

NOTICE OF MEETING

CABINET MEMBER FOR ADULT SOCIAL CARE & PUBLIC HEALTH DECISION MEETING

MONDAY, 26 SEPTEMBER 2016 AT 10AM

THE EXECUTIVE MEETING ROOM - THIRD FLOOR, THE GUILDHALL

Telephone enquiries to Jane Di Dino 023 9283 4060

Email: jane.didino@portsmouthcc.gov.uk

Membership

Councillor Luke Stubbs (Cabinet Member)

Councillor Gerald Vernon-Jackson CBE

Councillor Alicia Denny

Councillor John Ferrett

(NB This agenda should be retained for future reference with the minutes of this meeting).

AGENDA

- 1 Apologies for Absence.
- 2 Declarations of Interest.
- 3 **Section 75 Agreement for the Integrated Commissioning Unit: extension for a period of six months. (Pages 1 - 4)**

Purpose

To seek approval of the Cabinet Member for Adult Social Care & Public Health to further extend the section 75 agreement for the Integrated Commissioning Unit (ICU) on an interim basis.

RECOMMENDED that the Cabinet Member delegate authority to the Director of Adult Social Services and the Director of Financial Services/ Section 151 Officer to extend the current section 75 agreement for ICU for a period of eighteen months from Oct 16 to March 18.

4 Staff Flu Vaccination Campaign. (Pages 5 - 12)

Purpose

This report requests that Portsmouth City Council continue with its successful influenza vaccination campaign.

RECOMMENDED that the Cabinet Member for Adult Social Care & Public Health agree that:

- 1. All PCC staff, including school staff, should be provided with access to seasonal influenza vaccination, which will be funded by individual services and schools, but managed by the Portsmouth Public Health Team.**
- 2. The model of provision will include vaccination sessions provided in the Civic Offices by commissioned occupational health services and provision of flu vouchers for staff to obtain influenza vaccination in local supermarkets and pharmacies.**

Agenda Item 3



Portsmouth
CITY COUNCIL

Agenda item:

Title of meeting: Cabinet Member for Adult Social Care & Public Health

Subject: Section 75 for Integrated Commissioning Unit: Extension for a period of six months

Date of meeting: 26th September 2016

Report by: Director of Integrated Commissioning Unit

Wards affected: All wards

Key decision: No

Budget and Policy Framework Decision : No

1. Purpose of report

- 1.1 To seek approval of the Cabinet Member for Adult Social Care & Public Health to further extend the section 75 agreement for the Integrated Commissioning Unit (ICU) on an interim basis.

2. Recommendations

- 2.1 The Cabinet member delegate authority to the Director of Adult Social Services and the Director of Financial Services/Section 151 Officer to extend the current section 75 agreement for ICU for a period of eighteen months from Oct 16 to March 18.

3. Background

- 3.1 The Integrated Commissioning Unit was established in 2010 to jointly commission some health and social care services on behalf of PCC and the Primary Care Trust (PCT). Those functions of the PCT have subsequently been assumed by the CCG.
- 3.2 The ICU sec 75 agreement completed its second term in March 2016. An extension for six months until Sept 16 was approved by the Health and Social Care Cabinet in March 16.
- 3.3 The ICU covers a comprehensive work programme for the Council and CCG which includes commissioning all out of hospital health services for older people, adults and children, integrated health and social care teams, managing the contracts for all people's services and Better Care programme.
- 3.4 The ICU has 37 staff members in all of which 12 are CCG staff seconded in to the Council; the team has a single management, shared accommodation and one business plan covering health and social care commissioning.

