

# Public Document Pack

**Sefton Council** 

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

DATE: Tuesday 15 October 2024

TIME: 6.30 p.m.

VENUE: Committee Room - Bootle Town Hall, Trinity Road, Bootle, L20 7AE

## Member

Cllr. Laura Lunn-Bates (Chair)  
Cllr. Greg Myers (Vice-Chair)  
Cllr. Mike Desmond F.R.C.A.  
Cllr. Helen Duerden  
Cllr. Janet Grace  
Cllr. Sam Hinde  
Cllr. Gareth Lloyd-Johnson  
Cllr. Daniel McKee  
Cllr. Dave Neary, PhD  
Cllr. Dr. John Pugh  
Ms Diane Blair, Healthwatch  
Mr. Brian Clark OBE, Healthwatch

## Substitute

Cllr. Carol Richards  
Cllr. Michael Roche  
Vacancy  
Cllr. Steve McGinnity  
Cllr. Veronica Webster  
Cllr. Danny Burns  
Cllr. Iain Brodie - Browne  
Cllr. Sonya Kelly  
Cllr. Christopher Page  
Cllr. Iain Brodie-Browne

COMMITTEE OFFICER: Laura Bootland, Senior Democratic Services Officer  
Telephone: 0151 934 2078  
Fax:  
E-mail: [laura.bootland@sefton.gov.uk](mailto:laura.bootland@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 - 10)

Minutes of the meeting held on 3 September 2024

**4. North West Ambulance Service Update Report** (Pages 11 - 16)

Report of the North West Ambulance Service

**5. NHS Cheshire and Merseyside, Sefton - Update Report** (Pages 17 - 22)

Report of the Sefton Place Director, NHS Cheshire and Merseyside

**6. NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard** (Pages 23 - 30)

Report of the Sefton Place Director, NHS Cheshire and Merseyside

**7. Adult Social Care Performance Data Review** (Pages 31 - 44)

Report of the Executive Director - Adult Social Care, Health and Wellbeing (Place Director)

**8. Cabinet Member Reports** (Pages 45 -

Report of the Chief Legal and Democratic Officer

**9. Work Programme Key Decision Forward Plan**

(Pages 59 -  
86)

Report of the Chief Legal and Democratic Officer

This page is intentionally left blank

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

Overview  
& Scrutiny



## OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)

MEETING HELD AT THE BIRKDALE ROOM - SOUTHPORT TOWN HALL, LORD STREET, SOUTHPORT, PR8 1DA  
ON TUESDAY 3RD SEPTEMBER, 2024

**PRESENT:** Councillor Lunn-Bates (in the Chair)  
Councillor Myers (Vice-Chair)  
Councillors Desmond, Grace, Hinde, Lloyd-Johnson, McKee, Neary, Pugh and Doyle

**ALSO PRESENT** Councillor Doyle (Cabinet Member - Public Health and Wellbeing)

### 9. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Moncur (Cabinet Member – Adult Social Care) Councillor Duerden and Diane Blair (Healthwatch).

### 10. 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 concerned remained in the room during the consideration of the item:

Member	Minute No.	Nature of Interest
Councillor Pugh	Minute No. 14 NHS Cheshire and Merseyside - Sefton Place Update	He and his wife are patients at Lincoln House Surgery.

### 11. MINUTES OF THE PREVIOUS MEETING

**RESOLVED:**

That the Minutes of the meeting held on 18 June 2024, be confirmed as a correct record.

### 12. SHAPING CARE TOGETHER PROGRAMME

The Committee received a presentation by the Programme Director, Shaping Care Together, Mersey and West Lancashire Teaching Hospital Trust.

# Agenda Item 3

## OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 3RD SEPTEMBER, 2024

The presentation provided some background information on the “Shaping Care Together” Programme and informed the Committee about the Urgent and Emergency Care Phase, in particular that the Case for Change for this phase was published on 26<sup>th</sup> July.

Rob Cooper, Managing Director, Mersey and West Lancashire Hospital Trust was in attendance to present the information and to respond to any questions from members of the committee.

Members of the committee asked questions/commented on the following:

- If the reasons for services being fragile had been identified.
- What would “better urgent care closer to home” look like in Southport
- The timescale for the proposals for change to be finalised.
- If a public engagement meeting for Southport would be arranged
- Whether the Committee would receive further information on the feedback received from the public meetings being held in September and October.

RESOLVED: That

- (1) the presentation be noted
- (2) the Committee receives a further presentation or report containing details of the feedback received from members of the public following the public engagement meetings being held in September and October.
- (3) a further report be brought to the Committee in early 2025, to present the proposed changes to Urgent and Emergency Care and to enable to Committee to decide if the changes are a substantial variation in service.
- (4) the Committee noted that a Joint Health Overview and Scrutiny Committee would need to be formed between Sefton MBC and Lancashire County Council if both Authorities consider the proposals to be a substantial variation in service.

### **13. 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:

- Southport major incident recovery
- Closure of Lincoln House GP Surgery

# Agenda Item 3

## OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 3RD SEPTEMBER, 2024

Members of the Committee asked questions/commented on the following issues:

- How patients who miss communications about the Lincoln House Surgery closure will be reached.
- If patients would have a choice as to which GP Surgery they were moved to.
- The importance of listening to comments from patients, even though the closure has been confirmed.
- The scale of the response to the Southport incident and how many people were receiving ongoing support.
- The work being done in schools to support pupils affected by the incident.

RESOLVED: That

- (1) the update report submitted by the Sefton Place Director, NHS Cheshire and Merseyside (Sefton) be noted;
- (2) a further report on Lincoln House surgery be submitted to the next meeting;
- (3) further information be circulated to the Committee on the ratio of patients to permanent GP's in Southport; and
- (4) a further report be submitted to the Committee regarding the Southport incident response, to include further information on the work being carried out with Schools.

### **14. 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.

Following the queries raised at the previous meeting regarding the North West Ambulance data, the Committee noted that a representative from North West Ambulance Service would be attending the next meeting to present a report.

RESOLVED:

That the information on Health Provider Performance be noted.

### **15. ADULT SOCIAL CARE ASSURANCE**

The Committee received a presentation by the Assistant Director, Adult Social Care and Health, that provided an update on the preparations for Care Quality Commission (CQC) Assessment. The presentation provided information about:

# Agenda Item 3

## OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 3RD SEPTEMBER, 2024

- The themes the CQC assessed local authorities against
- The notification of assessment for Sefton, received on 24 June 2024
- The CQC would use an anonymised list of 50 cases to gather the lived experiences of people using adult social care.
- Comments gathered during the self-assessment exercise
- Areas of strength noted from the self-assessment exercise
- Areas of focus for the next six months.

Members of the Committee asked questions/commented on the following issues:

- Who made the final decision on an individual requiring residential care
- Strategies used to identify individuals on 'the edge of care'
- Data on people who returned to hospital or long-term care after being sent home
- Intermediate Care and how this was provided.

RESOLVED: That

- (1) the update be noted
- (2) further data be reported to a future meeting on people returning to care.

### **16. 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:

- Southport Incident - Social Work Response
- The Care Quality Commission (CQC) Assurance Update for Adult Social Care
- Strategic Commissioning
- Domiciliary Care
- Sefton New Directions
- Care Homes
- 2025/26 Fee Setting
- Carers Strategy
- Falls Strategy
- Quality Assurance
- Adult Social Care Budget
- Adult Social Care Complaints, Compliments and MP Enquiries
- Quality and Practice



## OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 3RD SEPTEMBER, 2024

- Performance and Key Areas of Focus
- Admission in to care and reablement
- Self-directed support and direct payments
- Employment
- Housing

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

- Public Health Risk Register
- Harmful Gambling Charter Mark
- Suicide Audit
- Leisure Update
- Leisure Risk register
- Active Ageing - Falls Prevention

Councillor Doyle, Cabinet Member – Public Health and Wellbeing was in attendance to respond to any questions/comments by Members of the Committee.

RESOLVED:

That the Cabinet Member update reports be noted.

### **17. WORK PROGRAMME 2024/25 AND KEY DECISION FORWARD PLAN**

The Committee considered the report of the Chief Legal and Democratic Officer that sought to:

- Invite the views of the Committee on the Work Programme for the remainder of the Municipal Year 2024/25;
- identify any items for pre-scrutiny by the Committee from the Key Decision Forward Plan;
- invite Committee Members to participate in informal briefing sessions during 2024/25;
- invite the views of the Committee on the draft Programme of informal briefings/workshop sessions for 2024/25;
- consider if there were any site visits that Committee Members would wish to undertake during 2024/25;
- receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; and
- receive an update on the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee.

RESOLVED That

- (1) the Work Programme for 2024/25, as set out in Appendix A to the report, be noted, along with any additional items to be included and thereon be agreed;

# Agenda Item 3

OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) - TUESDAY 3RD SEPTEMBER, 2024

- (2) the contents of the Key Decision Forward Plan for the period 1 September to 31 December 2024 be noted;
- (3) all Members of the Committee be invited to participate in informal briefing sessions;
- (4) the Programme of informal briefings/workshop sessions for 2024/25, as set out at Appendix B to the report, be noted;
- (5) the following site visits for Committee Members be arranged to take place during 2024/25:
  - Visit to Southport Hospital
  - Visit to Aintree Hospital or Royal Liverpool Hospital
- (6) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted; and
- (7) the update on the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee be noted.

## North West Ambulance Service update report

<b>Date of meeting:</b>	15 October 2024
<b>Report to:</b>	Overview and Scrutiny Committee (Adult Social Care and Health)
<b>Report of:</b>	North West Ambulance Service
<b>Wards affected:</b>	All
<b>Exempt/confidential report:</b>	No
<b>Contact Officer:</b>	Ian Moses, Area Director, North West Ambulance Service NHS Trust
<b>Tel:</b>	07812 304334
<b>Email:</b>	ian.moses@nwas.nhs.uk

### 1.0 Purpose / Summary of Report:

- 1.1 The purpose of this report is to describe to the Committee the way North West Ambulance Service (Nwas) Paramedic Emergency Services (PES) are delivered in Sefton, including 999 demand, call prioritisation and sorting, response time performance and operational challenges affecting these functions.
- 1.2 The report will also describe other clinical care pathways in operating in Sefton at the present time, and their effect on patient outcomes.
- 1.3 The report will describe our operational activity and performance in fiscal year 2023/24 and the current 2024/25 year to date position.

### 2.0 Acknowledgement

- 2.1 Nwas would like to place on record our sincere appreciation to the people of Sefton and to Sefton Council for their outstanding support to our service and staff following the tragic incident on the 29<sup>th</sup> of July 2024.
- 2.2 Nwas acknowledges with gratitude the extraordinary Sefton Council session convened on 12 September, attended by all 3 'blue light' services.

### 3.0 Background

- 3.1 Nwas operates across the North West Regional footprint, split into three operational areas. These are Cheshire and Merseyside, Greater Manchester and Cumbria and Lancashire.
- 3.2 In Cheshire and Merseyside, we are further sub divided into four operational sectors. Sefton is located within the North Sector, which covers the area from Southport to Speke, and then eastwards, bordering West Lancs and Knowsley (though includes Kirkby)
- 3.3 In the North Sector we convey patients to three main general hospital sites (Royal Liverpool, Aintree, and Southport), and to specialist sites at Alder Hey, Liverpool Heart and Chest Hospital and Liverpool Women's Hospital.
- 3.4 Changes took place to former CCG and new 'Place' boundaries in 2022, but Nwas reporting is still able to describe demand at this 'sub place' level, and so for the purposes of this report, will consider demand in the former South Sefton and Southport and Formby CCG areas, which are understood to broadly follow the North and South Sefton areas in the reports previously seen at this Committee.

# Agenda Item 4

- 3.5 In Sefton, NWS operates from bases at Bootle, Crosby, Buckley Hill, Formby, and Southport.
- 3.6 Buckley Hill, Formby, and Southport are shared premises with Merseyside Fire and Rescue Service.
- 3.7 Although NWS operates responses from all these bases, the dynamic nature of emergency ambulance demand and vehicle movement means that incidents are always responded to by the nearest emergency ambulance, regardless of base.
- 3.8 For example, if an ambulance from Skelmersdale conveys a patient to Southport hospital, they could be dispatched to their next call in Southport or Formby if it is the nearest responding ambulance to that patient.
- 3.9 Across Sefton's operational bases NWS employs circa 120 PES staff, and operates 17 emergency ambulances and RRVs

## 4.0 Emergency demand

- 4.1 Calls to 999 are answered in one of three locations in the North West. These Locations are in Lancashire (Broughton) Manchester (Parkway) and Merseyside (Estuary Point, Speke). These three emergency operations centres operate on one common telephony and technical system, allowing calls to be taken and dispatched from wherever the call is answered.
- 4.2 The nature of how NWS distributes calls means that the majority of Cheshire and Merseyside demand is answered in our Estuary Point call centre.

Period	Sefton 999 Calls	999 incidents	Incidents with response
2023-24	59,269	40,207	34,666
2024 to end Sept	29,249	20,082	17,465

- 4.4 Not all 999 calls result in an incident being created, this happens for example where we may get many calls for the same road traffic collision, or importantly, where patients call for help but the suggested ambulance response time does not meet their expectations, and they choose to make other arrangements.
- 4.5 Not all incidents receive a face-to-face response. Our call triage systems and clinicians in our contact centres will call back appropriate patients, referring them to points of care that meet their needs without the need for an ambulance response. We refer to this as 'hear and treat.'

Period	Hear and Treat	See and Treat	See and convey to ED
2023-24	5,541 (13.8%)	10,769 (26.8%)	21,039 (52.3%)
2024 to end Sept	2,617 (13.0%)	5,319 (26.5%)	10,906 (54.3%)

- 4.7 Following face to face emergency response and assessment, NWS directs just over a quarter of patients to places of care, or self-care without the need to attend an ED department.
- 4.8 Of the total 999 incidents dealt with, only just over half of patients calling for help in Sefton are conveyed to an emergency department.
- 4.9 A small number of patients (7%) are conveyed to other (non-ED) destinations, such as SDEC, Maternity Wards, Urgent Treatment Centres etc.
- 4.10 999 calls have reduced over the last 18 months, though the number of incidents has grown. This apparently perverse phenomenon is a result of NWS performance improvement. During 2022/23 demand and resources were so misaligned that NWS would regularly get multiple calls for the same patient because our response times were so long.
- 4.11 During 2023/24 NWS received investment to increase emergency ambulances, meaning that response times improved, and there were fewer secondary 999 calls. Additionally, the wait times suggested at the time of call are more likely now to result in patients / carers waiting for the ambulance to come, hence more incidents are created.

