

FAMILIES AND WELLBEING POLICY AND PERFORMANCE COMMITTEE

Tuesday, 8 July 2014

Present: Councillor M McLaughlin (Chair)

Councillors D Roberts B Berry
T Johnson P Hayes
T Norbury M Hornby
W Smith C Povall
C Spriggs P Cleary
J Williamson Gilby
W Clements

Also Present: Ms Jo Goodfellow, Wirral University Teaching Hospital
Ms Suzanne Edwards, Cheshire and Wirral Partnership
NHS Trust
Mr Simon Gilby, Wirral NHS Community Trust

Deputies: Councillor I. Williams (in place of Councillor Brightmore)
Councillor P. Gilchrist (in place of Councillor Brighthouse)

1 MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST / PARTY WHIP

Councillor Hornby declared a personal interest by virtue of his appointment as a trustee/Director of the Voluntary and Community Action Wirral.

Councillor Cleary declared a personal interest by virtue of his wife's employment.

Councillor Gilchrist declared a personal interest by virtue of his appointment with Cheshire and Wirral NHS Partnership Trust.

2 MINUTES

RESOLVED:

That the Minutes of the Families and Wellbeing Policy and Performance Committee held on 8 April 2014 be approved.

3 **CLATTERBRIDGE CANCER CENTRE - PROPOSED REORGANISATION**

The Committee considered a verbal presentation from representatives from the Clatterbridge Cancer Centre, regarding the planned consultation.

Dr Nicky Thorpe, Clinical Lead, outlined the work that had taken place in Cheshire and Merseyside to consider and bring forward proposals for the development of world class cancer services in Cheshire and Merseyside through the establishment of a new Cancer Centre in Liverpool in conjunction with the Clatterbridge Cancer Centre NHS Foundation Trust, while retaining many services at Clatterbridge to ensure local access, and the further development of services across the area, to include an enhanced research facility.

Dr Thorpe reiterated that they would continue to offer services on Wirral, with 90% of patients living in Wirral being receiving treatment in Wirral from 2018.

Ms Fiona Jones, Project Director highlighted the processes to be undertaken and the timescales to which the project would be working to. It was scheduled that the new Cancer Centre at Liverpool would be completed by autumn 2018 and refurbishment of Clatterbridge would be done a further nine months later. Work on the Liverpool site would hopefully start in July 2016, subject to business case approval, planning permissions and the detailed design being signed off.

The business case was due for sign off early 2015-early 2016 and prior to this would be taken to the Board for sign off; further consultation would be undertaken with consultants.

Ms Jones indicated that all Merseyside and Cheshire local authorities Scrutiny Committees were being asked to determine whether the proposed changes at Clatterbridge Cancer Centre were deemed to be a substantial variation to service for to their residents. If Committees agree it to be so and at least one other Merseyside & Cheshire local Authority also agree that the changes were a substantial variation to service for them too, the new protocol for joint health scrutiny would come into play. In those circumstances, a Joint Scrutiny Committee across the participating authorities would be created for the duration of the review. It was currently anticipated that a number of the Merseyside & Cheshire local Authorities would be participating in this process.

Ms Jones further indicated that a public consultation exercise would be undertaken during July-September 2014 and she would be working in consultation with NHS England.

Ms Jackie Robinson, Commissioning Support Unit, highlighted the consultation undertaken to date and the feedback received so far.

Pre-consultation process was undertaken in August 2012. Officers from the Trust consulted with a wide range of people including members of the public, community voluntary sector, patient groups, Healthwatch, cancer groups, clinicians and local authority Overview and Scrutiny Committees.

To date 90,000 people had completed the online consultation and attended the roadshows undertaken.

Following the consultation exercise, concerns had been raised by residents mostly living within the CH63 and CH64 postal area regarding access, extended travel, tunnel fares and parking facilities.

Ms Robinson indicated that all feedback received would be used to forward plan and that feedback received to date had proved positive for the move to Liverpool. However, there would be a continual dialogue with the public addressing all feedback received.