- 3.5 As part of delivering the Portsmouth blueprint and progressing the health and social care integration the existing arrangements for Commissioning in the Council and CCG are being reviewed. It is likely the Commissioning roles and teams will change through an agreed restructuring process between the CCG and Council. This will also impact on the ICU's current team structure. Initial discussion and dialogue has started between the Council and CCG and it is expected that future commissioning arrangements will be agreed and put in place by March 18.
- 3.6 During this period it is in the Council and CCG interest to ensure continuity of the extensive work programme undertaken by the ICU. There also needs to be a level of stability for staff members until longer term appropriate arrangements are put in place.
- 3.7 It is recommended that the current section 75 agreement be extended for a period of eighteen months on the same terms to allow for continuity of business and adequate time to develop and agree new arrangements.
- 3.8 This will be an interim agreement as appropriate sec 75 agreement/s will need to be developed to reflect the revised commissioning arrangements.

4. Reasons for recommendations

- 4.1 The extension of the existing sec 75 agreement will ensure business continuity for the service and enable the Director of ASS to provide stability to staff members.

5. Equality impact assessment (EIA)

- 5.1 The integrated commissioning arrangement was supported by an EIA and continuing the arrangement does not impact on any of the positions put forward at that time.

6. Finance comments

- 6.1 There are no additional financial implications arising as a result of this recommendation as the funding for sec 75 agreement is within agreed budget.

7. Legal comments

- 7.1 Section 75 of the NHS Act 2006 allows local authorities and NHS bodies to enter into partnership arrangements to provide a joined service and pool resources, if such arrangements are likely to lead to an improvement in the way their functions are exercised.

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Signed by: Innes Richens

Appendices: Section 75 Agreement dated 1st April 2013 between PCC and PCCG

Background list of documents:

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by on

.....
Signed by:

Agenda Item 4



Portsmouth
CITY COUNCIL

Agenda item:

Title of meeting: Adult Social Care and Public Health Cabinet Meeting

Date of meeting: 26 September 2016

Subject: Influenza Vaccination for Portsmouth City Council Staff

Report by: Acting Director of Public Health

Wards affected: Not Applicable

Key decision: No

Full Council decision: No

1. Purpose of report

- 1.1 This report requests that Portsmouth City Council (PCC) continue with its successful influenza vaccination campaign.

2. Recommendations

1. All PCC staff, including school staff, should be provided with access to seasonal influenza vaccination, which will be funded by individual services and schools, but managed by the Portsmouth Public Health Team.
2. The model of provision will include vaccination sessions provided in the Civic Offices by commissioned occupational health services and provision of flu vouchers for staff to obtain influenza vaccination in local supermarkets and pharmacies.

3. Background

- 3.1 Influenza infection is highly transmissible and can cause a spectrum of illness from mild to severe, even among people who are previously well. For example, there were 100 confirmed deaths from influenza reported in 2014/15 in the UK with nearly 1200 people admitted to intensive care. However, this reflects a relatively mild year for influenza, which remains unpredictable and therefore difficult to forecast the severity of future influenza seasons.
- 3.2 Influenza can have significant effects on organisations and the economy. Staff with influenza may be absent from work for up to 6 days and may need up to two weeks to fully recover. For this reason many organisations and corporations across the world offer flu vaccination to staff.

3.3 Influenza vaccination is a national vaccination programme provided annually to targeted groups who are at increased risk of more severe disease and mortality due to infection with the influenza virus. Those who are eligible for influenza vaccination include:

- All those aged 65 years and over
- Those aged up to 65 years who have a long term condition e.g. diabetes, are pregnant, are carers or who are living long-term in residential and nursing homes
- All children aged 2, 3 and 4 years

PCC have had a global staff influenza vaccination campaign for the last 2 years.

3.4 The annual influenza season letter from the Chief Medical Officer also states 'health and social care workers who are in direct contact with patients or service users we expect to be offered flu vaccination by their employer, including GP practice staff.'

3.5 Influenza vaccine is a very safe vaccine with a high efficacy, which can completely prevent influenza infection.

3.6 There are still however a number of myths surrounding the vaccine, for example 'flu vaccine can give you flu'. For a successful campaign, these myths need to be addressed with clear and effective education and communication.