## 5.0 Call categorisation and response indicators

- 5.1 NWS streams incidents into 5 priority categories, based on clinical priority need. Sefton's demand was categorized as follows:

Period	Category 1	Category 2	Category 3	Category 4	Category 5
2023-24	3,908	21,474	8,906	651	3,405
2024 to end Sept	2,010	10,466	4,223	349	2,130

- 5.3 Category 1 calls include cardiac arrest, hanging, electrocution, unconscious patients etc. These make up 10% of all 999 incidents. The response standard for C1 calls is a mean of 7 minutes and a 90<sup>th</sup> centile (9 out of 10 times) of 15 minutes.

# Agenda Item 4

5.4 55% of all 999 incidents are category 2. These include chest pain, stroke, breathing problems etc. The response standard for C2 calls is a mean of 18 minutes and a 90<sup>th</sup> centile (9 out of 10 times) 40 minutes. In 2023/24 and 24/25 the Government has introduced an interim mean target of 30 minutes.

5.5 Category 3&4 are lower acuity incidents such as falls, which still need a face-to-face response and assessment by an ambulance crew. Transfers between hospitals are C3 & C4. The response standard for C3 calls is a 90<sup>th</sup> centile (9 out of 10 times) of 120 minutes. The response standard for C4 calls is a 90<sup>th</sup> centile (9 out of 10 times) of 180 minutes.

5.6 Category 5 calls are advice only / signposting calls. Some will receive a face-to-face response, but there is no response performance indicator.

## 6.0 Sefton response time performance

6.1 The following will compare Sefton Performance with the wider Cheshire and Merseyside ICB performance and then with the North West.

6.1 Category 1 Mean (<7 mins)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	07:59	07:46
Sefton North	08:46	08:24
Sefton South	07:27	07:19
C&M All	08:24	07:59
NWAS All	08:07	07:41

6.2 Category 1 90<sup>th</sup> centile (<15 mins)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	13:42	13:02
Sefton North	12:15	16:02
Sefton South	16:49	11:55
C&M All	14:21	13:40
NWAS All	13:45	13:05

6.3 Category 2 mean (<18:00) (\*interim <30:00)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	39:29	33:53
Sefton North	39:59	34:29
Sefton South	39:06	33:25
C&M All	37:27	32:35
NWAS All	28:44	25:25

6.4 Category 2 90<sup>th</sup> Centile (<40:00)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	86:02	70:19
Sefton North	88:22	72:00
Sefton South	83:57	69:21
C&M All	80:51	67:03
NWAS All	60:33	49:54

6.5 Category 3 90<sup>th</sup> centile (<120 mins)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	370:31	311:28
Sefton North	357:09	298:02
Sefton South	381:13	328:15
C&M All	360:45	296:32

# Agenda Item 4

NWAS All	317:59	245:18
----------	--------	--------

## 6.6 Category 4 90<sup>th</sup> centile (<180 mins)

	Year 2023/24 (mins)	2024 YTD (1 April to 30 Sept) (mins)
Sefton All	397:50	448:42
Sefton North	315:30	468:47
Sefton South	432:41	365:10
C&M All	461:11	276:49
NWAS All	420:46	257:28

6.7 It is important to note that although the YTD performance is better in some cases than the previous full year, we have yet to see the effect of winter on performance, in what is known to be a far more constrained operating environment.

6.8 Colleagues will observe that response time performance is worse in Cheshire and Merseyside than the North West regional position. In fact, C&M worsens the regional average.

6.9 Sefton is not a significant outlier for higher acuity call response times in C&M, however it is a negative outlier for lower acuity call response. When demand outstrips available resources, NWAS priorities higher acuity calls first, which can mean that lower acuity calls wait longer.

6.10 If C&M is excluded from regional Category 2 performance for example, the regional mean would be 22:09mins TYD and 41:58mins for the 90<sup>th</sup> centile.

6.11 If C&M is excluded from regional Category 3 performance for example, the regional performance would be 223 mins for the 90<sup>th</sup> centile.

## 7.0 Operational constraints

7.1 999 response time performance is reliant upon a ready supply of available resources in the right locations.

7.2 Although we operate from ambulance bases, the reality nowadays is that bases are little more than booking on and off points. Most dispatches are to moving vehicles. In Sefton it is rare to find emergency ambulances on station waiting for calls.

7.3 By far the greatest constraint on ambulance availability is hospital handover delays. For ambulance resources serving the Sefton area, Aintree Hospital has a poor record for holding emergency ambulance crews for extended periods, meaning that our ability to respond to emergencies in the community is adversely affected.

7.4 Ambulance arrivals at Aintree have been broadly consistent over recent years, however the ability to hand patients over has worsened.

7.5 Aintree arrivals and handover times last 3 years (full years unless stated) (average per arrival).

Year	NWAS Arrivals	Arrival to handover	Handover to clear	Total Time at hospital
2021-22	27,606	24:58	14:05	38:06
2022-23	25,239	46:18	15:10	53:10
2023-24	26,506	39:20	15:11	48:34
2024 *YTD	13,369	48:07	12:04	57:09

7.6 Part of the way NWAS attempts to maintain a proportion of ambulance availability at busy hospitals is through cohorting. Cohorting is one ambulance crew caring for 2,3 or 4 patients on hospital trolleys in hospital corridors, allowing the other crews to leave for other calls.

7.7 Cohorting at Aintree this year has not been possible, because patients have been held far more often in the back of ambulances rather than on corridors, meaning that it is impossible for any of those ambulances to leave, even for the most life-threatening emergencies. The table below demonstrates the increased prevalence of ambulances being held outside at Aintree, leading to the worsening of ambulance availability and worsened response times.

7.8 Comparing the period 1 April to 30 September, last 3 years, Aintree ED:

Year	NWAS ED Arrivals	Patients held in ambulances
2022	12,715	3
2023	13,307	32
2024	13,440	1,379

7.9 Ambulance arrivals at Southport Hospital have followed a similar consistent, broadly flat,

# Agenda Item 4

trend over recent years

7.10 Southport arrivals and handover times last 3 years (full years unless stated) (average per arrival).

Year	NWAS Arrivals	Arrival to handover	Handover to clear	Total Time at hospital
2021-22	15,208	24:13	12:50	36:19
2022-23	13,879	32:21	13:08	43:55
2023-24	14,315	37:26	12:40	45:41
2024 *YTD	7,324	36:47	10:28	43:43

7.11 The national standard for handover that acute trusts are meant to deliver is 65% in 15 minutes, 95% in 30 minutes and 100% in 60 minutes

7.12 The year-to-date handover performance in Sefton is:

Site	Handover in 15 min	Handover in 30 min	Handover in 60 min
Aintree	20%	55%	80%
Southport	15%	55%	91%
C&M All	16%	51%	84%
NWAS All	30%	68%	93%

7.13 999 demand in Aintree is heavily weighted to the south of the borough. The combined effect of higher demand and delays at Aintree is often to draw resources in from other areas, including the north of the borough, which can, and does affect response times there.

7.14 The provision of services in the community to accept referrals from NWAS is highly variable. In the main operational crews will seek to refer patients to their own GP or to alternative primary care destinations where a journey to the emergency department is not appropriate, however services are equally under pressure, and not always able to accept referrals.

7.15 For example, community-based services are accessed like these:

*At the point of call, NWAS call handlers can redirect appropriate patients to primary and community care outcomes via the directory of services or can instruct patients to attend ED or UTC services via their own transport.*

*NWAS has access to a fall lifting service 24/7 for patients who are on the floor via Progress Lifeline. This service takes referrals directly from patients with pendants. They lift uninjured patients and deflect appropriate patients away from the ambulance service. This is complemented by an NWAS falls car in operation 0800-2000 daily, staffed by a paramedic.*

*There are 2 different routes of access into the UCR teams in Sefton. For care home patients, NWAS staff access the ANP mobile, for other UCR referrals these should be brokered through the single point of access number. (Local feedback is there are sometimes issues with this due to a disconnect between providers).*

*Crews have access to 24/7 acute visiting service provision via PC24.*

*SDEC provision at SDGH operates 0800-1600 and crews anecdotally struggle with access and capacity.*

7.16 Patients in mental health crisis are making up a growing proportion of our 999 demand, varying between 6 and 9%. Community based referral services, especially out of hours are, again, variable, leading sometimes to exceptionally long delays in patients accessing the care that they need, and with NWAS staff spending hours on scene to make a safe referral.

## 8.0 Performance mitigation

8.1 NWAS works closely with the ICB and the individual Trusts to address challenges with response time performance

8.2 Weekly and monthly activity and performance data is shared with all trusts.

8.3 NWAS has taken over chairing the C&M -wide ICB group for ambulance improvement.

## 9.0 Recommendations

9.1 The Adult Social Care and Health Overview and Scrutiny Committee are recommended to:

# Agenda Item 4

- Note the content of this report.
- Note the operational constraints affecting the provision of emergency ambulance cover in Sefton.
- Note the local and regional disparities in response time performance.

9.2 Adult Social Care and Health Overview and Scrutiny Committee Members are warmly invited to attend at our area headquarters at Estuary Point, Speke, for a more detailed overview of performance, the wider range of NWAS operational delivery functions, and the 999 call taking and dispatch process.



**Report Title Here      Sefton Place Director Update**

Date of meeting:	15 October 2024
Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)
Report of:	NHS Cheshire and Merseyside ICB – Sefton Place
Wards affected:	All
Exempt/confidential report:	No
Contact Officer:	Deborah Butcher
Tel:	0151 317 8456
Email:	<a href="mailto:Deborah.butcher@sefton.gov.uk">Deborah.butcher@sefton.gov.uk</a>

**Purpose / Summary of Report:**

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

**Recommendation**

The Overview and Scrutiny Committee (Adult Social Care and Health) is requested to receive this report.

This page is intentionally left blank

## NHS Cheshire and Merseyside, Sefton

### Update Report

October 2024

#### Southport major incident

(For more information contact: [deborah.butcher@sefton.gov.uk](mailto:deborah.butcher@sefton.gov.uk))

#### Recovery following Southport Major Incident

Following a major incident in Southport on 29 July 2024 an extensive multiagency response and recovery cell has been established and NHS Cheshire and Merseyside ICB are leading on the activation of the *Cheshire and Merseyside Psychological Support Plan Following a Major Incident*. There has been a significant focus on the psychological support that will be required for all those affected by this incident in the immediate and longer term which has resulted in creation of pathways for all those affected and/ or witnessed the incident.

Resources have also been developed as part of the psychological care offer and a live webpage has been created to provide ongoing updates, to support the victims, their families and the wider community.

Support offer has also been established for staff impacted including the emergency responders that were involved in this incident. All information can be accessed via council link:

[Support For You \(sefton.gov.uk\)](https://sefton.gov.uk/support-for-you)

#### Women's Hospital Services in Liverpool programme: Improving Hospital Gynaecology & Maternity Services in Liverpool

On Wednesday 9 October 2024, NHS Cheshire and Merseyside Integrated Care Board (ICB) will be presented with a case for change document describing the risks facing hospital-based gynaecology and maternity services in Liverpool.

Subject to the board's approval of the document, a six-week period of public engagement will begin on 15 October 2024, giving people an opportunity to share their views about the issues it sets out.

Although some of the challenges outlined in the case for change have been discussed in the past, this is a new process which will focus on the situation as it stands today.

The case for change doesn't set out proposals or potential solutions – these will be explored with partners, stakeholders, patients, and the public later in the programme of work – and no decisions have yet been made.

While it's still too early in the process to speculate about how services might look in the future, the Crown Street site is an important NHS asset, and services continue to be developed there. There are no plans to close Crown Street and, whatever proposals might be developed for the future of gynaecology and maternity services, the site will continue to be used for the provision of NHS services.

The case for change will be published with the NHS Cheshire and Merseyside board papers, which will be available here from the afternoon of 1 October 2024:

[www.cheshireandmerseyside.nhs.uk/get-involved/upcoming-meetings-and-events/](http://www.cheshireandmerseyside.nhs.uk/get-involved/upcoming-meetings-and-events/)

Further details about planned public engagement will be shared following the NHS Cheshire and Merseyside board meeting on 9 October 2024.

## Lincoln House Surgery

Further to the update provided to the last meeting of the committee, a further four week period of engagement was undertaken with patients registered at Lincoln House Surgery regarding the closure of the practice. During this time 45 contacts were made with the key themes being:

- Understanding the process
- Arrangements for medications
- Follow up appointments
- Preferences about which practices they would transfer to

All Southport practices have been accepting new patient registrations and plans continue to move patients to new practices between the 7<sup>th</sup> and 23<sup>rd</sup> October.

The building will be retained for other healthcare services to operate out of. Currently a community ECG service and the Acute Visiting Service also operate from within the site and there are plans for a winter primary care GP hub to open shortly.

An Equality Impact Assessment (EIA) and a Quality Impact Assessment (QIA) have been completed with no significant concerns identified.

## GP Collective Action

Following a ballot of its members the British Medical Association confirmed that a period of GP collective action would start on 1<sup>st</sup> August 2024. This is not the same as industrial action but means that GPs may stop or reduce certain work. The BMA has

recommended certain actions, details of which can be found on the BMA website:

[Guidance for GP collective action \(bma.org.uk\)](https://www.bma.org.uk/guidance-for-gp-collective-action)

## Workforce data

At the request from the committee, the following information provides detail on the workforce information in respect of GPs in Southport.

GP workforce data from July shows that Sefton has 53.05 Whole Time Equivalent (WTE) GPs per 100 000 population, this compares to the England average of 56.46.

This is broken down further to 40 WTE per 100 000 population compared to the England average of 42.29 when trainees are excluded from these figures. 29% of the GP workforce is over the age of 50 compared with 26% across England.

The ICB continues to work with practices to ensure workforce data is submitted accurately and work with the Cheshire and Merseyside Training hub to support GP retention. Locally we also have protected learning time across all professional groups, funding for visa programmes and a GP retainer scheme.

