

# **FAMILIES AND WELLBEING POLICY AND PERFORMANCE COMMITTEE**

Monday, 2 February 2015

Present: Councillor M McLaughlin (Chair)

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

Also Present:

Mr Simon Gilby, Wirral NHS Community Trust  
Ms Suzanne Edwards, Cheshire and Wirral Partnership Trust  
Mr Anthony Hassall, Wirral University Teaching Hospital

36 **MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST / PARTY WHIP**

No declarations of interest were received.

37 **MINUTES**

**RESOLVED:**

**That the Minutes of the Families and Wellbeing Policy and Performance Committee held on 2 December 2014 be approved.**

38 **MINUTES OF ATTAINMENT SUB COMMITTEE - 10 DECEMBER 2014**

**RESOLVED:**

**That the Minutes of the meeting of the Attainment Sub-Committee held on 10 December 2014 be noted.**

39 **REPORT OF THE CHAIR FROM MEETINGS OF THE HEALTH & CARE PERFORMANCE PANEL HELD ON 19 NOVEMBER 2014 AND 11 DECEMBER 2014**

The Chair of the Health and Care Performance Panel introduced the report which provided feedback on the key issues arising from the meetings held on 19 November 2014 and 11 December 2014.

**RESOLVED:**

**That the report of the meetings of the Health and Care Performance Panel held on 19 November 2014 and 11 December 2014 be noted.**

40 **SEXUAL HEALTH SERVICE - PROPOSAL FOR SERVICE CHANGE**

The Committee considered the report of the Wirral Community Trust informing of the consultation on the proposed change to the service delivery for the sexual health service.

Mr Neil Perris, Divisional Manager, Lifestyle Services, and Ms Toni Gleave, Service Lead, Sexual Health Wirral, Wirral Community Trust introduced the report which highlighted the rationale for the clinical review indicating that the service had identified a number of issues at Birkenhead Medical Building (BMB) and Moreton which had a detrimental impact on patient experience and the quality of the service offered. These issues related to room availability, IT connectivity, the set up and take down of clinics, waiting room, levels of patient activity and the clinic environment. These were detailed in appendix A to the report.

The report concluded by setting out the recommendations for the proposed changes.

Mr Perris indicated that as high percentages of patients indicated that they attended Moreton and BMB based on day/time of operating, it was recommended that both BMB and Moreton clinic services be transferred to alternative venues within Sexual Health Wirral (SHW) in April 2015. To ensure clinic capacity was not reduced in the overall timetable a clinic within St Catherine's Health Centre would be initiated on a Wednesday evening. Opening hours of the Arroe Park clinic which took place every Friday would also be extended. Both venues offered higher quality facilities including facilities to conduct cryotherapy and microscopy which were not available in spoke clinics.

It was reported that proposing closures in April 2015 allowed a period of patient engagement to take place to ensure that regular users of both clinics were aware of all planned changes. This would also allow for a comprehensive communication and marketing strategy to be put in place

making use of media and social media to communicate with the local community and local stakeholders.

Both changes would be implemented concurrently moderating any upheaval to service users. The SHW timetable would be subject to one change and then circulated widely to all local stakeholders (including GPs, Children's Centres, pharmacies, local colleges, school nurses etc). Information would be placed in the GP bulletin and be placed on Staffzone (Wirral Community Trust intranet).

It was reported that the website would remain fully updated along with Facebook pages and Twitter account. Adverts and information in local newspapers would also be utilised.

Staff currently working in these clinics would be relocated to other clinics within SHW with a focus on particularly busy clinics which would reduce patient waiting times and improve the patient experience.

Increases to the outreach element of the service would continue and staff from Livewell would continue to be trained to ensure that patients were offered sexual health information and some limited interventions during one to one consultations and outreach events, particularly with hard to reach groups.

In response to a member, Ms Gleave indicated that research had shown that there had been an increase in the number of patients 40-46 year age bracket presented with an STI over the past few years. Under the new arrangements, patients would be seen in a much more appropriate environment for e.g. GP surgeries and separate waiting areas.

**RESOLVED: That**

- (1) the report be noted; and**
- (2) Mr Perris and Ms Gleave be thanked for their informative report and presentation.**

41 **WIRRAL UNIVERSITY TEACHING HOSPITAL - UPDATE**

The Committee considered three update reports from Wirral University Teaching Hospital (WUTH) in relation to their:

- Cost Improvement Plan
- Compliance with the 4 Hour Standard (A&E Target)
- Financial Position up to November 2014

Mr Anthony Hassall, Director of Strategic and Organisational Development introduced the reports and indicated that in relation to the financial position up to December 2014 the WUTH was reporting a deficit of £5.2 million; the planned end of year deficit was £4.2 million. Mr Hassall indicated that although the Hospital was currently “off plan”, the Cost Improvement Plan measure would improve this. Mr Hassall explained that over 80% of NHS organisations had reported a deficit; this was due to the increase in demand.

