# **BRIGHTON & HOVE CITY COUNCIL**

# JOINT COMMISSIONING BOARD

# 5.00PM 23 APRIL 2012

# COUNCIL CHAMBER, HOVE TOWN HALL

#### MINUTES

Council representatives: Councillor Rob Jarrett (Chair);

Brighton & Hove City Primary Care Trust representatives: Denise Stokoe (Deputy Chair), Janice Robinson and Dr George Mack;

Co-opted Members: Councillor Ken Norman

Apologies: Councillor Brian Fitch

# PART ONE

#### 40. PROCEDURAL BUSINESS

#### 40 (a) Declarations of Substitutes

40.1 There were none.

#### 40 (b) Declarations of Interests

40.2 There were none.

#### 40 (c) Exclusion of Press and Public

- 40.3 In accordance with section 100A of the Local Government Act 1972 ("the Act), the Board considered whether the press and public should be excluded from the meeting during an item of business on the grounds that it was likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present during that item, there would be disclosure to them of confidential information (as defined in section 100A (3) of the Act) or exempt information (as defined in section 100I(I) of the Act).
- 40.4 **RESOLVED -** That the press and public be not excluded from the meeting.

#### 41. MINUTES OF THE PREVIOUS MEETING

41.1 **RESOLVED** – That the minutes of the Joint Commissioning Board Meeting held on 20 February 2012 be agreed and signed as a correct record.

#### 42. CHAIR'S COMMUNICATIONS

#### LINk Representative

42.1 The Chair reported that Dr Neil Stevenson was no longer the LINk representative on the Board. The Chair was waiting to hear of Dr Stevenson's replacement. In the meanwhile, the minutes of the meeting would be sent to the LINk.

#### 43. PUBLIC QUESTIONS

43.1 There were none.

# 44. FEE LEVEL FOR ADULT SOCIAL CARE SERVICES 2012-13

- 44.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which concerned fees paid to independent and voluntary sector providers that supplied care services on behalf of Brighton and Hove City Council Adult Social Care. It covered fees paid to providers of services for older people, people with physical disabilities, adults with mental health needs (including HIV and substance misuse) and learning disability services. Service providers included care homes, home care and community support, community service and direct payments.
- 44.2 The 2012/13 budget strategy for Adult Social Care that was agreed by Budget Council on 23 February included a commitment to increase rates payable to independent nursing and residential care and homecare providers in 2012/13 to help cover rising energy costs and support fair rates of pay for workers in this sector so that the needs of those receiving care could be met.
- 44.3 The Joint Commissioner Older People reported that it was recommended that the majority of care homes/nursing homes should have a 5% uplift, with the exception of Learning Disabilities which would be individually negotiated. Home Care was being put on hold as officers were working with providers on a new Home Care Contract. A 2% uplift was recommended for Community Services for Older People, people with physical health needs and people with mental health needs. The recommendations were agreed at the Adult Social Care & Health Cabinet Member Meeting held on 12 March 2012.
- 44.4 The Chief Operating Officer reported that this matter had been discussed at the Clinical Commissioning Group and the rationale for the increase was recognised. If agreed, the CCG were happy to match the 5% increase for residential and nursing homes.
- 44.5 Denise Stokoe stated that she was very supportive of the proposals. She was pleased to note the training provided by the Council as set out in paragraph 4.1 of the report. She asked if it was possible to have the same level of support as in the past. The Director of Adult Social Services/Lead Commissioner People replied that the Council continued to offer a very high level of training.

- 44.6 George Mack asked if quality payments were made to homes. The Director of Adult Social Services/Lead Commissioner People replied that there had been some quality payments. The Council were currently looking at the breakdown of the homecare tender. She stressed that there was not always a correlation between price and quality.
- 44.7 Councillor Norman stated that he would like to know how the homes used the uplift and whether it was being used properly. He asked if the homecare tender process was completed. The Director of Adult Social Services/Lead Commissioner People replied that staff would be asked if they had received a pay award this year. The Home Care tender was currently being evaluated.
- 44.8 The Chief Operating Officer stated that she wanted to see the increase tied to quality improvement. The Clinical Commissioning Group had launched a Clinical Standards for Nursing Homes document. The CCG wanted to ensure that the 5% increase gave homes the incentive to work with the CCG to drive up quality.
- 44.9 **RESOLVED** (1) That the recommended uplift as set out in the Table in paragraph 3.2 of the report be agreed.
- (2) That the recommendation for Brighton and Hove to match the applicable host authority set rates for new and existing care home placements out of the city be agreed.