3.7 As well as health and social care organisations, many other businesses and organisation are now also offering flu vaccination to staff.

4. Reasons for recommendations

As a responsible employer and as part of business continuity planning, it is recommended that PCC offer all staff the opportunity of an influenza vaccination.

- **Health and social care workers**

4.1 Employers are responsible for ensuring that arrangements are in place for the vaccination of their health and social care workers with direct patient contact. It is important that health and social care workers protect themselves by having the flu vaccine, and, in doing so, reduce the risk of spreading flu to their patients, clients, colleagues and family members.

4.2 Vaccination of healthcare workers against flu significantly lowers rates of flu-like illness, hospitalisation and mortality in older people in healthcare settings. Vaccination of staff in social care settings may provide similar benefits. Vaccination of healthcare workers and social care staff with direct patient contact is likely to reduce the transmission of influenza to vulnerable patients, some of whom may have impaired immunity that may not respond well to vaccination.

4.3 Frontline health and social care workers are more likely to be exposed to the influenza virus, particularly during winter months when some of their patients/clients may be infected. It has been estimated that up to one in four health and social care workers may become infected during a mild influenza season, a much higher incidence than expected in the general population. This also means that there is the risk that these staff can spread influenza infection to non-health and social care staff within PCC.

4.4 Vaccination of health and social care workers will therefore help reduce the level of staff sickness absence rates and pressure on health and social care services during the winter. Vaccinating staff against flu is an important infection control measure as part of the annual winter planning process to ensure that health and social care services are as resilient as possible.

- **Other PCC staff**

4.5 Providing influenza vaccination to all PCC staff offers a number of additional benefits. Staff with influenza may be absent from work for up to 6 days and may need up to two weeks to fully recover. While recovering there will still be a loss of performance with studies showing that workers recovering from influenza demonstrate impaired performance of simple reaction time tasks which can increase the probability of error or injury. A high rate of vaccination amongst staff will reduce the transmission of influenza to other staff members as well as to their families which may result in staff members having to take additional time away from work to care for sick family members.

4.6 It is important to note that many services across the council, such as revenue and benefits, housing and community safety have regular contact with potentially vulnerable clients and vaccinating these groups would provide the same benefits as for social care staff.

4.7 The benefits of a global staff vaccination programme are therefore:

- Protection of vulnerable clients from influenza infection
- Prevention of sickness absence due to staff illness with influenza or due to caring for a family member with influenza at a time when services may be stretched already
- Protection of staff and their friends, families and colleagues from illness and potential death due to influenza and influenza related illness
- Demonstration of PCC's role as a responsible employer and provider, committed to staff and client health and wellbeing

- **Delivery Models and Costs**

4.8 Details of the 2015/16 campaign can be found in **Appendix 1**. For the 2016/17 programme, the delivery model will again consist of a number of vaccination clinics

based in the Civic Offices provided by occupational health, alongside the flu voucher scheme. Staff will again also be able to attend QAH occupational health department for vaccination. This will again be administered by the public health team with funding being provided by individual services based on the number of their staff members who receive vaccination.

- 4.9 Provision of the clinics will cost £12 per vaccination given with a minimum cost of £480 per clinic. Initially 4 clinics will be commissioned with the option of further clinics depending on demand. The online booking system will help ensure clinics are filled prior to them being delivered as well as ensuring that there are no queues of staff waiting for vaccination thus minimising working time lost.
- 4.10 The voucher scheme costs £6.95 per vaccination given. Vouchers will be ordered using the online booking system and distributed by the public health team, so that potential uptake of vaccination can be monitored. The numbers of vouchers requested will be monitored so that an appropriate number can be ordered to minimise wastage. Ways to monitor voucher usage will be investigated to ensure staff members are using them to receive vaccination.
- 4.11 Final uptake and cost data from the 2015/16 campaign showed that the cost per staff member was £10.13. This has been used as a guide for calculating potential costs per service for the 2016/17 campaign as per **Table 1** below. (The actual costs for 15/16 will vary from these estimated guide figures given that the anticipated costs per vaccination will be £6.95 or £12 as stated above). For example, based on £10.13, if 40% of adult services staff had flu vaccination then the cost to the service would be approximately £2670.27.