Mr Hassall reiterated that the Trust was working alongside their partners to ensure that the hospital was maximising its efficiency and savings whilst ensuring it delivered a high standard of excellent care with patient safety a priority. All measures and savings schemes implemented were rigorously tested to ensure there was no risk to either quality or patient safety.

In relation to A& E targets, Mr Hassall explained that the Trust were working alongside partners and met regularly with members of the Urgent Care Network to discuss the issue and gain a better understanding of Urgent Care.

There had been nation-wide press coverage of the A&E pressures which had been heightened during the Christmas and New Year period. Mr Hassall reported a quarter three performance position of 92.24% against the 95% standard. The hospital’s priority was to deliver a safe and high quality care, and where possible manage patient’s conditions within the community to ease the pressure on the A&E service.

In response to a Member, Mr Hassall indicated that the variation in year often related to receipt of grants relating to education i.e. training of junior clinicians throughout the year.

In response to a Member’s question in relation to the future of A& E at Arrowe Park, Mr Hassall indicated that the Board were very clear that it was critical that Arrowe Park needed to deliver an A&E service. WUTH had made significant investment in staffing to help deliver a high quality service. This year and last year WUTH had improved the infrastructure through investment.

Mr Hassall reiterated the need for a strategy for Urgent Care to identify best use of resources and services such as GPs and community based services.

In response to a Member, Mr Hassall indicated that consultation was on-going in relation to staff restructuring.

The Chair thanked Mr Hassall for his attendance and requested that a quarterly update and a report from the Ambulance Service on their performance targets be brought back to a future meeting of the Committee.

**RESOLVED: That**

- (1) Mr Hassall be thanked for his attendance and update reports; and**
- (2) Wirral University Teaching Hospital be requested to provide a quarterly progress report to a future meeting of the Committee and the North West Ambulance Service be requested to provide a performance report to the next meeting of the Committee.**

42 **CLATTERBRIDGE CANCER CENTRE RE-ORGANISATION PROPOSALS - OUTCOMES OF THE JOINT CHESHIRE AND MERSEYSIDE SCRUTINY REVIEW**

The Chair introduced a report providing an update regarding the outcomes of the joint scrutiny review on the proposed changes to provision of services by Clatterbridge Cancer Centre NHS Foundation Trust and reiterated that the vast majority of Wirral cases over 90% of patients would remain to be treated at Clatterbridge, the Review Panel had met with a wide number of stakeholders and had concluded that the proposals would provide an enhanced service for patients.

Concerns around transportation and travel access to services for patients had been raised but had not yet been addressed. Relocation of staff was also cited as an outstanding issue.

A Member, also a Member of the Panel indicated that the Panel had worked collectively towards ensuring that all residents were catered for. Issues were raised in relation to travel and plans were in place; these would be finalised once the Royal Liverpool University Hospital re-build was complete.

The Chair indicated that Members of the Panel had raised initial concerns regarding the Contractors, but they had come to meet with the Members explaining in detail their roles within the project, the Committee were then reassured.

The report highlighted the conclusions of the joint Committee, one of the motions agreed were to support the establishment of a discretionary scrutiny committee to oversee the delivery of the new build project in Liverpool and refurbishment of the Wirral site.

The Chair proposed that the Members from the Joint Scrutiny Committee remain Members for the discretionary committee.

**RESOLVED: That**

- (1) the decision of the Joint Committee to support the proposed future model of cancer services for Cheshire and Merseyside, including the new site adjacent to the Royal Liverpool Teaching Hospital be noted;**
- (2) the Committee supports, in principle, Wirral Borough Council participating in a discretionary Joint Committee to maintain a scrutiny and oversight role during the lifetime of the project; and**
- (3) the Committee nominates the Chair and the Spokesperson of the largest Opposition Group to be Wirral's two nominations on the Discretionary Joint Committee.**

**43 COMMISSIONING COMMUNITY SERVICES, MANAGING THE MARKET AND REDUCING RELIANCE ON RESIDENTIAL AND NURSING CARE SERVICES**

The Committee considered the report of the Director of Adult Social Services informing of the commissioning of community services, managing the market and reducing the reliance on residential and nursing care services.