This page is intentionally left blank

**Report Title Here      Health Provider Performance Dashboard**

Date of meeting:	15 October 2024
Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)
Report of:	NHS Cheshire and Merseyside ICB – Sefton Place
Wards affected:	All
Exempt/confidential report:	No
Contact Officer:	Deborah Butcher
Tel:	0151 317 8456
Email:	<a href="mailto:Deborah.butcher@sefton.gov.uk">Deborah.butcher@sefton.gov.uk</a>

**Purpose / Summary of Report:**

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

**Recommendation**

The Overview and Scrutiny Committee (Adult Social Care and Health) is requested to receive this report.

This page is intentionally left blank



# Main Provider Performance October 2024

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

Page 25  
Time periods vary for the indicators presented and are indicated in the tables latest data available displayed.

**To Note:** Following a consultation on the cancer waiting times standards, NHS England had approval from the government to implement changes to the standards from 1 October 2023, this data for Cancer is reflected within the report for these new metrics (62 day combined, 31 day combined and 28 day FDS).

Key Performance Area	Time Period	Performance	C&M	National	Target	Trend
A&E 4 hour Waits, All Types MWLTH from July 23 (Mersey & West Lancashire Teaching Hospital) prev SOHT	Aug-24	76.38%	74.30%	76.33%	78% by March 2025	
Cancer 28 Day FDS (MWLTH from July 23)	Jul-24	74.62%	74.1%	76.3%	77% by March 2025	
Cancer 62 Day - combined new from Oct-23 (MWLTH from July 23)	Jul-24	80.62%	75.9%	67.7%	85%	
Cancer 31 Day - combined new from Oct-23 (MWLTH from July 23)	Jul-24	88.36%	94.8%	91.9%	96%	
RTT -18 Weeks Incomplete (MWLTH from July) snapshot	Jul-24	59.78%	57.08%	58.83%	92%	
C.Difficile (MWLTH) cumulative YTD	Jul-24	6	-	-	2024-25 Target <=113	
MRSA (MWLTH) cumulative YTD	Jul-24	0	-	-	zero tolerance	
Ambulance Category 1 Mean 7 minute response time (NS Place Level)	Jul-24	00:08:03	00:07:44 (NWAS)	00:08:15	<=7 Minutes	
Ambulance Category 1 90th Percentile 15 minute response time (NS Place Level)	Jul-24	00:13:32	00:13:05 (NWAS)	00:14:39	<=15 Minutes	
Ambulance Category 2 Mean 18 minute response time (NS Place Level)	Jul-24	00:40:51	00:27:45 (NWAS)	00:33:25	<=30 Minutes	
Ambulance Category 2 90th Percentile 40 minute response time (NS Place Level)	Jul-24	01:25:29	00:55:16 (NWAS)	01:10:24	<=40 Minutes	
Ambulance Category 3 90th Percentile 120 minute response time (CCG Level)	Jul-24	06:01:08	04:48:35 (NWAS)	04:44:56	<=120 Minutes	
Ambulance Category 4 90th Percentile 180 minute response time (NS Place Level)	Jul-24	11:59:52	04:35:23 (NWAS)	05:30:44	<=180 Minutes	
Mental Health: IAPT 16.8% Access (NS Place Level)	Aug-24	1.11%	-	-	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (NS Place Level)	Aug-24	45.5%	-	-	50%	
Mental Health: IAPT waiting <6 weeks (NS Place)	Aug-24	94%	-	-	75%	
Mental Health: IAPT waiting <18 weeks (NS Place)	Aug-24	100%	-	-	95%	

# Mersey & West Lancashire Teaching Hospital NHS Trust

Friends & Family – *(no new update for F&F – latest data remains at April-24)*

Measure	Time Period	MWLTH	C&M	National (Target)	Trend
Inpatient – Response Rate	Apr-24	36.4%	30.5%	22.1%	
Inpatient Recommended	Apr-24	95.0%	95.0%	95.0%	
Inpatient Not Recommended	Apr-24	3.0%	3.0%	3.0%	
A&E – Response Rate	Apr-24	17.3%	15.9%	11.2%	
A&E Recommended	Apr-24	85.0%	79.0%	79.0%	
A&E Not Recommended	Apr-24	8.0%	14.0%	14.0%	

Key Performance Area	Time Period	Performance	C&M	National	Target	Trend
A&E 4 hour Waits, All Types (LUHFT)	Aug-24	70.95%	74.30%	76.33%	78% by March 2025	
Cancer 28 Day FDS (LUHFT)	Jul-24	75.81%	74.1%	76.3%	77% by March 2025	
Cancer 62 Day - combined new from Oct-23 (LUHFT)	Jul-24	75.77%	75.9%	67.7%	85%	
Cancer 31 Day - combined new from Oct-23 (LUHFT)	Jul-24	88.36%	94.8%	91.9%	96%	
RTT -18 Weeks Incomplete (LUHFT) Snapshot	Jul-24	53.49%	57.08%	58.83%	92%	
C.Difficile (LUHFT) cumulative YTD	Jul-24	76	-	-	2024-25 Target <=156	
MRSA (LUHFT) cumulative YTD	Jul-24	2	-	-	zero tolerance	
Ambulance Category 1 Mean 7 minute response time (SS Place Level)	Jul-24	00:06:29	00:07:44 (NWAS)	00:08:15	<=7 Minutes	
Ambulance Category 1 90th Percentile 15 minute response time (SS Place Level)	Jul-24	00:10:48	00:13:05 (NWAS)	00:14:39	<=15 Minutes	
Ambulance Category 2 Mean 18 minute response time (SS Place Level)	Jul-24	00:39:46	00:27:45 (NWAS)	00:33:25	<=30 Minutes	
Ambulance Category 2 90th Percentile 40 minute response time (SS Place Level)	Jul-24	01:26:47	00:55:16 (NWAS)	01:10:24	<=40 Minutes	
Ambulance Category 3 90th Percentile 120 minute response time (SS Place Level)	Jul-24	06:01:08	04:48:35 (NWAS)	04:44:56	<=120 Minutes	
Ambulance Category 4 90th Percentile 180 minute response time (SS Place Level)	Jul-24	05:40:07	04:35:23 (NWAS)	05:30:44	<=180 Minutes	
Mental Health: IAPT 16.8% Access (SS Place Level)	Aug-24	1.04%	-	-	1.59% per month Qtr 1-3 1.83% per month Qtr 4	
Mental Health: IAPT 50% Recovery (SS Place Level)	Aug-24	53.3%	-	-	50%	
Mental Health: IAPT waiting <6 weeks (SS Place)	Aug-24	96%	-	-	75%	
Mental Health: IAPT waiting <18 weeks (SS Place)	Aug-24	100%	-	-	95%	

# Liverpool University Hospital NHS FT

Friends and Family *(no new update for F&F – latest data remains at April-24)*

Measure	Time Period	LUHFT	C&M	National (Target)	Trend
Inpatient – Response Rate	Apr-24	23.5%	30.5%	22.1%	
Inpatient Recommended	Apr-24	94.0%	95.0%	95.0%	
Inpatient Not Recommended	Apr-24	3.0%	3.0%	3.0%	
A&E – Response Rate	Apr-24	17.1%	15.9%	11.2%	
A&E Recommended	Apr-24	70.0%	79.0%	79.0%	
A&E Not Recommended	Apr-24	21.0%	14.0%	14.0%	

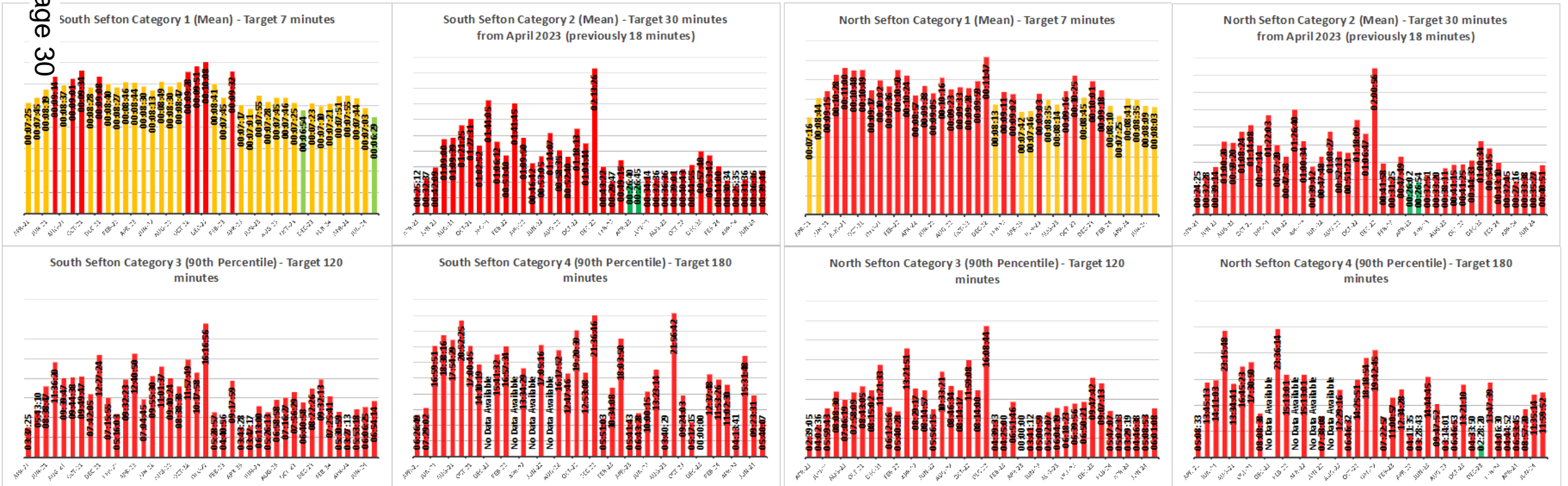
# NWAS – Paramedic Emergency Services (PES) Summary

Data Source: Provider Level (NWAS)

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

Jul-24	Cat 1 (Mean)	Cat 2 (Mean)	Cat 3 (90th Percentile)	Cat 4 (90th Percentile)
Target	00:07:00	00:30:00	02:00:00	03:00:00
South Sefton	00:06:29	00:39:46	06:54:14	05:40:07
North Sefton	00:08:03	00:40:51	06:01:08	11:59:52
NWAS	00:07:44	00:27:45	04:48:35	04:35:23
Risk	▲	▲	▲	▲
Data	Published	Published	Published	Published

## Performance Charts



Page 30

**Report Title: Here**

**Adult Social Care Performance Review**

Date of meeting:	15 <sup>th</sup> October 2024		
Report to:	Overview and Scrutiny Committee Adult Social Care and Health		
Report of:	Executive Director Adult Social Care, Health and Wellbeing		
Portfolio:	Adult Social Care and Health		
Wards affected:	All Wards		
Is this a key decision:	No	Included in Forward Plan:	No
Exempt/confidential report:	No		

**Summary:**

This report to Overview and Scrutiny Committee is to provide an overview of Adult Social Care’s performance against a number of required national and local metrics. It is part of the regular cycle of reporting to Committee and key in terms of preparation for Sefton’s upcoming Care Quality Commission (CQC) assessment.

It utilises a number of data sources to provide an overview for Adult Social Care, identifying areas of strong performance and those requiring focus. It supports both strategic commissioning and service planning. The report also details key actions being taken within identified areas of focus. The full report is contained within Appendix one and is provided for review, scrutiny and assurance.

**Recommendation(s):**

(1) Committee are asked to note the contents of the report, provide comment and be assured on the actions being taken in areas of identified performance.

(2) It is recommended that regular updates continue to be provided to the Committee regarding the performance of Adult Social Care.



# Agenda Item 7

## 1. The Rationale and Evidence for the Recommendations

Adult Social Care assesses performance against a number of measures. The report provides an overview of performance against both national indications contained within the Adult Social Care Outcomes Framework (ASCOF), annual surveys and local performance indicators.

Within Adult Social Care there is a well established Strategic Performance and Finance board in place and a Quality, Safety and Practice Assurance meeting. Reports are shared directly with the Executive Director and Cabinet Member, and mitigation plans are put in place for any performance and risk required specific focus. Regular reporting is also in place to the Executive Leadership Team.

The national assurance framework for Adult Social Care was introduced in April 2023 and is a statutory requirement for all Councils. As part of the assurance process, CQC will scrutinise key performance data before conducting onsite visits. CQC already have access to the data provided in the report, which is provided for existing national returns, and whilst this is already utilised for strategic commissioning and service delivery, ongoing scrutiny and visibility is key in ensuring ongoing evaluation of performance and quality of practice.

## 2. Financial Implications

No additional costs are identified for this specific report

## 3. Legal Implications

The information provided in the report provides details of performance against statutory data sets

## 4. Corporate Risk Implications

None identified

## 5. Staffing HR Implications

None identified within this report

## 6. Conclusion

### Alternative Options Considered and Rejected

None – All Local Authorities are required to report against statutory returns and performance.

<b>Equality Implications:</b>
Non-specifically identified. Equitability in outcomes and services is however a key aspect of the CQC assurance framework and is included within the services detailed preparation plans.
<b>Impact on Children and Young People:</b>
Adult Social Care has a statutory duty to ensure that arrangements are in place for those children and young people requiring a transition into adult services. The effectiveness of these arrangements will be assessed by CQC as part of the national



assurance framework.

**Climate Emergency Implications:**

Neutral impact.

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

The Executive Director of Corporate Services & Commercial (FD.7796/24) and the Chief Legal and Democratic Officer (LD.5895/24) have been consulted and any comments have been incorporated into the report.

**(B) External Consultations**

Not applicable

**Implementation Date for the Decision:**

With immediate effect. The Chair of the Overview and Scrutiny Committee

Contact Officer:	Sarah Alldis
Telephone Number:	07815465610
Email Address:	sarah.alldis@sefton.gov.uk

**Appendices:**

The following appendices are attached to this report:

Appendix 1 slide deck containing the detailed performance report.

