At a meeting of this Committee held on 15 January 2024

- (Present) Councillor Sweeney (Chair) Councillors J Banks, Clarke, D Long, T Long, Makin, Mussell and Spencer
- (Not Present) Councillors Bell and Stevenson

21 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Bell and Stevenson

22 <u>MINUTES</u>

* Resolved that the minutes of the meeting held on 9 October 2023 be approved and signed.

23 DECLARATIONS OF INTEREST

No Declarations of interest from Members were made.

24 DECLARATIONS OF PARTY WHIP

No Declarations of Party Whip were made.

25 ST HELENS FAMILY HUBS UPDATE

The Director of Public Health and Transformation Lead for Family Hubs provided an overview of the report. The Committee was informed that St Helens Borough had been one of 75 local authorities to receive additional funding to set up family hubs. The Council was due to receive a further 12 months of funding in April 2024.

The purpose of family hubs was to support the first 1001 days of a child's life (from conception to 2 years old) with some remit to support children with Special Educational Needs and Disabilities (SEND) up to age 25.

Funding for the programme had been targeted by DfE in relation to transformation of services, infant feeding, parenting support, engagement with parent/carers (parent/carer panels), home learning and early language development, perinatal mental health and parent child relationship, and a published Best Start for Life offer.

Service provision included online resources and support as well as a face-to-face offer in both family hub buildings and through outreach. Some of the services provided were available universally but others were targeted at individuals and their families based on need.

The development of family hubs required the alignment and integration of previous national 'stand-alone' initiatives and programmes. Strategic and operational working groups were formed with positive engagement between Public Health, Children's Services and partners.

The plan was to have three Family Hub locations across the Borough. One was already operating in Sutton; another was due to open at Central Link in St Helens Town Centre on the day of this meeting and another was expected to open in Newton-le-Willows.

Members asked questions and the following points arose:

- The Council had conducted a lot of engagement activity with the public to encourage people to attend activities at the Sutton hub or had offered through the outreach to visit a parent (and child were relevant) in a place they were comfortable in. Services had been made as user friendly as possible to avoid discouraging people from engaging. Online resources and support was also a key requirement and there was active social media promoting the online element.
- Officers were already collecting and measuring data on engagement with 66% more families engaged in services since the hub started. Efforts were being made to try to measure the impact services were having on individual families and the overall impact of the hubs.
- The majority of people in St Helens Borough were born at Whiston Hospital so Hubs was working closely with neonatal and midwifery services there to engage families. It was mentioned that some families have babies born at Ormskirk Hospital and Members wanted to make sure those born outside of Whiston were being captured too.
- A key aim of the Family Hubs Initiative was to support people to be the best parents they can be to avoid the need for social services intervention in future and to help parents improve their child's readiness for school. It was suggested that statistics indicated that a good start in life had a huge impact on a person's overall outcomes. It was hoped that the Family Hubs would contribute towards a reduction in inequalities across the Borough.
- Funding was currently limited to the end of the 2024/25 municipal year so the longterm future of Family Hubs was uncertain. However, it was hoped that the initiative would have an impact on the number of children being taken into social care which would result in savings, some of which could be used to continue funding services. There was however a risk that the initiative would have to stop once funding had expired.

The Committee thanked officers and partners for the work that had been done so far and hoped that funding for the long-term future of the Family Hubs initiative could be secured for the long term.

* Resolved that the report be noted.

26 CGL SUPPORTING FAMILIES IN ST HELENS THOUGH; INNOVATION, INTEGRATION AND AN INTER-AGENCY APPROACH PRESENTAION

Representatives from Change Grow Live attended the meeting to provide an overview of its role as the provider of Drug and Alcohol Support Services in St Helens Borough as commissioned by Public Health.

During the presentation the following points were made:

• The aim of Drug and Alcohol Support Services was to break intergenerational substance misuse trends in the Borough by supporting adults to stop their substance misuse and avoid their children being impacted by it and coming substance users in future.

- The services was performing above the national average in getting parents into services. Services were offered in house at the CGL centre in St Helens Town Centre but also out in the community. CGL was engaged with the Family Hubs initiative as a partner. The service was responsive to people's needs and supported them in the best way to help them succeed in tackling their substance misuse and avoid negative impacts on their families.
- Some of the staff at CGL had personal experience with substance misuse and this often helped them to engage well with service users who had similar experiences.
- CGL worked with midwifery services to engage parents (both mothers and fathers) to tackle their issues before children were born where necessary as well as drug and alcohol training to midwives. CGL also linked with health visitors and early years providers to continue engagement after children were born.
- Service supported parents with parenting skills and understanding how substance misuse impacted on their children. The Service supported people to access mental health support were this was a trigger for drug and alcohol use.
- The presentation provided a case study of how the service supported a family to stop substance misuse and improve their parenting skills to better support their new born baby. This couple had previously had children removed from their care but were now able to keep their new child and were looking to reengage with their other children. A cost benefit analysis was provided which suggested that the cost of providing the services provided a net benefit to other services by reducing social care and health service costs of this family no longer being effected by substance misuse.