In response to Members, Ms Evans indicated that in relation to the Extra Care Housing Initiative, two capital bids were received for 100 units in Pensby and the 2<sup>nd</sup> round bid in Wirral was submitted for extra care provision; all units had been designed to be dementia friendly and suitable for those with learning difficulties and with appropriate facilities to ensure they were accessible to all.

Ms Evans reiterated that there will be a range of day services available for all abilities, and the Department was committed to investing in day services.

The Chair suggested that a task and finish group be established to undertake a review of this piece of work. She hoped that the scoping of the review would be concluded before March but the majority of the evidence gathering would take place in the new municipal year.

**RESOLVED: That**

- (1) progress in relation to performance against the important indicator be noted; and**
- (2) the extent of significant market improvements that have been driven through strategic commissioning activity be noted; and**

- (3) a task and finish group be established to review the commissioning of community services.**

44 **LEISURE REVIEW - PROGRESS UPDATE**

The Committee considered the report of the Strategic Director, Families and Wellbeing providing an update on the progress of the first year of the two year Leisure review and modernisation programme.

Progress had been made across all 'workstreams' including; reducing operating costs to save over £340k, restructuring programming and pricing to deliver increased income which had to date achieved an additional £200k increase above budget; an alternative provider for the beach lifeguard service had also been successfully procured. Market testing of the Golf offer had been undertaken along with a detailed review of operating arrangements and costs, and over £2 million capital had been invested to increase and improve the leisure offer at 2 key Leisure Centres and modernise other areas.

The target operating saving for Year 1 was £1m. Currently the service was expected to see some slippage on the target by £260k owing to delays in implementing a number of key changes.

The service would be moving into Year 2 of the programme from April and plans were in place to enable the challenging target to be delivered which included; further modernisation of operating arrangements, development of the Marine Lake operations and the review of the Golf offer.

In response to questions from a Member, Mr Damian Walsh, Head of Sport and Recreation, indicated that in relation to Workstream 2 the department was working closely with HR and with HR Policies to reduce the sickness reported figures. Sickness monitoring was being undertaken on a month by month basis and appropriate action had been taken with support from HR and their staff programmes. The Department along with Occupational Health was working with those who were receiving hospital treatment to support those members of staff in returning to work where appropriate.

In relation to Workstream 3 – Pricing and Programming, Mr Walsh indicated that usage had an impact on income, however it was too early to say if the introduction of the new pricing structure had been successful as historically with New Year resolutions gyms normally would see a rise in activity. Mr Walsh extended an invitation to Members to visit and view the work being undertaken at Guinea Gap Baths, it was expected that this refurbishment would increase income and therefore help to reduce the deficit.

In relation to Workstream 4 – Golf, the Strategic Director, Families and Wellbeing indicated that a review was currently being undertaken on the

operations of each golf course and officers would come back with revised options for the future of the Council's Golf provision.

**RESOLVED:**

**That the report be noted.**

45 **ANTI-SOCIAL BEHAVIOUR WITH AN EMPHASIS ON YOUTH**

The Committee considered the report of the Director of Children's Services outlining the current youth provision, focusing on anti-social behaviour (ASB) and highlighting the relationship between anti-social behaviour (ASB) and youth. The report gave a focus to the general approach for collaborative working and specific consideration to youth anti-social behaviour.

In response to a question raised by a Member, Ms Gornik, Head of Targeted Services indicated that collaborative working would bring teams closer together; currently the anti-social behaviour team came under the remit of the Youth Offending Team.

In relation to anti-social behaviour, the Director of Children's Services indicated that she was the Director currently responsible for the anti-social behaviour team, however, consultation and a review was to be undertaken, ending in March as to the anti-social behaviour team becoming part of Community Safety. In response, the Chair asked that a report on this be brought back to a future committee following the outcome of the review.

**RESOLVED: That**

- (1) the report be noted; and**
- (2) the outcome of the review in relation to the anti-social behaviour team be reported to a future meeting of the Committee.**

46 **CHILD POVERTY STRATEGY**

The Committee considered the report of the Children's Services Director updating on the progress being made on implementing Wirral's Child and Family Poverty Strategy, making particular reference to two strands of activity that contributed to improved outcomes for children and families, which were now starting to be evidenced.

The report highlighted the current priorities for the strategy, provided an update on the Leasowe and Woodchurch Community Hubs; the Birkenhead Foundation Years Trust Project and its activities and future developments and future actions.



In response to a Members comment, the Director of Children's services indicated that although families were experiencing financial hardship, it was hard to evidence as to whether the introduction of Government Policies were having a cumulative impact on child poverty.