**Note:** The Adult Social Care & Health Cabinet Member Meeting held on 12 March agreed the above resolutions.

# 45. JOINT COMMISSIONING STRATEGY FOR ADULTS WITH AUTISTIC SPECTRUM CONDITIONS (ASC) 2012-2015

- 45.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which set out the longer-term direction and scope of how health and social services and associate organisations could achieve improved outcomes for adults with autism, their families and carers in the City of Brighton & Hove.
- 45.2 The first autism strategy for Brighton and Hove had been developed in response to national level legislation and strategy as well as local level evidence which had raised the profile of autism in adults and shown that adults with autism faced significant challenges.
- 45.3 The Lead Commissioner for Learning Disabilities explained that the strategy had been developed through extensive consultation with key stakeholders. This included the Adult Autism Stakeholder Group, the Joint Strategic Needs Assessment and the Overview & Scrutiny Panel report. The Strategy was presented with a one year action plan. The recommendations were agreed at the Adult Social Care & Health Cabinet Member Meeting on 12 March.
- 45.4 Councillor Norman referred to the Actions proposed for Year 1 on page 51. This referred to training through a DVD. He asked if this was for individuals or groups. The Lead Commissioner for Learning Disabilities explained that various tools were used for training. The DVD was available along with e-learning for basic training. Different levels of training were required.

- 45.5 Janice Robinson welcomed the strategy. She asked at what point officers would have specific information about what had been achieved and when it was achieved. She asked if the proposals had been costed. The Lead Commissioner replied that there was a need for clear pathways/referral routes to diagnosis. This may require additional resources but officers were working to achieve this through existing budgets. Officers were already working on the first year Action Plan.
- 45.6 Denise Stokoe stressed the need for public education about this issue. She asked if there was a public health dimension to the strategy. The Director of Adult Social Services replied that there was a need to include public health in this work.
- 45.7 Councillor Norman paid tribute to the people who had worked on the strategy and said they should be congratulated. He looked forward to it working well.
- 45.8 The Chair stated that he was keen for the strategy to be taken forward and improvements made. He stressed that public awareness was important and that there was a public health element to the work. Someone with low level autism should be able to access services.
- 45.9 **RESOLVED** (1) That the contents of the strategy (Appendix 1) and its proposed strategic objectives, actions and outcomes be noted.
- (2) That the attached strategy and proposed actions be agreed.

**Note:** The Adult Social Care & Health Cabinet Member Meeting held on 12 March agreed the above resolutions.

#### 46. REVIEW OF COMMUNITY MENTAL HEALTH SUPPORT SERVICES

- 46.1 The Board considered a report of the Chief Operating Officer, Brighton and Hove Clinical Commissioning Group and the Director of Adult Social Services/Lead Commissioner People which set out an explanation of the preferred route to securing new services and outlined outcome-based service requirements against which potential providers would be invited to make bids for services. Members were reminded that the Board held in February 2012 had noted the results of a consultation process, and agreed proposals for services changes.
- 46.2 The Locality Transformation Programme Manager explained that consideration had been given to the most appropriate route for securing services. A prospectus approach was recommended as set out in paragraph 3.2 of the report. Appendix 2 of the report set out the type of information that would be written into the prospectus. Proposed Activity Level and funding had not yet been inserted into the prospectus.
- 46.3 Denise Stokoe stressed that it was important not to exclude smaller providers. The Director of Adult Social Services replied that she wanted to see providers coming together to achieve set outcomes.
- 46.4 The Chief Operations Officer stressed the need to look at an indication of absolute maximum amounts that health and social care would be prepared to pay, rather than indicative amounts.

- 46.5 Councillor Norman stated that it was an interesting document and he was looking forward to it being implemented. Flexibility was important as there were so many variables.
- 46.6 The Chair stated that he was supportive of the implementation of the prospectus approach.
- 46.7 The Chief Operations Officer spoke about the need to support the third sector in relation to the responses to the tender exercises, possibly through the role of brokers. The Director of Adult Social Services stated that there had been some ongoing discussion about this issue. The model allowed a more open and interactive approach.
- 46.8 **RESOLVED** (1) That the preferred route to securing new services be agreed.
- (2) That the outline service requirements which will be developed for use in a forthcoming prospectus *contained in Appendix 2* be noted.

#### 47. RE-TENDER FOR A SUPPORT LIVING SERVICE - WESTBOURNE DEVELOPMENT

- 47.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which sought approval to re-tender for an existing supported living service for 10 people with learning disabilities within the Westbourne development.
- 47.2 **RESOLVED** (1) That it be agreed to retender the supported living service within the Westbourne development.
- (2) That the length of the contract be approved as 3 years with an option to extend for a further year.
- (3) That it is approved that the tender can be awarded under delegated authority by the Director of Adult Social Services.
- (4) That it is agreed that there be consultation with service users and other stakeholders regarding the service model provided.

The meeting concluded at 5.53pm

Signed

Chair

Dated this

day of