**Background Papers:**

None

This page is intentionally left blank

# Adult Social Care Performance Overview

## Overview and Scrutiny Committee Adult Social Care & Health October 15th 2024.

Page 35

Agenda Item 7

## ASCOF measures

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

### Admission into care:

Over the past 12 months Sefton’s admissions to nursing and residential care homes for people aged 18-64 have come down from 28 to 25 admissions per 100,000 of the population. Whilst we remain in the bottom quartile both in the North West and in England, there is a continued focus on reducing the numbers of placements both for under and over 66 year olds and this forms a key part of the Adult Social Care 3 years transformation programme, which is called “Better at Home”. In admissions of people aged 65 and over, Sefton has improved its performance over the past 12 months. Admissions have come down from 682 to 645 per 100,000 of the population. Our admission rate is average for the region and slightly above the rate seen in the rest of England.

### Reablement:

Just under 90% of older people (65+) going through reablement/rehabilitation services following hospital discharge remain at home 91 days later. This compares well regionally and nationally, putting us in the top quartile in England and just outside the top quartile in the North West

### Self-directed support & direct payments:

Around 25% of our social care clients are supported via a direct payment, this is a similar proportion seen in the North West (25%) and in England (26%). The service has recently undertaken direct engagement with individuals and carers to see how we can further increase this number. We have seen significant increases in the proportion of our carers receiving direct payments. In 22/23, 71% of our carers were supported with a direct payment, this is now up to 90% putting us above the North West proportion of 80%.

### Employment:

The proportion of learning-disabled people in paid employment remained fairly stable over the past few years between 2-3%. This is lower than the North West (4%) and England (5%).

### Housing:

The proportion of people with learning disabilities who live in their own home or with their family has remained stable over the past 12 months. The 88% of people living in settled accommodation at the end of July put us in the top quartile for England and similar to the proportion seen in the North West (89%). A new supported housing strategy is being developed which will be presented to Overview and Scrutiny in late Autumn 2024

### Sequel to short-term support

Around 75% of people supported with a short-term service subsequently go on to require no ongoing support or see a reduction in their support package. This is slightly below the proportions seen in England (78%) and the North West (80%). This also links with the need to expand the use and availability of reablement services as well as a continued focus on working with health partners to ensure that wherever possible people are discharged home from hospital rather than into residential or nursing placements.

# Finance – Weekly Overview

The total weekly expenditure has increased from March to September. The reasons behind the increase are annual fee uplifts and 3.3% increase in client numbers.

The increase in client numbers is related to **long-term** service users - this is up by 4% since March and is as result of focused work to reduce the number of people awaiting an assessments.

Client numbers increased for community support and day care services - each up by 7%. The numbers of people utilising nursing and supported living services increased by around 5% each, home care and residential services by 4% each.

This increase in the numbers of people using “community based” services does reflect the desired direction of travel as the service seeks to support more people at home for longer

## Business Intelligence | Adult Social Care

### Weekly Summary

This page displays the the current total weekly cost, average weekly cost and client count snapshot. The change indicators show the same seven day periods last week, last month, last quarter and last year. The change is displayed in total numbers and percentage change.

**Total Weekly Cost**  
**£3,177,011**

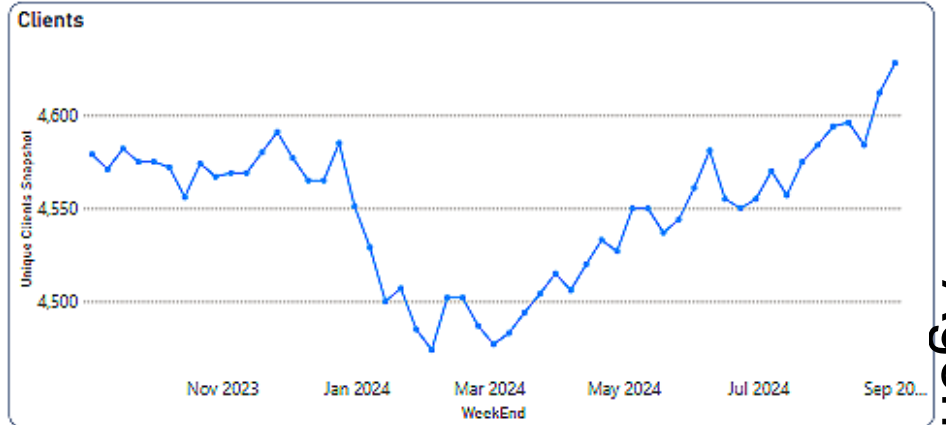
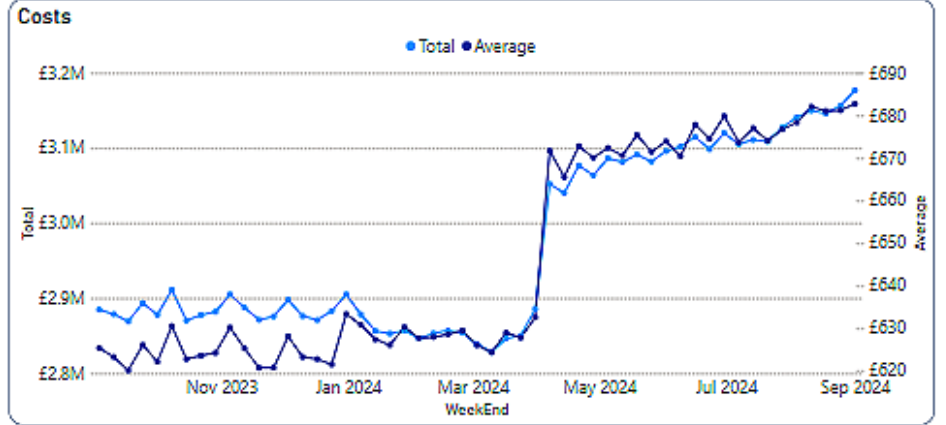
Week Change	Month Change	Quarter Change	Year Change
▲ £20,864 (+0.7%)	▲ £36,065 (+1.1%)	▲ £74,975 (+2.4%)	▲ £294,258 (+10.2%)

**Average Weekly Cost**  
**£683**

Week Change	Month Change	Quarter Change	Year Change
▲ £2 (+0.2%)	▲ £4 (+0.6%)	▲ £12 (+1.8%)	▲ £58 (+9.4%)

**Client Count Snapshot**  
**4,628**

Week Change	Month Change	Quarter Change	Year Change
▲ 16 (+0.3%)	▲ 34 (+0.7%)	▲ 47 (+1.0%)	▲ 11 (+0.2%)



Created by the Business Intelligence & Performance Team |

04/09/2024 09:57

# Long-term Residential & Nursing Care

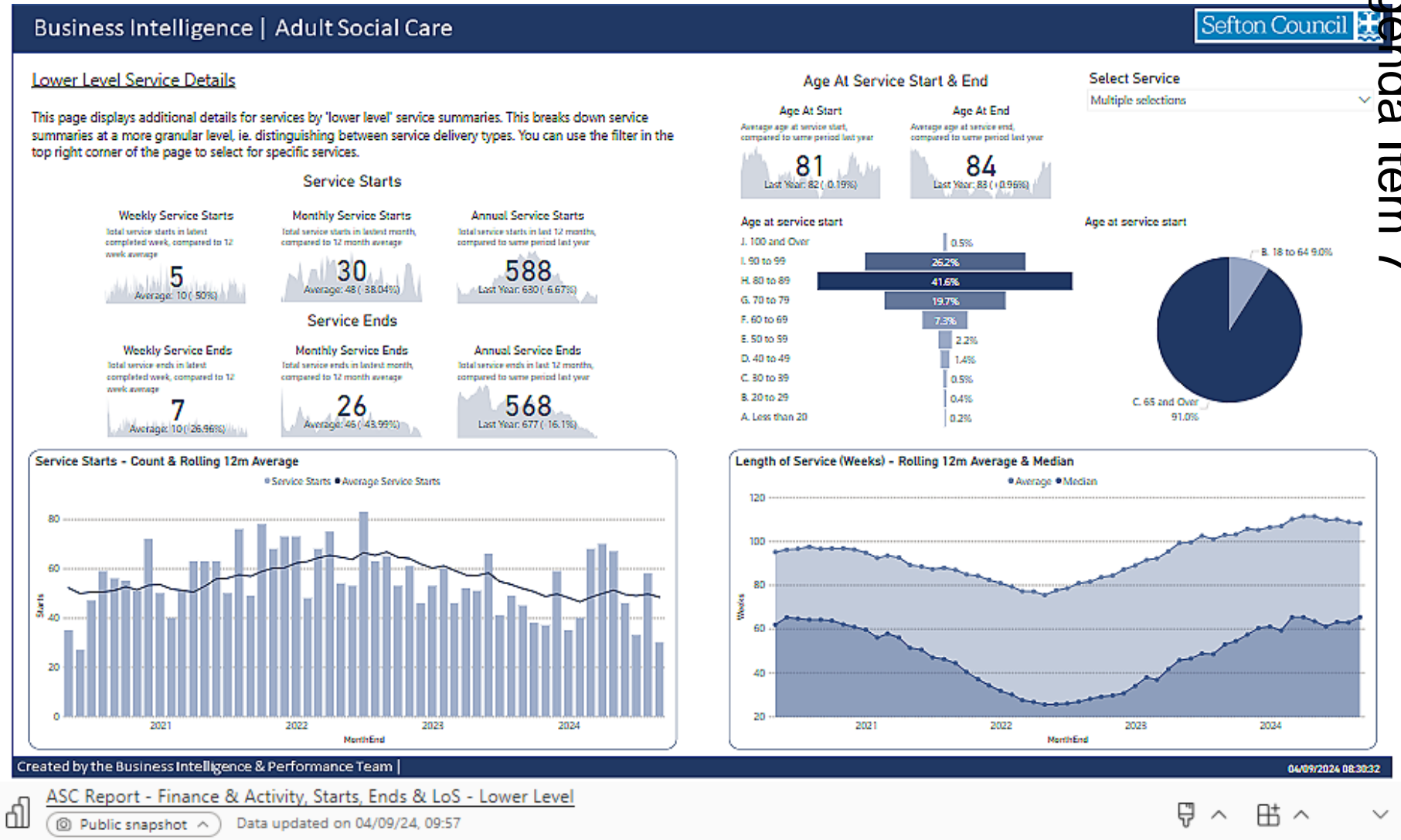
The numbers of people going into long-term residential and nursing care have come down by **7% over the past 12 months, which is the desired trajectory.**

February, March and April, however, were high for long-term admissions following a targeted piece of work with a number of people in short term placements who required

Just over 90% of people starting a long term residential or nursing care placements are aged 65 and over and the average age at start is 81.\*

Our rate of admission of 18–64-year-olds to long-term residential or nursing care is currently 25 per 100k of the population. **This has come down over the past 12 months from 28 people per 100k.**

\*(further work to be done with Public Health regarding demographics and demand)



# Reablement & Alternative to Reablement Services

Reablement services provide short-term home-based support to people after a period in hospital or illness at home. The aim being to help them remain as independent as possible and reduce or delay the need for long term services.

The demand for reablement services has grown exponentially over the last 2 years and faster than New Directions can provide the growth. This means that the demands for reablement has been delivered by the independent sector, we called this Alternative to Reablement.

Work is ongoing with Sefton New Directions (the primary provider of reablement services) to increase their capacity. They have historically delivered around 450 direct contact time hours per week and by October 2024 this will increase to around 715 hours.

Business Intelligence | Adult Social Care
Sefton Council

**Reablement**  
 Reablement is delivered via New Directions and the Alternative to Re-enablement (AREN) service. This page shows the number of clients in receipt of both services, total weekly hours delivered and total hours delivered per person.

**Packages Of Care**

267

Last Year: 298 (-10.4%)

**Total Weekly Hours**

3,412.69

Last Year: 3,662.56 (-6.82%)

**Average Weekly Hours Per Person**

12.8

Last Year: 12.3 (+4%)

**Service Delivery**  
 The table below shows the current client numbers & percentage, current weekly hours numbers & percentage and the number of hours delivered per person. This is broken down by AREN and reablement delivered by New Directions. New Directions reablement can be drilled down further to see breakdowns by standard and crisis reablement.

Reablement Type	Client #	Client %	Weekly Hours	Weekly Hours %	Hours Per Person
<input checked="" type="checkbox"/> Reablement (AREN)	199	74.5%	3,054.00	89.5%	15.35
<input checked="" type="checkbox"/> Reablement (ND)	68	25.5%	358.69	10.5%	5.27
Reablement (ND Standard)	58	21.7%	296.76	8.7%	5.12
Reablement (ND Crisis)	10	3.7%	61.93	1.8%	6.19
<b>Total</b>	<b>267</b>	<b>100.0%</b>	<b>3,412.69</b>	<b>100.0%</b>	<b>12.78</b>

**Reablement Delivery Proportions**  
 Below is displayed the proportion of reablement delivered via AREN and New Directions, The filter to the right can be used to display either client numbers or hours delivered.

Client Count

Created by the Business Intelligence & Performance Team | 04/09/2024 08:30:32



# First Point of Contact

Adult Social Care receives an average of 2000 contacts per month. These can include requests for care packages, safeguarding concerns or queries about existing support packages.

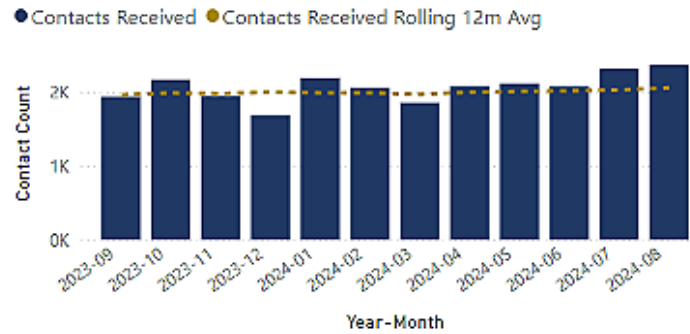
14% of contacts are resolved through advice and information, 33% result in a new referral (where further assessment is likely to required) and 20% are linked to existing referrals (where people have already been in touch).

Whils Page 40 ita tells us that the service responds quickly requests being managed by our team at the “front door” 70% of contacts at the front door were resolved within two working days), 50% of all the contacts received are still being transferred through to community social work teams, which causes people to wait longer. Where an urgent response is needed however this is provided.