A consultation process would be undertaken following NHS England sign off and an information event would be held with GP's and universities etc. Two further events would be held for the CVS, Healthwatch and Community Champions.

In response to Members' comments, Ms Robinson indicated that there were comprehensive plans in place to undertake formal consultation and agreed to share this with Members.

In relation to parking charges, Ms Jones indicated that the Chief Executive had reiterated that the free parking for Cancer patients would remain on the new site at Liverpool.

The Committee was reassured that the high level of standards would be carried through to the new centre encompassing the ethos of Clatterbridge.

The plans highlighted by the Trust and reiterated that this proposal was not just about the building, it was about better outcomes for patients and better treatment access.

In response to comments, Ms Jones indicated that discussions had been held with CCG's and GPs but there was a need to consult with them further.

Dr Thorpe responding to Members' comments said that £11m would be invested into the Clatterbridge site. She expected all staff to continue to be employed although some people may change their place of work. Catering facilities management was provided through a separate organisation and with

there being no in-patients on the future site there would be some loss of catering staff.

RESOLVED: That

- (1) the proposals of the Clatterbridge Cancer Centre (CCC) NHS Foundation Trust seeking to reorganise service delivery affecting Wirral be noted and Ms Jones, Dr Thorpe, Ms Robinson and Ms Scott be thanked for their informative presentation;**
- (2) in response to the formal consultation undertaken in respect of the proposals of Clatterbridge Cancer Centre NHS Foundation Trust, it be agreed that the proposals are a substantial development or variation in service for Wirral;**
- (3) further to (2) above, the following members be appointed to the Joint Health Scrutiny Committee which will further consider the proposal relating to Clatterbridge Cancer Centre NHS Trust in accordance with the “Protocol for the Establishment of Joint Health Scrutiny Arrangements for Cheshire and Merseyside”;-**

**Councillor Moira McLachlan
Councillor Wendy Clements**

Deputies

**Councillor Denise Roberts
Councillor Cherry Povall**

**** Two further Members are to be nominated by their political groups.**

4 TWO YEAR PLAN - NHS ENGLAND AREA TEAM

The Committee considered the report of Mr Andrew Crawshaw, NHS England outlining the national and regional context together with specific update on priorities that the Area Team was responsible for delivering and how these priorities were progressing. The report also summarised the proposed initiatives in the Operational 2 year plan for commissioned services. It also provided a brief report card on the initiatives pursued in 2013-14 and the outcomes from these so far.

Mr Crawshaw indicated that in relation to the dental review, this was ongoing and there would be more opportunity for discussion in the future.

In response to a Member, Mr Crawshaw indicated that the 40% reduction in costs upon completion of the amalgamation and redesign of Primary Care Support Services related to administration costs not a reduction in GP services.

Ms F Johnstone, Director of Public Health/Head of Policy and Performance informed the Committee that it was the intention to extend the bowel screening programme to those aged 55.

In response to Members, Mr Crawshaw indicated that NHS England were looking to provide different models of care; assess how GPs could best be supported within the community and maintain patients within their own homes.

In relation to the Healthy Child Programme, Mr Crawshaw indicated that this was a national programme for all health visitors across England.

RESOLVED: That

- (1) the contents of the report be noted;**
- (2) the Committee be requested to build the specific initiatives into the Committee's work plan over the next two years as advised.**

5 FUTURE COUNCIL

This report provided the Families and Wellbeing Policy & Performance Committee with an update as to the progress of the Future Council project, as well as an opportunity to engage with and influence the emerging options which were being developed in order to transform the Council and achieve the savings required of the Council.

The emerging options would be further developed and then published by the Chief Executive, as officer budget options, for full public, staff and service user consultation in September 2014.

Ms Clare Fish, Strategic Director introduced the report and in response to Members indicated that in relation to the out of hours provision, one of the cross cutting options to be considered was looking at combining the various out of hours services into one multi functional service.