Table 1 Potential Costs for Staff Flu Vaccination by Service

Directorate	Headcount	Costs by Uptake Rate (based on £10.13 per vaccine)				
		20%	40%	60%	80%	100%
Adult Services	659	£1,335.13	£2,670.27	£4,005.40	£5,340.54	£6,675.67
Children's Services and Education	265	£536.89	£1,073.78	£1,610.67	£2,147.56	£2,684.45
Children's Social Care	312	£632.11	£1,264.22	£1,896.34	£2,528.45	£3,160.56
Community and Communication	198	£401.15	£802.30	£1,203.44	£1,604.59	£2,005.74
Culture and City Development	312	£632.11	£1,264.22	£1,896.34	£2,528.45	£3,160.56
Executive	19	£38.49	£76.99	£115.48	£153.98	£192.47
Finance and Information Services	303	£613.88	£1,227.76	£1,841.63	£2,455.51	£3,069.39
Human Resources, Legal and Procurement	118	£239.07	£478.14	£717.20	£956.27	£1,195.34
Integrated Commissioning Unit	33	£66.86	£133.72	£200.57	£267.43	£334.29
Portsmouth International Port	80	£162.08	£324.16	£486.24	£648.32	£810.40
Property and Housing	835	£1,691.71	£3,383.42	£5,075.13	£6,766.84	£8,458.55
Public Health	95	£192.47	£384.94	£577.41	£769.88	£962.35
Regulatory Services, Community Safety and Troubled Families	71	£143.85	£287.69	£431.54	£575.38	£719.23
Transport, Environment and Business Support	310	£628.06	£1,256.12	£1,884.18	£2,512.24	£3,140.30
TOTAL	3610	£7,313.86	£14,627.72	£21,941.58	£29,255.44	£36,569.30

- 4.12 Although every effort will be made to encourage uptake in staff, it is likely that some staff will not take advantage of the opportunity. Additionally many staff members will be eligible for vaccination at their GP practice as being in one of the clinical at-risk groups. These staff members should be encouraged to have the vaccination at the GP to reduce costs to PCC and minimise loss of income for GP practices. Due to these factors uptake of vaccine for 2016/17 is unlikely to exceed 30-40%.
- 4.13 To demonstrate potential savings due to influenza vaccination, the average weekly wage in Portsmouth is £449, and with on-costs this will cost organisations £628 per week. Based on the fact that staff would be off or not performing at full capacity for up to 2 weeks, this would cost the organisation £1,257. Therefore to recuperate the costs of an influenza vaccination campaign achieving 20% uptake would mean that flu would need to be prevented in only 12 members of staff.
- 4.14 In order to maximize the benefits of offering all PCC staff the influenza vaccine, every effort must be made to ensure that the uptake is as high as possible. A clear and effective communications campaign will be developed highlighting the benefits of vaccination, dispelling myths surrounding influenza vaccination and advising staff how to access vaccination and this will be developed and managed in house, further reducing potential costs. This communications campaign will also include messaging to schools to encourage them to provide flu vaccination for staff. Also, now that a number of teams are co-located with the Civic Offices there is potential for this to help improve uptake across key staff groups.

5. Equality impact assessment (EIA)

- 5.1 There are no equality issues arising from this report and its recommendations. Therefore, an Equality Impact Assessment is not required.

6. Legal Implications

- 6.1 There appear to be no direct legal implications or concerns arising from the content of this report other than to mention that the Council has a duty to improve public health under the Health and Social Care Act 2012. Furthermore, the Council also has general powers of competence under the Local Government Act 1972, to do anything which is calculated to facilitate or is conducive or incidental to the discharge of any of its functions.