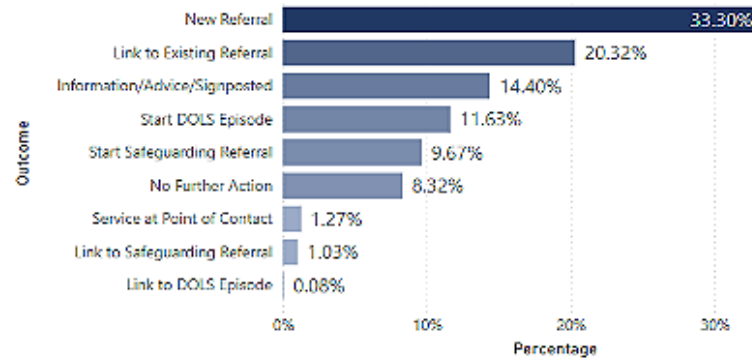
A full redesign of the ASC front door has now commenced which will increase the capacity to complete more of “todays work today”, providing OT services earlier and reducing the need for “referral on” to another team



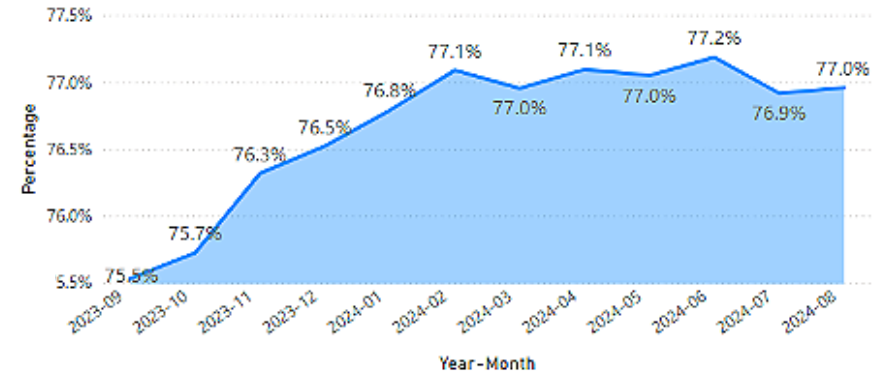
Contacts Received by Month



Contacts Outcomes - 12 Months



Percentage Resolved Within 2 Working Days by Rolling 12 Months





# People waiting for a service

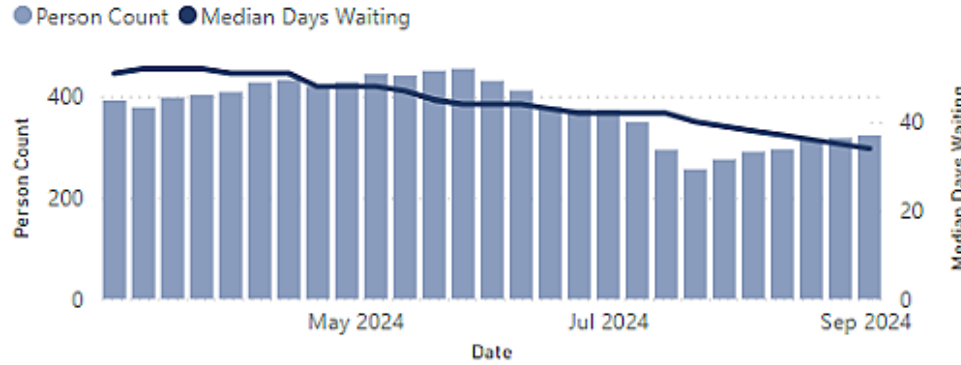
Sefton like all Local Authorities is experiencing waiting list across its core services and the oversight and reduction of these remain a key focus. All referrals have been screened and prioritised.

Arrangements are in place to manage any risks and ensure that contact is maintained with people on the waiting list. All individuals receive a letter detailing how to contact the department should there be any change in circumstance. Weekly oversite meetings, case weighting and reporting to the Executive Director are in place

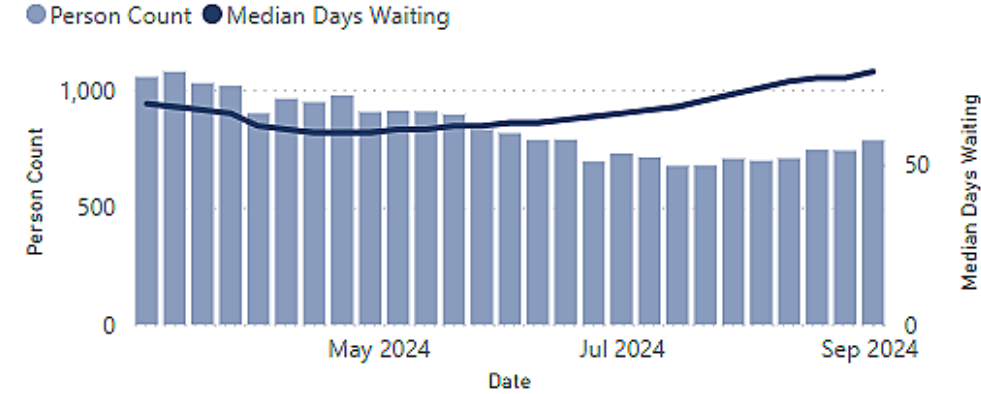
A wider capacity and resource evaluation has now commenced across all teams together with improved data cleansing.

In respect of Dols referrals the last year has seen 9% increase (largely due to referrals from hospitals).

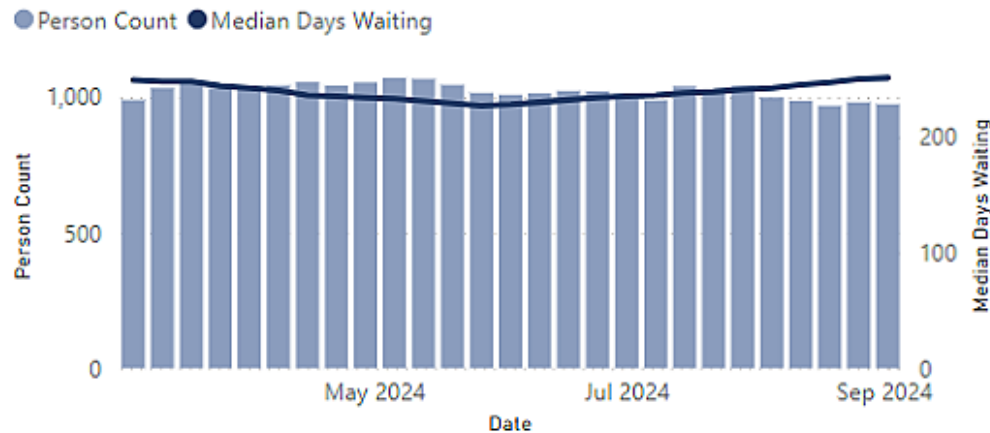
Social Work



Occupation Therapy



Deprivation of liberty Safeguard (Dols) referrals



# Feedback from surveys

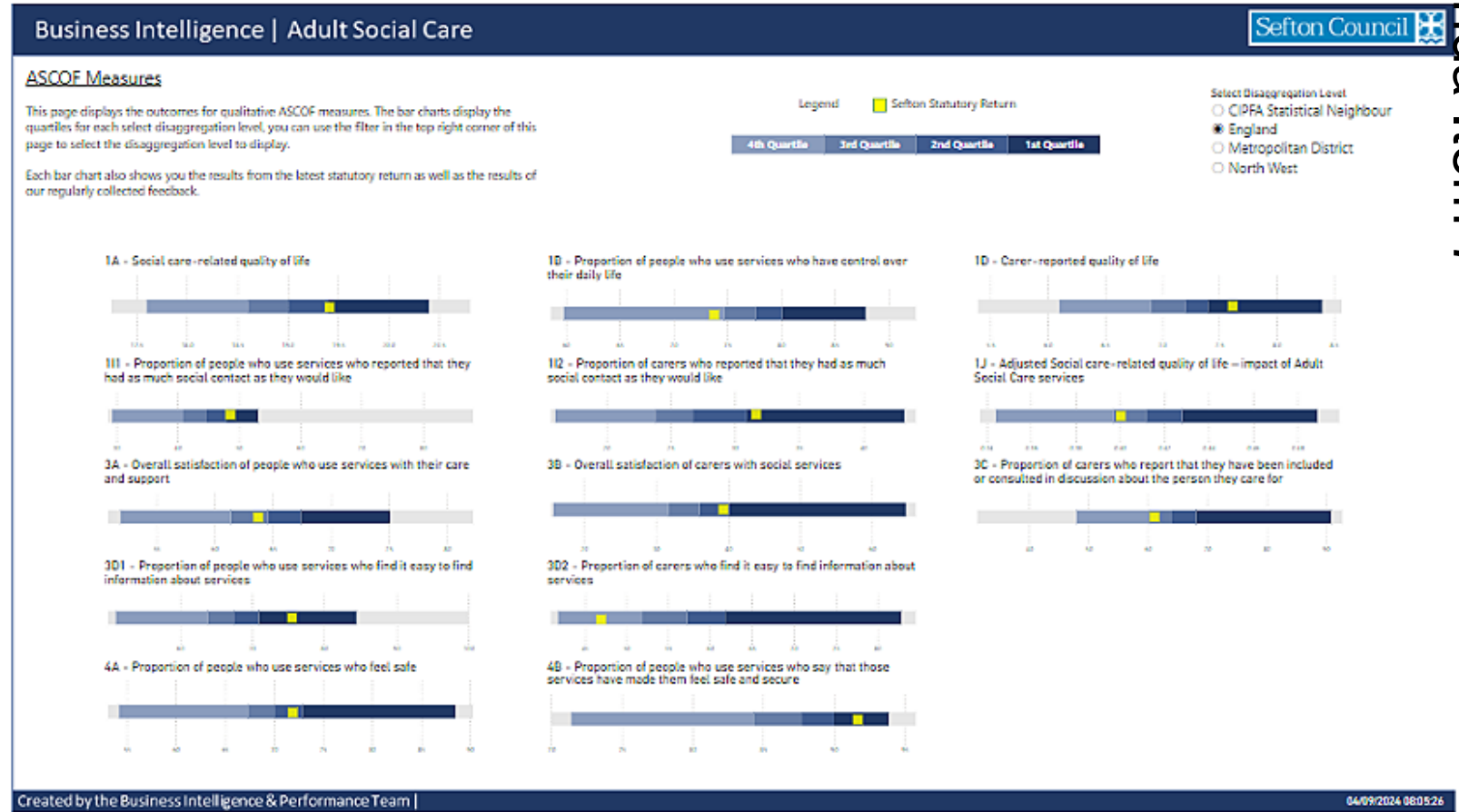
Sefton (like all Local Authorities) takes part in the annual Social Care Survey and biannual Carers Survey which seek to gather feedback on the quality of life being experienced by people using services. The questions are set nationally. It is recognised that some feedback can be influenced by other external factors (eg wider community safety issues). At a local level within Sefton work is now in progress to gather qualitative feedback on a more targeted and regular basis through short surveys, dedicated engagement events and QR codes.

Finding from the last the national surveys identified that people and carers in Sefton rate their quality of life positively and feel safe, we are in the top quartile nationally for each of these measures.

While people accessing services reported they found it easy to find information and advice easy to access this was not necessarily true for some carers. However, it should be noted that the last benchmarkable data for carers is from 21/22. In the latest submitted survey (not yet published) we have seen an improvement of around 8 percentage points.

The Adult Social Care transformation programme includes a redesign of all webpages, information and advice and how the arrangements in place for people to access help and support. The service has also recently evaluated a number of innovation sites which were testing out new ways of working and the feedback from individuals and carers has been extremely positive. Plans are in place to develop these approaches across the service as a whole

During 23/24 the service received 169 compliments and 113 complaints



ASC Report - Quality, ASCOF - Overview Public snapshot ^ Data updated on 04/09/24, 09:13

# Care Market – Care Quality Commission Ratings

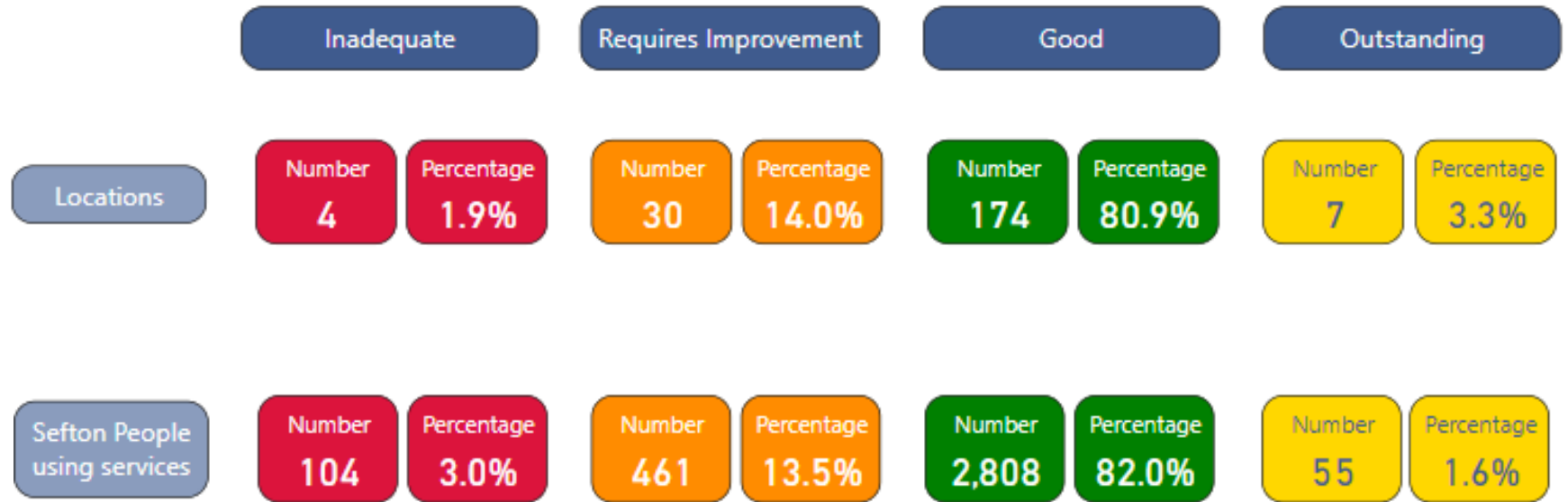
Currently 84% of registered providers in Sefton are rated good or outstanding.

Of the people that we are currently commissioning the care for, 84% are with providers rated good or outstanding.