In relation to LAC (looked after children) the department would be looking into the packages of care which took up a significant part of the budget allocation. Officers would be looking at how children became LAC to ensure that they didn't come into the care system too quickly or unnecessarily, and also that children did not remain looked after for longer than necessary.

Ms Fish further indicated that she was pleased to note that the number of children subject to a child protection plan and Children in Need was reducing and that the Department was working with other local authorities on various initiatives and sharing best practice.

Members suggested that workshops be held on the proposals for Future Council to enable Members to focus more time on the proposals being put forward in September.

Members also requested that the scrutiny process should be accessible to the public.

RESOLVED:

That the report be noted.

6 ARRANGEMENTS FOR THE ATTAINMENT SUB-COMMITTEE

This report enabled members to approve the terms of reference and nominate the membership to the Attainment Sub-Committee for the 2014/15 municipal year.

RESOLVED: That

- (1) the terms of reference for the Attainment Sub-Committee be approved;**
- (2) the following nominations for members to the Attainment Sub-Committee be agreed as follows:- Councillors M. McLaughlin, T. Norbury, P. Brightmore, W. Smith, W. Clements, P. Hayes and A. Brighthouse; and**
- (3) the appointment of Deputies shall take effect upon the Group Leaders of each political group notifying the Head of Legal & Member Services of their deputy nominations.**

7 ARRANGEMENTS FOR THE HEALTH AND CARE PERFORMANCE PANEL

This report enabled Members to approve the terms of reference and nominate the membership to the Health and Care Performance Panel for the 2014/15 municipal year.

RESOLVED: That

- (4) the terms of reference for the Health and Care Performance Panel Sub-Committee be approved;**
- (5) the following nominations for members to the Health and Care Performance Panel Sub-Committee be agreed as follows:- M. McLaghlin, D. Roberts, T. Johnson, C. Spriggs, W. Clements, C. Povall and A. Brighthouse.**
- (6) the appointment of Deputies shall take effect upon the Group Leaders of each political group notifying the Head of Legal & Member Services of their deputy nominations.**

8 FAMILIES AND WELLBEING DIRECTORATE - KEY ISSUES FROM DEPARTMENTAL PLAN

The Committee considered a verbal update from Ms Clare Fish, Strategic Director, Families and Wellbeing Being, Ms Julia Hassall, Children's Services Director, Graham Hodkinson, Director of Adult Social Services and Fiona Johnstone, Director of Public Health/Head of the Policy and Performance highlighting their departments key objectives and challenges for 2014/15.

In response to Members, Mr Hodkinson indicated that in respect of care provision there would be some new build and some refurbishment provision and agreed to share with Members information in relation to the schemes to be undertaken.

Mr Hodkinson, in response to a member, indicated that there are to be legislative changes from 2015 with major changes in 2016, the key change being for those people currently paying for their own support.

The Government wanted to make provision so people would no longer have to sell their houses to pay for their care, people could be charged for their support once they reached a potential limit. Government would set a limit as to how much somebody would have to pay in their lifetime

In relation to Public Health, Ms Johnstone indicated that Age Concern and the Public Health Team had been lobbying the Government for some national policy on betting shops as they were often located in deprived communities. Still trying to understand the legal position of what the Council could do.

In response to a Member, Ms Johnstone indicated that a spotlight session was being planned regarding health inequalities.

In relation to E-cigarettes nationally Public Health were trying to ascertain what the current situation was. These products were becoming increasingly popular and Ms Johnstone indicated that anxiety had been expressed that these products could normalise smoking, however, more evidence was needed.

In response to a Member, the Chair suggested that the Co-ordinating Committee could look at undertaking a cross cutting exercise to look at departments across the Council in particular licensing and planning processes to identify what the Council could and could not do to help the Council bridge the gap in relation to alcohol and smoking and also cumulative impact.

In response to a Member, Mr Hodgkinson indicated that there was a long way to go for Council to give the right sort of information for people to make choices, as to how they may go about supporting themselves.