Members of the Committee asked questions and the following points arose:

- It was difficult to quantify the impact these services had on improving the lives of parents and children who are supported away from substance misuse however it was possible to show how preventative measures could reduce costs in areas such as social care and health services.
- A barrier to some parents engaging with services was a fear of having their children removed from their care if they admitted to substance misuse therefore it was important to always reassure people and communicate to the public that parents would be offered support to keep their children in their care rather than have them automatically removed.
- As well as giving children more positive outcomes, enabling children to remain at home in their parents' care was better for the parents health and wellbeing also. Having their children removed from their care was often detrimental to their mental health which could lead to further substance misuse and make it less likely for children to be able to return home at a later date.
- There was a risk to the future of funding for residential rehabilitation services due to inflation of residential care costs.

Some Members of the Committee had attended a site visit to the CGL centre in St Helens and provided positive feedback regarding the welcoming atmosphere of the centre and the positive experiences that some service users had shared with them. Members were also pleased with the flexible nature of services being able to meet an individual's needs and the collaboration with partner organisations.

* Resolved that the presentation be noted.

Councillor Clarke here left the meeting.

27 QUARTER 2 PERFORMANCE REPORT 2023/2024

The Committee gave consideration to the Quarter 2 Performance Report 2023/2024 as it related to Priority 2 of the Borough Strategy. The Executive Director for People Services, Director of Public Health and the Director of Adult Social Care provided an overview of the performance indicators as they related to their service areas.

Members of the Committee asked questions and the following points arose:

- There was a concern about the level of admissions to hospital for alcohol specific conditions (PH-016) which had increased from the previous year. There was currently high levels of liver disease among both men and women which was a concern to officers. The need for support services to reduce alcohol consumption among the public was bigger than the resources available could provide. It was suggested alcohol consumption had increased nationally following the covid-19 pandemic.
- There was an expectation that all those admitted to hospital would have their discharges planned during their time in hospital; this included consideration of any support services that would need to be put in place or adaptations needed to the home to enable a person to return to live at home safely. When there was preplanned elective surgery these plans should be considered prior to the surgery.
- It was often possible for simple adaptations to homes to be carried out quickly by the Home Improvement Agency however larger adaptations often required disabled facilities grants to be funded which could sometimes lead to delays in work being done which could impact on a person's discharge from hospital or intermediate care back into their home.
- Quarter 3 and Quarter 4 were often the most challenging times of the year in relation to discharges from hospitals. There were currently significant pressures on NHS and social care services with recent strikes impacting waiting lists. Contact Cares provided a joined up approach to managing discharges between the NHS and St Helens Social Care resulting is St Helens having the lowest figures across Cheshire and Merseyside for people being in hospital when they didn't need to be.
- Figures related to ASC-013 were below target in Quarter 1 as this was often a time when people receiving domiciliary care would go on holiday or have relatives come to see them so need for services was reduced resulting in a red indicator. Members suggested a way to factor this sort of seasonal trend into targets be considered.
- There had been a rise of 40% in the number of people who requested a mental health assessment compared to the previous year. Some people were being treated at home but some needed to be admitted to hospital however there was a shortage of beds.

* Resolved that the report be noted.

- (1) the performance position at Quarter 2 2023 be noted; and
- (2) that a review of admissions to mental health services be added to the list of possible items for the Committee's work programme for 2024/25.

28 DENTISTRY SPOTLIGHT REVIEW

The Executive Director for People Services provided an overview of his views in relation to the recommendations contained in the Spotlight Review Report. Following approval of the Spotlight Review's Recommendations by the Committee the report would be

submitted to Cabinet for consideration and response would be presented to a future meeting of the Committee.

- * Resolved that:
 - (1) the report be noted;
 - (2) the recommendations contained in the report be approved; and
 - (3) the report and recommendations be submitted to Cabinet for consideration and a response be requested to be received by the Committee at a future meeting.

28 INTEGRATED CARE PARTNERSHIP (CHAIRS UPDATE)

The Chair provided an update on the activity of the Integrated Care Partnership (ICP). The Chair informed the Committee that an item on budgets for the ICP was scheduled to be considered by the Integrated Care Board (ICB) at the end of January 2024.

* Resolved that the update be noted.

29 SCRUTINY WORK PROGRAMME 2023/24

The Scrutiny Work Programme was presented to the Committee to consider items for future meetings. It was noted that an item on Vision for Adult Social Care: 5 Year Plan had been scheduled to be brought to this meeting but had been deferred to the next meeting.

It was confirmed that there were no additional items for the work programme. The Chair was scheduled to meet Link Officers to prepare items for the Committee's next meeting.

* Resolved that the report be noted.

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