104 people are placed with inadequate providers. This includes 2 Domiciliary Care Providers and 2 Nursing Homes, 1 of which is in Liverpool).

All individuals have been reviewed and active plans and risk mitigation is in place for all placements with those providers rated inadequate which includes oversight by both health and social care professionals. This can include suspension of new placements and targeted support for providers from the Council and NHS. Wherever required alternative support is arranged.

*August 2024 snapshot*



# Safeguarding Activity

The team receive on average 255 contacts (where members of the public or professionals have made contact to raise a potential concern).

All contacts are screened by safeguarding social workers and around 75% of contacts progress to become safeguarding referrals and are investigated further at that stage.

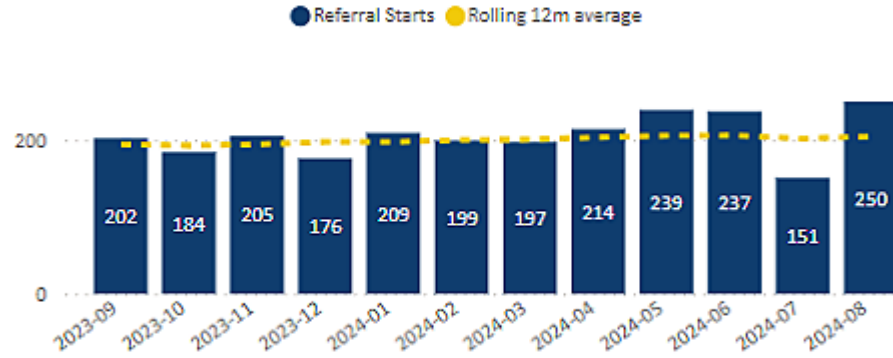
Whilst July saw a reduction in the number of safeguarding referrals progressing overall during the last 12 months there has been a 7% increase.

Safeguarding activity has remained high and at the end of August 392 were in progress (including section 42 enquiries).

Weekly oversight meetings of safeguarding activity and reporting to the Executive Director is in place.

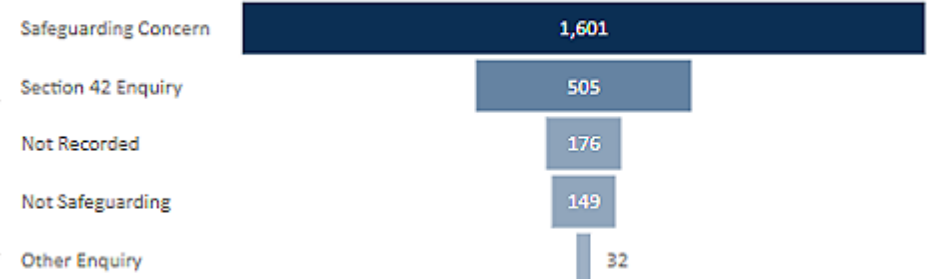
A review of the safeguarding team is just concluding which has considered processes, practice and capacity. Additional social work resource has been put in place to support enhanced screening and improve the timeliness of closing cases once all work has been completed.

**Referral Starts**

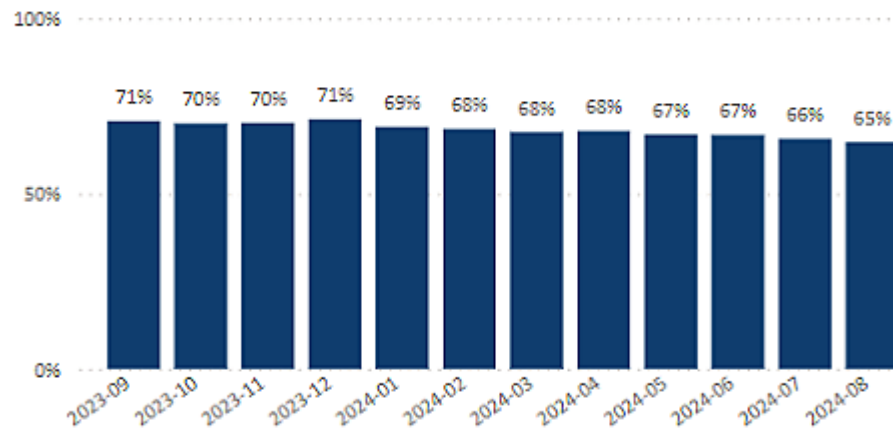


**Referral Starts by Type**

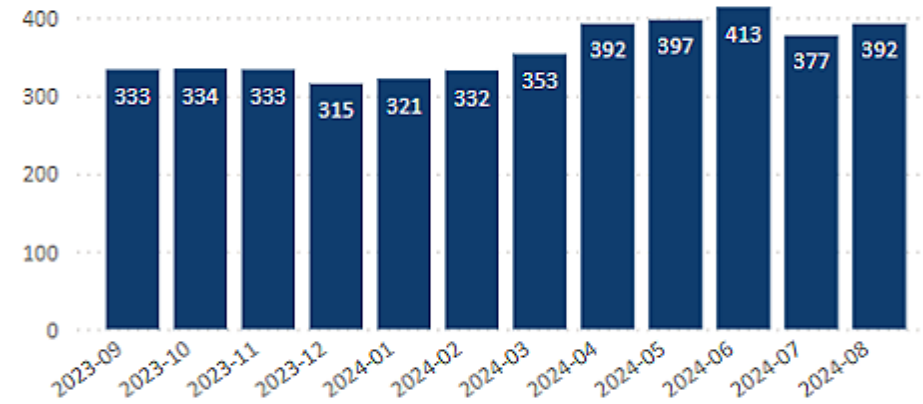
Latest 12 months



**Referrals Resolved within 28 days - rolling 12 months proportion**



**Referrals Open at Month End**



**Report Title:** Cabinet Member Update Reports

Date of meeting:	15 October 2024		
Report to:	Overview and Scrutiny (Adult Social Care and Health)		
Report of:	Chief Legal and Democratic Officer		
Portfolio:	Public Health and Wellbeing and Adult Social Care		
Wards affected:	All		
Is this a key decision:	No	Included in Forward Plan:	No
Exempt/confidential report:	No		

**Summary:**

To submit the Cabinet Member – Public Health and Wellbeing and Cabinet Member – Adult Social Care reports relating to the remit of the Overview and Scrutiny Committee for September 2024.

**Recommendation(s):** That the reports be noted.

**1. The Rationale and Evidence for the Recommendations**

- 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 The most recent Cabinet Member reports for Public Health and Wellbeing and Adult Social Care.

**2. Financial Implications**

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

(A) Revenue Costs – see above

(B) Capital Costs – see above

# Agenda Item 8

## 3. Legal Implications

- 3.1 Any legal implications associated with the Cabinet Member reports that are referred to in this update are contained within the respective reports.

## 4. Corporate Risk Implications

- 4.1 Any legal implications associated with the Cabinet Member reports that are referred to in this update are contained within the respective reports.

## 5 Staffing HR Implications

- 5.1 Any staffing HR implications associated with the Cabinet Member reports that are referred to in this update are contained within the respective reports.

## 6. Conclusion

- 6.1 The Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.

This report has therefore been submitted to comply with the decision of the Overview and Scrutiny Management Board.

## 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.

### Equality Implications:

There are no direct equality implications. Any equality implications arising from the consideration of any decisions contained in the update would have been/will be reported to members at the appropriate time.

(Please note that Council have agreed care experience should be treated like a protected characteristic.)

### Impact on Children and Young People:

There are no direct children and young people implications. Any children and young people implications arising from the consideration of any decisions contained in the update would have been/will be reported to members at the appropriate time.

### Climate Emergency Implications:

The recommendations within this report will have a Neutral impact.

There are no direct climate emergency implications arising from this report. Any climate emergency implications arising from the consideration of any decisions contained in the update would have been/will be reported to members at the appropriate time.

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

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

### (B) External Consultations

Not applicable.

### Implementation Date for the Decision:

With immediate effect.

Contact Officer:	Laura Bootland
Telephone Number:	0151 934 2078
Email Address:	Laura.bootland@sefton.gov.uk

### Appendices:

The following appendices are attached to this report:

**Appendix A** – Public Health and Wellbeing

**Appendix B** – Adult Social Care

This page is intentionally left blank



<b>CABINET MEMBER UPDATE</b>		
<b>Overview and Scrutiny Committee (Adult Social Care and Health)</b>		
<b>15 October 2024</b>		
<b>Councillor</b>	<b>Portfolio</b>	<b>Period of Report</b>
Mhairi Doyle	Public Health and Wellbeing	Sept 24

**Public Health**

**Public Health Quarterly Dashboard**

I was asked to approve the Q1 Public Health Quarterly Performance Dashboard at the September brief. The dashboard highlighted several areas where performance was considered to be going well.

These included:

- Harmful gambling charter mark
- HIV testing and related activities
- Sefton Child Poverty Strategy
- Sefton Healthy Advertising Policy

**Public Health Annual Report 2023**

I received an update about the 2023/24 Public Health Annual Report on Childhood Immunisations in Sefton.

The report will use a web-based microsite to produce an interactive multimedia resource designed to be used by both people who live and work in Sefton.

The resource will make use of a series of short videos produced by Sefton Council Communications team and will provide information around vaccinations, through work undertaken with experts in the region.

The report includes information on vaccinations and will include case studies of work that has taken place to improve access and uptake of children’s vaccinations in Sefton.

The microsite is due to go live in October 2024 - and will be regularly updated so that activity and up to date information can be added to the site throughout the year.

**Recommissioning Kooth Service**

I was presented with a paper summarising the recommissioning of the Kooth Digital Wellbeing Service for Sefton at the September Cabinet Member Briefing meeting. The paper detailed the intention to directly award the next contract to Kooth when it

# Agenda Item 8

## APPENDIX A

ends on December 31st 2024 in line with the recent PSR regulations. This decision was based on the independent evaluation of the service by moderators from Sefton Council Public Health team and the local ICB, facilitated by the Sefton Council procurement team.

### **Leisure**

#### **Leisure Update**

The report updated on activity and progress throughout June – July 2024.

As of 31st July 2024, there were a total of 14,570 members, which is an increase from the last report of more than 669 members from the same period last year.

The team at Bootle Leisure showed exceptional lifesaving skills faced with a pool emergency last month, when one of our regular morning swimmers suffered a cardiac arrest whilst swimming. The staff team successfully rescued the member from the pool and performed CPR and used the AED defibrillator to bring him back to life. They are a testament to the quality of the training provided, and are a credit, not only Sefton Council, but to the RLSS.

The final part of the Bunk Barn offer at Crosby Lakeside has now been completed as the grass roof has been installed and is looking absolutely fantastic. This area will be exclusively available to the group using the Bunk Barn and will be available for outside activities as well as providing an alfresco dining area.

In July the lake was hit with a blue green algae bloom resulting in the lake having to close towards the end of July, which unfortunately impacted all the courses and holiday activities that were scheduled.

Work continues with the Sefton Falls Strategy that Active Sefton are contributing to as part of the task and finish group led by Adult Social Care colleagues. Part of this has included attending 'Let's Talk About Falls' workshops which allowed the team to network and find out what other services are available to cross refer to. As an extension of this, the team are arranging an event/workshop for national Falls Prevention Week (w/c 23rd September) for Sefton residents, whereby the team are putting together a workshop on home safety, and basic strength and balance exercises for Sefton residents.

Planning and preparation for the 6-week summer holiday programme took place, with activities starting across Active Sefton sites from 24th July – 30th August.

Active Workforce delivered Southport's 5km & 10km events, both were a huge success, with over 200 participants competing on the night. Unfortunately, due to unforeseen repair work by United Utilities, the Crosby 5km had to be rearranged to September, however there are already a large number of participants signed up. The

# Agenda Item 8

## APPENDIX A

walking trip to Thirlmere and Helvellyn, once again was fully booked with 50 employees.

This page is intentionally left blank

<b>CABINET MEMBER UPDATE</b>		
<b>Overview and Scrutiny Committee (Adult Social Care) – 15<sup>th</sup> October 2024</b>		
Councillor	Portfolio	Period of Report
Ian Moncur	Adult Social Care	August-September 2024

### **Introduction**

It continues to be an extremely busy time for Adult Social Care and activity has remained high. The service continues to receive around 2,000 contacts per month from members of the public and other agencies relating to both new referrals for people who need assessment for care and support and from people who have existing services which need to be reviewed.

The service continues to support just over 4,200 people on a long-term basis. Since March 2024 this number has increased by around 4%. A full report on Adult Social Care performance is due to be presented to Overview and Scrutiny Committee at the October meeting.

The service continues to support the Southport recovery work and colleagues from Adult Social Care were involved in the first of many multi-agency events (held at the Atkinson Centre on 25<sup>th</sup> September) and will support to undertake a community impact assessment to understand and ensure the longer term support strategies, resources and capacity in place. The Executive Director for Adult Social Care, Health and Wellbeing has continued to chair the recovery and coordination meeting and works with Steve Martlew who has been appointed to lead the recovery program team for Sefton.

### **Preparation for Care Quality Commission Assurance and Assessment**

5 out of the 6 local authorities within the Liverpool City Region have now received their notification letters to inform them of the timeframe for their Assurance visits. No date has been received as yet for the onsite visit at Sefton. The service is continuing to focus on working through its improvement action plan which has been developed.

The service continues to be fully engaged with regional support which is in place including the Northwest ADASS Assurance group which is taking key learning from the 9 Local authorities that have already gone through the assessment process.

Both myself and Cllr Atkinson, Leader of Sefton Council and members of Overview and Scrutiny Community are due to meet Adult Social Care front line teams during October.

A comprehensive communication strategy is currently being finalised to ensure continued engagement, with people with lived experience, partners and staff regarding preparation and transformation. This will include gathering journeys of support directly from people and carers.

### **Safeguarding Adults Partnership Board**

The Safeguarding Adults Partnership Board is currently seeking the appointment of an Independent Chair and it is hoped that an appointment can be made prior to the end of 2024. Deborah Butcher is acting as Interim Chair until this appointment.

The Safeguarding Partnership Board Annual Report for 2023- 2024 has been finalised and is now in the process of being shared with Partners for wider circulation. Within this, Partners report on attainments over the previous 12 months and identify safeguarding priorities for the current period. A detailed account on achievements of the subgroups of the Board during the previous 12 months is also included. The Partnership website, launched in November 2022, had over 26,000 views during the period and the most popular areas visited on the website have proven to be the 'Learning Zone' and 'Protecting Adults'. The Website address is [www.seftonsab.org.uk](http://www.seftonsab.org.uk).