Ms Hassall in response to Members indicated that Wirral in comparison to other authorities did not pay Social Workers well; the authority did have a number of incentive schemes, but the baseline pay needed to be reviewed. There would be a piece of work undertaken as part of the Future Council project to be done by September at the latest in relation to the rates of pay. There was a need to get pay on a comparable level to neighbouring authorities.

It was the Department's intention to try and retain those Social Workers with considerable expertise.

RESOLVED:

That the Families and Wellbeing Directorate update be noted.

9 FAMILIES AND WELLBEING DIRECTORATE DASHBOARD REPORTS

The Committee considered the report of the Strategic Director of Families and Wellbeing and the Director of Public Health/Director of Policy and Performance which provided an update in relation to the 2013/14 Year End performance of the Families and Wellbeing and Public Health Directorates against the delivery of their Directorate Plans for 2013/14 whilst also providing an update of current performance (as at 31st May 2014) against the 2014/15 Directorate Plans.

The report translated the priorities set out in the Directorate Plans into a coherent and measurable set of performance outcome measures and targets. Members were requested to consider the details of the report and highlight any issues.

The Directorate Plan 2013/14 Year End Performance Report set out performance against 38 outcome measures for 2013/14, 28 were rated green, 4 were rated amber and 6 were rated red. The 6 measures rated red had action plans which referred to:

- Smoking Quitters (4 weeks)
- Smoking status at time of delivery: rate per 100 maternities
- Proportion of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months
- Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population
- Overall satisfaction of people who use services with their care and support
- Proportion of people who use services who say that those services have made them feel safe and secure

The Families and Wellbeing and Public Health Directorate Plans 2014/15 set out the key functions the Directorates were responsible for and the contribution they made to the delivery of the Corporate Plan priorities. The plans would be monitored through the Performance Dashboard which contained 57 measures for 2014/15.

Data was currently available for 7 of the 2014/15 measures all of which were rated as Green.

In relation to the number of children Looked After, Ms Hassall indicated that there were 677 children at the end of March, to date the figure had increased to 690. There were plans for the next two years to take £2 million pounds out of the LAC budget, £500,000 for January till the end of March 2015. Ms Hassall confirmed that there were clear plans in place, although this will remain a challenging target.

RESOLVED: That

- (1) the Directorate Plan be noted; and**
- (2) the information contained within the report be used to inform the Committee's future work programme.**

10 FINANCIAL MONITORING

The Strategic Director for Families and Wellbeing presented the report of the Director of Resources, which set out financial monitoring information for Month 2 (May 2014), to ensure consistency across Policy and Performance Committees and provide sufficient detail for Members to scrutinise budget performance for the Directorate.

RESOLVED –

That the report be noted.

11 WORK PROGRAMME

The Committee considered the report of the Chair of the Committee, updating on the progress and the activity proposed for this Committee in relation to its agreed Work Programme.

The Chair indicated that the Committee needed to look at its workload and prioritise. Two sub-groups had now been established focusing on attainment and health & care performance.

The Chair indicated that she would be meeting with the Vice-Chair and Spokespersons to discuss the work programme and prioritise the workload; this would enable the agendas to be more manageable and enable the Committee to focus on the big issues.

Initially, there would be four spotlight sessions arranged which were as follows:

- NHS framework
- Care Act
- Children and Families Act
- Health Inequalities

In relation to reports it was suggested that those report for “noting” be circulated as hard copy and via email to Members and included on the agendas for future meetings only if Members felt it appropriate. Reports would be published and be noted as part of the Work Programme report.

RESOLVED: That

- (1) the Work Programme be noted;**
- (2) the Chair and Vice-Chair and Group Spokespersons develop the work programme further and undertake the prioritisation work outlined within the report;**

- (3) the proposed changes outlined in Paragraph 5 of the report to improve the effectiveness of the Committee be approved and that these changes be reviewed by the Committee in February 2015.**

12 BARNADOS VIDEO - YOUNG CARERS

Due to technical difficulties the members were unable to view the video in relation to Young Carers.

RESOLVED:

That the link to the video be emailed to Members in order for them to view its contents.