7. Finance Comments

- 7.1 The likely benefit of reduced staff illness clearly exceeds the investment required. There is sufficient budget in Public Health to cover the flu vaccines for Public Health staff. There will need to be discussion with the other Directors within the Council regarding accepting the costs of the flu vaccine for their staff.

List of Appendices

Number	Title
1	The 2015/16 Staff Influenza Vaccination Campaign
2	Flu Vaccine Uptake in PCC Staff 2015/16

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Signed by:

Acting Director of Public Health

The recommendation(s) set out above were approved/ approved as amended/ deferred/ rejected by on

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Signed by:
Cabinet Member for Adult Social Care & Public Health

Cabinet Member for Adult Social Care and Public Health

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

Appendix 1 The 2015/16 Staff Influenza Vaccination Campaign

- Individual services funded an influenza vaccination programme for their staff with Public Health administering the programme. This involved the provision of a number of flu clinics in or around the Civic Offices where staff could attend for vaccinations given by occupational health nurses from Portsmouth Hospital's Trust. Staff could also attend Queen Alexandra Hospital (QAH) Occupational Health Department for vaccination. Staff were also offered the option of a flu voucher which could be redeemed at a number of local supermarkets and pharmacies for influenza vaccination. A number of methods for obtaining influenza vaccination were offered to increase choice for staff and potentially maximise vaccine uptake.
- The 2015/16 campaign was fully evaluated and this involved:-
 - Analysis of vaccine and voucher uptake
 - Obtaining the views of staff involved with setting up the programme
 - An online survey for PCC staff
- Uptake of the vaccine was 21.4% (821 staff members vaccinated). Public Health had the highest uptake rate with 83.6% and Executive the lowest uptake with 4.5%. Most staff (61%) used the clinics to obtain their vaccinations. Final uptake rates by service can be found in **Appendix 2**.
- Compared to 2014/15 the uptake rate had slightly decreased by 1.3% reflecting the decrease in flu vaccination rates nationally. Due to changes in directorate structure it is no longer possible to monitor changes in uptake by directorate.
- Feedback about the vaccination programme from staff members was generally very positive with many staff requesting that the campaign be repeated in 2016/17. However, a number of issues were raised which will be incorporated into the 2016/17 campaign. These include developing promotional materials to dispel persistent myths about flu, investigating ways to increase uptake in adult and children's social care staff, investigating ways to ensure vouchers are used developing a queueing system in clinics and developing a buddy system for staff with needle phobia.

Appendix 2 Flu Vaccine Uptake in PCC Staff 2015/16

Directorate	Clinic	QAH	Voucher	GP	Total	Headcount	Uptake
Adult Services	45	18	56	6	125	775	16.1%
Children's Services and Education	39		19	2	60	257	23.3%
Children's Social Care	50	3	9		62	356	17.4%
Community and Communication	44		21		65	213	30.5%
Culture and City Development	38		16	1	55	220	25.0%
Executive	1				1	22	4.5%
Finance and Information Services	58	1	17	2	78	290	26.9%
Human Resources, Legal and Procurement	25	2	8		35	151	23.2%
Integrated Commissioning Unit	10		1		11	35	31.4%
Portsmouth International Port	5		14		19	83	22.9%
Property and Housing	107		78	16	201	882	22.8%
Public Health	35	1	8	2	46	55	83.6%
Regulatory Services, Community Safety and Troubled Families	15		4	1	20	92	21.7%
Transport, Environment and Business Support	27		15	1	43	408	10.5%
TOTAL	499	25	266	31	821	3839	21.4%

N.B Actual uptake rates are likely to be higher as a number of staff will be vaccinated elsewhere and this will not be reflected in the above figures

Source: Public Health Staff Flu Vaccination Database