A refreshed three year Strategic Plan, detailing the core objectives, has been agreed by SAPB Members. The priority areas moving forward, focus on:

- strengthening Sefton's approach to making safeguarding personal and increasing community engagement
- improving understanding of themes, issues and trends relating to specific needs
- improved application of data analysis and research to inform the business of the Board, ensuring consideration of all aspects of risk within adult safeguarding and appropriate, proportionate and timely response where risk is identified.

A full update on the report and strategic plan will be brought to the next Committee.

The Partnership recognise and embrace inter-board relationships and are continuing to strengthen links between Sefton Safeguarding Adults Partnership Board (SSAPB), Sefton Safeguarding Children Partnership, Safer Sefton Together and Sefton Domestic Abuse Partnership Board.

### **Better at Home Transformation Programme**

Better at Home is the three year program transformation for Adult Social Care and Health, which is designed to support people to stay at home for longer with appropriate support and reduce the need for residential care. Work is progressing at pace and since the last Overview and Scrutiny Committee the service reports that the following has been undertaken:

#### **Market Shaping**

The commissioning of additional reablement to ensure greater availability and access across the borough continues. Short term delirium/dementia beds have been commissioned for people with cognitive issues so individuals can be safely transferred out of hospital.

### Urgent Care and Improving Access to Adult Social Care

Areas of rapid transformation have been identified to improve access to Adult Social Care for individuals and professionals. These include taking live calls, improved information and advice and additional social work capacity to improve response times with the aim of completing “today’s work today”. Care Transfer Hubs are now operational in both Acute Trusts (SDGH and Aintree), with Community Health partners and ASC staff forming multi-disciplinary teams to enable more timely discharges.

### Quality Assurance of Social Work Practice

The first evaluation has been completed with Partners for Change and one innovation site to embed the **three conversations model** and put the person at the centre of what we do. We are waiting the evaluation report but initial feedback from people who have accessed Adult Social Care through the innovation site is positive.

### Strategic Commissioning

#### New Directions

Work with Sefton New Directions is continuing with a focus on reablement and more specialist use of the beds in Chase Heys and James Dixon Court. Health and social care commissioners are working together to develop the wider Reablement offer through New Directions, with the aim of providing greater availability across the borough to support as many people as possible to regain and maintain their independence.

A report is scheduled to be submitted to Cabinet in November 2024 to provide an update on the transformation programme.

#### Care Homes and Quality

The service is working with health teams to support care home improvements. Fee consultation for 2025/26 will commence in the Autumn.

#### Carers Strategy

With the Carers Strategy now finalised, work begins, through the Sefton Carers Partnership Board, on the implementation plan. The Board will oversee progress against the strategy and actions agreed for the delivery plan. Work is also in progress using the National Accelerating Reform Fund to enhance the respite options currently available to Sefton Carers.

A Cabinet report is scheduled to be submitted to October Cabinet seeking approval to commence a procurement exercise for the delivery of Carers services post April 2025.

### Falls Strategy

Sefton's Falls Prevention Strategy 2024-2027 is currently progressing through the final sign off process. Overseeing the implementation of the strategy and delivery plan will be done by the new Sefton Falls Prevention Strategic Partnership Board which will be established and will commence the Delivery Plan Priority areas in October 2024. The Falls Strategy action plan has been formulated from the final Falls Strategy and has been sent out to key Stakeholders for their input. Working groups will then be established to deliver the action plan. Adult Social Care Commissioning team lead on the Falls Strategy implementation with input from Public Health and the ICB Place Team at Sefton.

### Quality Assurance

There has been a focus over the last few months around the quality-of-care provision. This follows concerns regarding a number of care homes where quality would fluctuate and deteriorate as soon as professionals stepped away. This has resulted in a review of the current way system partners support organisations where systematic, or organisational abuse cases are identified. Within Adult Social Care a new Quality Assurance Manager has been appointed on a secondment arrangement, while the role is advertised for a permanent position. This manager will continue to focus on ensuring there are suitable processes, procedures and professionals involved to provide the necessary assurances and oversight.

### Learning Disability and Autism

The Learning Disability and Autism Team began work on the 3<sup>rd</sup> June 2024. It was envisaged this team would manage all referrals for Learning Disability and Autism as well as all transition referrals. However since the formation of the team, it has been noted that there are a high number of transition cases that need allocating. It was agreed that x 3 additional social work posts would be recruited to focus on this work; at present one post has been recruited, with agency staff filling the posts whilst these are filled, although there is still a gap in terms of x 1 agency post.

All transition referrals have been prioritised accordingly and it is envisaged that once further agency social work posts are in place, this will support with the allocation of work needed.

The current rates of transition referrals have quadrupled over the past year; possible explanations for this are an increase in EHCP plans and increased awareness of neurodiversity.



### **Adult Social Care Budget**

The budget forecast for 2024/25 indicates a potential deficit of £3.425M for the year, based on expenditure as at the end of August and on current activity levels continuing for the remainder of the year. The most significant risk remains the costs of placements and packages of care, although there are pressures in other areas also. As would be expected due to the size of the budget and the inherent risks, updates are reported monthly to ASC senior managers and to the Cabinet Member.

The Council's overall Budget Monitoring report presented to Cabinet in October reports the forecast outturn overspend of £0.308m. However, it should be noted that there are a number of significant assumptions and uncertainties that could impact on the position before the year-end, including the achievement of a significant savings programme.

### **Adult Social Care Complaints, Compliments and MP Enquiries**

In August and September 2024, ASC received five compliments highlighting the compassion, knowledge and professionalism of the Adult Social Care staff team. We have received fifteen complaints to date and twenty-one Elected Members enquiries.

Eleven of the complaints received have been responded to within the expected timescale during this period, with four complaints received remaining open but within timescales. 100% of Elected Member enquiries were responded to within the expected timescale during this period.

In respect of the complaints received, those raised related to the following areas: decision making (5), fees and charges (3), advice and information (1), and the quality-of-service Provision (6).

Nine complaints have been upheld either fully or partially; two complaints were not upheld; four remain under investigation. Complaints upheld included a complaint about delays in allocation of a social worker, and problems with carers from an agency arriving late for visits.

All complaints are reviewed by the senior leadership team within Adult Social Care so learning and improvements can be taken forward across practice, process, and care provision. Learning is shared with practitioners across a number of forums within ASC. Listen and Learn notifications are shared across the Service with specific themes for learning. This month's Listen and Learning focused on recording standards and also provided guidance on the type of information that should (and should not) be input into a person's electronic record. One of the learning points has been that recording language must be clear and concise, not open to misinterpretation. The service is also reviewing how decisions regarding discretionary decisions about mandatory property disregards are explained to families following a Member Enquiry on this issue.



**Report Title:** Work Programme 2024/25, Scrutiny Review Topics and Key Decision Forward Plan

Date of meeting:	15 October 2024		
Report to:	Overview and Scrutiny (Adult Social Care and Health).		
Report of:	Chief Legal and Democratic Officer		
Portfolio:	Public Health and Wellbeing Adult Social Care		
Wards affected:	All		
Is this a key decision:	No	Included in Forward Plan:	No
Exempt/confidential report:	No		

**Summary:**

To seek the views of the Committee on the Work Programme for the remainder of 2024/25, identify potential topics for scrutiny reviews to be undertaken by informal meetings of the Committee; to identify any items for pre-scrutiny by the Committee from the Key Decision Forward Plan; to receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; to receive an update on the Joint Cheshire and Merseyside Scrutiny Committee, established to scrutinise the work of the Cheshire and Merseyside Integrated Care Board; and to receive an update by Healthwatch Sefton.

**Recommendation(s):**

That

- (1) the Work Programme for the remainder of 2024/25, as set out at Appendix A to the report, be noted, along with any additional items to be included and agreed;
- (2) the informal meetings of Committee Members and site visits to be undertaken during 2024/25, as set out at Appendix B be noted;
- (3) items for pre-scrutiny from the Key Decision Forward Plan which fall under the remit of the Committee, as set out in Appendix B to the report, be considered and

# Agenda Item 9

any agreed items be included in the work programme referred to in (1) above;

- (4) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be received;
- (5) 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; and
- (6) the update by Healthwatch Sefton be received.

## 1. The Rationale and Evidence for the Recommendations

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.

## 2. Work Programme 2024/25

- 2.1. The Work Programme of items to be submitted to the Committee for consideration during the Municipal Year 2024/25, as approved by Committee in June 2024, is set out in **Appendix A** to the report. The programme had been produced in liaison with the appropriate Executive Directors/Assistant Directors, whose roles fall under the remit of the Committee.
- 2.2 The Work Programme was produced based on items included in last year’s Programme.
- 2.3 Members are requested to consider whether there are any other items that they wish the Committee to consider, that fall within the terms of reference of the Committee. The Work Programme will be submitted to each meeting of the Committee during 2024/25 to provide Members with the opportunity to add items to the Programme.

## 3. Scrutiny Review Topics 2024/25

- 3.1 It has been usual practise for the Committee to appoint a Working Group(s) to undertake a scrutiny review of services during the Municipal Year.
- 3.2 However, over the last number of years the Committee agreed to hold informal meetings to consider topics for review rather than establishing Working Groups.
- 3.3 A schedule of the informal meetings so far for 2024/25 and site visits to be undertaken, is set out at **Appendix B**. The schedule will be updated during the Municipal Year as lines of enquiry develop and sessions take place.

# Agenda Item 9

- 3.4 The Committee is requested to comment on the schedule of informal activities to be undertaken during 2024/25 and note that additional items may be added to the schedule at future meetings of the Committee.
- 4. Pre-Scrutiny of Items in the Key Decision Forward Plan**
- 4.1 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.
- 4.2 The pre-scrutiny process assists Cabinet Members to make effective decisions by examining issues beforehand and making recommendations prior to a determination being made.
- 4.3 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.
- 4.4 The most recent Forward Plan was published on 30 September and covers the period 1 November 2024 – 28 February 2025 is attached at **Appendix C** for this purpose. For ease of identification, items listed on the Forward Plan for the first time appear as shaded.
- 4.5 There are three items within the current Plan that fall under the remit of the Committee on this occasion, namely:
- Sefton New Directions
  - Housing Strategy: People with Learning Disabilities and/or Autism
  - Healthwatch
- 4.5 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.
- 4.6 The Committee is asked to give consideration to items for pre-scrutiny from the Key Decision Forward Plan as set out in Appendix C to the report, which fall under the remit of the Committee and any agreed items be included in the Work Programme referred to above.
- 5. Liverpool City Region Combined Authority Overview and Scrutiny Committee**
- 5.1 As Members will be aware, the Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees considered a report on the guidance Page 89 Agenda Item 8 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).
- 5.2 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 (LCRCAO&S) be included in the Work Programme report considered at each Overview and Scrutiny Committee meeting.

# Agenda Item 9

5.3 In accordance with the above decision, information on the LCRCAO&S is set out below.

## 5.4 Role

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

The role of the Overview and Scrutiny Committee is to:

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

## 5.5 Membership

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

Sefton's appointed Members are Councillors Desmond, Hart and Hinde. Councillor Hart is Sefton's Scrutiny Link.

## 5.6 Chair

The Chair of the LCRCAO&S cannot be a Member of the majority group. The Chair and Vice-Chair of the Committee for 2024/25 are Councillors Steve Radford and Pat Moloney respectively.

## 5.7 Quoracy Issues

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

## 5.8 Meetings

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

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

Latest Meeting – 11 September 2024

Matters considered at the meeting related to the following items:

- Financial Performance April-July 2024
- LCR Freeport and Innovation Zone Progress Report
- Liverpool City Region Long Term Skills Plan
- Work Programme Update

The next meeting is scheduled to take place on 10 November 2024.

# Agenda Item 9

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

## 6. CHESHIRE AND MERSEYSIDE INTEGRATED CARE SYSTEM JOINT HEALTH SCRUTINY COMMITTEE

6.1 On 1 July 2022 the Health and Care Act required the Cheshire and Merseyside Integrated Care Board to commence operation.

6.2 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.

6.3 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.

6.4 The most recent meeting of the Cheshire and Merseyside Integrated Care System Joint Health Scrutiny Committee was held on 13 September 2024, in Huyton

6.5 Sefton's representatives on the Joint Health Scrutiny Committee for 2024/25 are Councillors Conalty and Desmond

6.6 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](#)

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

## 7. HEALTHWATCH SEFTON

7.1 An update of recent activities undertaken by Healthwatch Sefton is anticipated to be provided as **Appendix D** to this report, for information.

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

# Agenda Item 9

## 8. Financial Implications

8.1 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/informal meeting review will be reported to Members at the appropriate time.

(A) Revenue Costs – see above

(B) Capital Costs – see above

## 9. Legal Implications

9.1 None. Any legal implications arising from the consideration of a key decision or relating to a recommendation arising from a Working Group/informal meeting review will be reported to Members at the appropriate time.

## 10. Corporate Risk Implications

10.1 None. Any risk implications arising from the consideration of a key decision or relating to a recommendation arising from a Working Group/informal meeting review will be reported to Members at the appropriate time.

## 11 Staffing HR Implications

11.1 None. Any staffing/HR implications arising from the consideration of a key decision or relating to a recommendation arising from a Working Group/informal meeting review will be reported to Members at the appropriate time.

## 12 Conclusion

12.1 The Committee is requested to determine the Work Programme of items to be considered during the Municipal Year 2024/25 and identify scrutiny review topics which would demonstrate that the work of the Overview and Scrutiny 'adds value' to the Council.

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

## Alternative Options Considered and Rejected

No alternative options have been considered as the Overview and Scrutiny Committee needs to approve its Work Programme and identify scrutiny review topics.

<b>Equality Implications:</b>
There are no equality implications.
<b>Impact on Children and Young People:</b>
There are no direct children and young people implications arising from this report. Any children and young people implications arising from the consideration of reports referred to in the Work Programme will be contained in the reports when they are presented to



Members at the appropriate time.

**Climate Emergency Implications:**

The recommendations within this report will have a Neutral impact.

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.

