			