In response to a Member, Ms Deborah Gornik, Head of Targeted Services indicated that one of the key objectives for the department was school readiness; there was a huge focus on this in the Borough, currently there was a good take up of the 3 and 4 year old offers; focus was now on enhancing the 2 year offer and teasing out those families who do not take up the offer.

A Member congratulated Ms Mellor and the Director of Children's Services on the success of the projects in Leasowe and Woodchurch and indicated that it was essential that projects such as these were owned by the community.

In response to a Member, the Director of Children's Services indicated that the two schools split an allocation of £100,000 from the initial funding and both Holy Spirit and Fender schools would receive an allocation of £25,000 from public health, health outcomes fund agreed by Cabinet. Ms Hassall indicated that we now need to plan how we roll out this model to other primary schools in view of the positive impact on children and families. This will also be considered in the context of the commencement of School Traded Services.

**RESOLVED:**

**The update report be noted.**

**47 FAMILIES AND WELLBEING DASHBOARD (INCLUDING PUBLIC HEALTH)**

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

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 2014/15 Performance Report set out performance against 57 outcome measures for 2014/15, 30 were rated green, 5 were rated

amber and 5 were rated red whilst 17 were currently unrated. The 5 measures rated red had action plans which referred to:

- NHS Health Checks – Take Up
- Smoking Quitters (4 weeks)
- Proportion of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months
- Timeliness of Adoptions, within 12 months of decision date
- Average monthly bed days lost due to delayed transfers of care per 100,000

In relation to the take up of Health Checks, the Public Health Manager indicated that there had been a 43% increase on Quarter 2 and it was hoped that this target would be in 'amber' possibly 'green' by Quarter 4.

In relation to smoking quitters and E-Cigarettes, the Public Health Manager indicated that these had attracted very mixed views nationally as to whether or not these were actually helpful or harmful to smoking quitters. Performance was down across the country, the Department had asked for more evidence on this to see if they actually did aid smoking cessation. Meetings were also being held with Wirral Community Trust to see if there was a need to offer a different smoking cessation provision. The Public Health Manager indicated that there could be a possible re-commissioning of services, following an examination as to why they were not performing.

The Chief Executive of Wirral Community Trust commented that they were seeing a reduction in people accessing smoking cessation services, however there was a falling number of smokers in Wirral.

Members commented that this target may need to be revised as they felt this was an unrealistic target and despite the Council's best efforts it was consistently reporting 'red'

In relation to the timeliness of adoptions, The Director of Children's Services indicated that the Department was monitoring each child placed for adoption and was confident that an improvement in this indicator would be achievable by March 2015.

In relation to the indicator regarding the average monthly lost bed days due to delayed transfers of care per 100,000, the Head of Transformation, Adult Social Services Department, indicated that the weekend access to both intermediate care and transitional care beds has been put in place from December to facilitate weekend discharges. Alongside this the number of beds has also been increased by 22 to ensure quicker access to short stay beds. Daily monitoring of capacity is also in place.

Intermediate Care pathway redesign work had been recently completed with new simplified pathways and processes set to be briefed to staff by the end of January. It was envisaged that full implementation of seven day working would be achieved by April 2015 for priority teams such as Integrated Discharge Team, Care Arranging Team and Intermediate Care. 7 day working in Integrated Care Co-Ordination teams would be achieved by September 2015.

Specific delays were highlighted via a daily teleconference so that action could be taken to reduce delays and address any blockages; this was attended by staff from both the NHS and Social Care. Identification of a home of choice could sometimes be a contributing factor to lost bed days, to mitigate against this there had been some specific work carried out with staff to support families to reduce the time spent looking for their home of choice.

Wirral University Teaching Hospital was also looking to embed daily board rounds to ensure the discharge process could start as early as possible.

The Head of Transformation, Adult Social Services Department, indicated that the department was performing well and that the reported delays had come from not just from the department but also the NHS.

In response to a Members question regarding indicator 30 relating to rate of LAC children, the Director of Children's Services reported that the department were working on improving this; and there was a real focus on children's care plans and how they focus on achieving performance for children. There was also a re-design of the Social Work team which would be signed off this week; it was hoped that with the new teams in place better planning for Children in Care children could be put in place, however this would take some time to implement.

**RESOLVED:**

**That the report be noted and officers be thanked for their updates.**

48 **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 8 (November 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.**

49 **WORK PROGRAMME**

The Chair highlighted that as the next meeting of the Committee scheduled for 20 April 2015 was due to be held during purdah, he proposed that the next meeting be brought forward and proposed that this meeting would now be held on 23 March 2015 at 6:00pm.

**Resolved – That the next meeting of the Committee takes place on Monday 23 March 2015 at 6:00pm.**