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

This report is not subject to LD and FD comments. Any specific financial and legal implications associated with any subsequent reports arising from the report will be included in those reports as appropriate.

**(B) External Consultations**

None

**Implementation Date for the Decision:**

With immediate effect.

Contact Officer:	Laura Bootland
Telephone Number:	0151 934 2078
Email Address:	<a href="mailto:Laura.bootland@sefton.gov.uk">Laura.bootland@sefton.gov.uk</a>

**Appendices:**

Appendix A - Overview and Scrutiny Committee Work Programme for 2024/25

Appendix B – KDFP

Appendix C – Informal Meetings and Visits

Appendix D – Healthwatch Update

# Agenda Item 9

## **Background Papers:**

There are no background papers available for inspection.



**OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)  
WORK PROGRAMME 2024/25**

<b>Tuesday, 18 June 2024, 6.30 p.m., Town Hall, Bootle</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Luke Garner
2.	Scope and Development Process for New Pharmaceutical Needs Assessment 2025-28	Margaret Jones/Helen Armitage
3.	Public Health Performance Framework	Margaret Jones/Helen Armitage
3.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Laura Bootland
4.	Work Programme Update	Laura Bootland

<b>Tuesday, 3 September 2024, 6.30 p.m., Town Hall, Southport</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Shaping Care Together - Case for Change	Lisa Gilbert/Alexandra Kopec
2.	NHS Cheshire and Merseyside, Sefton - Update Report	Deborah Butcher/Lisa Gilbert
3.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Luke Garner
4.	Adult Social Care Assurance	Sarah Aldis
5.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Laura Bootland
6.	Work Programme Update	Laura Bootland

<b>Tuesday, 15 October 2024, 6.30 p.m., Town Hall, Bootle</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	North West Ambulance Service	Ian Moses
2.	NHS Cheshire and Merseyside, Sefton - Update Report	Deborah Butcher/Lisa Gilbert
3.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Deborah Butcher/Luke Garner
4.		
5.	Adult Social Care Performance Data Review	Sarah Aldis
6.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Laura Bootland
7.	Work Programme Update	Laura Bootland

<b>Tuesday, 7 January 2025, 6.30 p.m., Town Hall, Southport</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	NHS Cheshire and Merseyside, Sefton Place - Update Report	Deborah Butcher/Lisa Gilbert
2.	NHS Cheshire and Merseyside, Sefton – Primary Care Update	Lisa Gilbert/Jan Leonard
3.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Luke Garner
4.	Domestic Abuse Update	Mel Ormesher/Janette Maxwell
4.	Public Health Outcomes Framework (Min. No. 44 (4) of 03/01/23)	Helen Armitage
5.	Cabinet Member Update Reports x 2	Julie Leahair/Julie Elliot/Laura Bootland
6.	Work Programme Update	Laura Bootland

<b>Tuesday, 25 February 2025, 6.30 p.m., Town Hall, Bootle</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Cancer Alliance Update	Jon Hayes
2.	Public Engagement and Consultation Panel Annual Report 2024	Jayne Vincent/Cllr Dowd
3.	NHS Cheshire and Merseyside, Sefton Place - Update Report	Deborah Butcher/Lisa Gilbert
4.	NHS Cheshire and Merseyside, Sefton - Health Provider Performance Dashboard	Luke Garner
5.	Cabinet Member Update Reports x2	Julie Leahair/Julie Elliot/Laura Bootland
6.	Work Programme Update	Laura Bootland

This page is intentionally left blank



## SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

**FOR THE FOUR MONTH PERIOD 1 NOVEMBER 2024 - 28 FEBRUARY 2025**

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

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

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

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

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

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

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

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

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](http://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.*

**Phil Porter**  
**Chief Executive**



## FORWARD PLAN INDEX OF ITEMS

Item Heading	Officer Contact
Sefton New Directions	Neil Watson neil.watson@sefton.gov.uk Tel: 0151 934 3744
Housing Strategy: People with Learning Disabilities and/or Autism	Steve Metcalf steve.metcalf@sefton.gov.uk
Healthwatch	Rebecca Bond rebecca.bond@sefton.gov.uk

## SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	<b>Sefton New Directions</b> To update Cabinet on the Sefton New Directions transformation programme and to provide a 2025/26 budget position for the company.			
Decision Maker	Cabinet			
Decision Expected	7 Nov 2024			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Part exempt (Paragraph 3)			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Lead Director	Executive Director - Adult Social Care, Health and Wellbeing (Place Director)			
Persons/Organisations to be Consulted	Sefton New Directions and key partners such as Cheshire & Merseyside ICB.			
Method(s) of Consultation	Meetings and Emails.			
List of Background Documents to be Considered by Decision-maker	Sefton New Directions			
Contact Officer(s) details	Neil Watson neil.watson@sefton.gov.uk Tel: 0151 934 3744			

**SEFTON METROPOLITAN BOROUGH COUNCIL  
FORWARD PLAN**

Details of Decision to be taken	<p><b>Housing Strategy: People with Learning Disabilities and/or Autism</b></p> <p>The 9 councils in Cheshire and Merseyside (Cheshire East, Cheshire West, Halton, Knowsley, Liverpool, Sefton, St Helens, Warrington and Wirral) with NHS Cheshire &amp; Merseyside Integrated Care System (ICS) work together in order to commission and deliver the right mix of housing, care and health services required by people with learning disabilities and/or Autism who have care and support needs. The purpose of this Housing strategy for people with learning disabilities and/or Autism is to set out the requirement for and the opportunities to develop good quality housing and supported housing to meet the needs of the population of people with learning disabilities and/or Autism in Cheshire and Merseyside.</p>			
Decision Maker	Cabinet			
Decision Expected	7 Nov 2024			
Key Decision Criteria	Financial	No	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Adult Social Care			
Lead Director	Executive Director - Adult Social Care, Health and Wellbeing (Place Director)			
Persons/Organisations to be Consulted	Sefton Officers; Members; MerseyCare; People First; Carers Centre; Autism Sub-Group; and Cheshire and Merseyside partners			
Method(s) of Consultation	Meetings; Emails; and sharing of information			
List of Background Documents to be Considered by Decision-maker	Assessment of future accommodation with support needs Assessment of future accommodation with support needs Housing Strategy: people with learning disabilities and/or Autism			
Contact Officer(s) details	Steve Metcalf <a href="mailto:steve.metcalf@sefton.gov.uk">steve.metcalf@sefton.gov.uk</a>			



**SEFTON METROPOLITAN BOROUGH COUNCIL  
FORWARD PLAN**

Details of Decision to be taken	<b>Healthwatch</b> To seek approval to commence a procurement exercise for Healthwatch services.			
Decision Maker	Cabinet			
Decision Expected	7 Nov 2024			
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 - Adult Social Care, Health and Wellbeing (Place Director)			
Persons/Organisations to be Consulted	Stakeholders and partners - such as Cheshire and Merseyside ICB.			
Method(s) of Consultation	Internal meetings & emails; Meeting with partners and stakeholders			
List of Background Documents to be Considered by Decision-maker	Healthwatch			
Contact Officer(s) details	Rebecca Bond rebecca.bond@sefton.gov.uk			

This page is intentionally left blank



**OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH)  
INFORMAL MEETINGS / WORKSHOPS 2024/25**

Day/Date/Time/Venue to be arranged.		
No.	Report/Item	Organiser
1.	Meeting with Adult Social Care Teams - <b>16<sup>th</sup> October</b> With a view to arranging a meeting/event with social workers TBC	Laura Bootland
2.	Visit to Southport Hospital – <b>Took Place 13<sup>th</sup> September</b>	Laura Bootland
3.	Primary Care Services and the state of Primary Care Estate – <b>November 2024</b> <b>tbc</b>	Laura Bootland/Jan Leonard
4.	Visit to A&E at the Royal Liverpool University Hospital or Aintree Hospital site	Laura Bootland/TBC

This page is intentionally left blank



**OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) – 15 OCTOBER 2024**

**Update from Healthwatch Sefton**

- We have presented a report to Sefton Primary Care Forum (September) sharing feedback from People First Merseyside, their members being keen to see if any learning/ adjustments could be made in GP practices for those with a learning disability. Practical issues include difficulties booking appointments and checking in at the practice when they have a face-to-face appointment. Using online services that GP practices have in place can be difficult and concerns about how the flag system on IT systems wasn't consistently used to record and implement reasonable adjustments. 4 key questions requiring answers are listed below and after presenting them at the forum meeting, Jan Leonard will be sharing a formal response with us:
  1. How are patients with a learning disability told that they can ask for longer appointments?
  2. Are staff being trained to recognise patients with a learning disability or other hidden disabilities? (A number of members in the group said that through their involvement with People First Merseyside, they felt comfortable asking the receptionist to book them in for their appointment. It was suggested that staff in the GP reception need to be willing to show patients who struggle to use the patient self-check-in system. It was shared by members that some patients with a learning disability cannot use the check-in system and that they felt staff were not trained to help patients with a learning disability.)
  3. Booking appointments online, members shared that this is great for patients who can use it but asked because of this system is that why there are no appointments left when they ring?
  4. Medication reviews for patients with a learning disability – is there a policy in place for this?

- Through our community champions based in the Seaforth locality we know that residents are feeling neglected, with Seaforth Village Surgery closed and one of their local pharmacies closed (Boots). We therefore spoke with and listened to residents living in Seaforth, holding during outreach sessions. We were also invited to a sheltered housing scheme to talk to residents about the on-going closure of Seaforth Village practice and the impact this was having on them. Healthwatch has been asking both PC24 and NHS Cheshire and Merseyside when the Seaforth practice will re-open. In the interim, patients in the locality have been telling us about difficulties travelling to Litherland Practice, this including;
  - No direct public transport to the Litherland Practice
  - Patients with mobility issues or no personal transport
  - Difficulties and safety for residents crossing the busy dual carriageway
  - The subway, although this can be used, residents shared safety reasons for not wanting to use it during the evening.

They also told us that the Litherland practice has not been proactive in putting reasonable adjustments in place with patients having to travel there, examples including having to travel to Litherland to hand in prescription requests, this impacting those patients with no access to digital services. After listening to the residents of Seaforth, we agreed to put forward the following areas to be considered:

- Being open and honest in a timely manner with Seaforth residents, to send out regular communications to patients, including those with no IT access, with an update on progress and when Seaforth Village practice will open.
- Ensure front line staff at the Litherland practice are briefed so that they are able to answer patient questions on the opening of Seaforth Village practice
- Put into place reasonable adjustments for Seaforth patients and ensure they are aware they can ask for this.
- Keep stakeholders, including Healthwatch up-to-date on progress with the opening of Seaforth Village practice.

The draft report was sent for review and a request for a formal response to PC24 (Sharon Poll, Head of Service, Primary Care) using our statutory powers of a response within 21 working days. This was breached. A response has since been received which is being reviewed but further communication with PC24 is needed as we still do not have a date for the reopening of the practice which if opened could provide wider support for residents health and care needs in this locality.

- We are supporting NHS Cheshire and Merseyside and Mersey and West Lancashire Teaching Hospitals NHS Trust to evaluate the experience of patients, their family members/ informal carers who are referred into the Southport Transfer of Care Hub (TOCH) to support the coordination of their discharge to ensure safe and timely discharges. The project has commenced and we await details of those who wish to share their independent feedback. A report will be produced at the end of the pilot.
- For Adult Safeguarding week, we are working with Sefton Adults Safeguarding Partnership Board, to lead on a 'Lunch and Learn' session for staff. We are engaging with Healthwatch Knowsley, Liverpool and Wirral who will join our session to find out more about the role of Healthwatch, our structures and how staff can engage with us. The session will be held at 12 noon on Tuesday 19<sup>th</sup> November.
- Healthwatch Sefton has promoted the face-to-face and online meetings being held to engage on the 'Shaping Care Together' programme and has been encouraging residents and organisations to engage. Through Healthwatch input, we were able to get the programme to draft and produce an easy read survey to accompany the easy read version of the options appraisal. We have encouraged People First Merseyside to hold a session and they have completed surveys which we will be sharing back with the programme team.

- Our Annual Report was published in July and if you already haven't read this, you can find it on our website

<https://healthwatchsefton.co.uk/reports/annual-reports/>

John Turner, Healthwatch Sefton Chair said: "During another demanding year of continuing health and social care pressures, Healthwatch Sefton has responded positively and vigorously and we wish to thank all our staff and volunteers for their contribution. Our vibrant network of locality based champions and community ambassadors, listens, gathers and responds to the in-depth real life individual experiences of our residents"

## **Reports / Research from our national body, Healthwatch England.**

[A local diagnosis: Learning the lessons of Community Diagnostic Centres \(September 2024\)](#)

[https://healthwatchsefton.co.uk/wp-content/uploads/2024/09/20240828\\_A-local-diagnosis-Learning-the-lessons-of.pdf](https://healthwatchsefton.co.uk/wp-content/uploads/2024/09/20240828_A-local-diagnosis-Learning-the-lessons-of.pdf)

Community Diagnostic Centres could provide another pathway to care at a time when people are struggling to access services. But how do we maximise their potential?

In Healthwatch England latest research, we unpack people's experiences of diagnostic hubs and put forward recommendations. Discover what diagnostic hubs are teaching us about community-based care – and how we can apply these lessons to the broader care landscape

[Healthwatch England Survey reveals: Women in England want at home cervical screening tests on the NHS \(September 2024\)](#)

<https://healthwatchsefton.co.uk/news/healthwatch-england-survey-reveals-women-in-england-want-at-home-cervical-screening-tests-on-the-nhs/>

A poll of 2,444 women hesitant about cervical screening has shown that three-quarters, 73%, would use a home testing kit if it was

available free on the NHS. Healthwatch England commissioned the poll to provide solutions to address hesitancy about cervical screening in a drive to support NHS England's ambition to eliminate cervical cancer by 2040.

### **Diane Blair BA (Hons) MSc**

Manager.

07706 317749

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

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

**Freephone:0800 206 1304**

If you would like to keep up to date with us, please follow us on social media. Here are the links to our pages:

Instagram <https://www.instagram.com/healthwatchsefton>

Facebook <https://www.facebook.com/healthwatchsefton2013>

Twitter <https://www.twitter.com/HWatchSefton>



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

[www.healthwatchsefton.co.uk](http://www.healthwatchsefton.co.uk)

This page is intentionally left blank