BRIGHTON & HOVE CITY COUNCIL

JOINT COMMISSIONING BOARD

5.00PM 22 OCTOBER 2012

COUNCIL CHAMBER, HOVE TOWN HALL

MINUTES

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

Council representatives: Councillor Rob Jarrett (Deputy Chair) Councillor Ken Norman;

Co-opted Members: Colin Vincent, LINk

Apologies: Councillor Anne Meadows

PART ONE

9. PROCEDURAL BUSINESS

- 9 (a) Declarations of Substitutes
- 9.1 There were none.
- 9 (b) Declarations of Interests
- 9.2 There were none.

9 (c) Exclusion of Press and Public

- 9.3 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).
- 9.4 **RESOLVED -** That the press and public be excluded from the meeting during consideration of Item 17.

10. MINUTES OF THE PREVIOUS MEETING

- 10.1 George Mack referred to paragraph 5.6 in which he asked why the contribution levels were lower in 2012/13 (£85M) than in 2011/12 (£89M). He had been expecting further clarification on this matter. from the finance officer, NHS Sussex.
- 10.2 The Chief Operating Officer explained that she would check this query with the Finance Officer, NHS Sussex who unfortunately was unable to attend the meeting. The information would be placed in the minutes.
- 10.3 **RESOLVED** That the minutes of the Joint Commissioning Board Meeting held on 2 July 2012 be agreed and signed as a correct record.

11. CHAIR'S COMMUNICATIONS

11.1 There were none.

12. PUBLIC QUESTIONS

12.1 There were none.

13. FINANCIAL PERFORMANCE REPORT - MONTH 5

- 13.1 The Board considered a report of the Director of Finance, NHS Sussex and Director of Finance, BHCC which set out the financial position and forecast for the partnership budgets at the end of month 5.
- 13.2 The Head of Finance Business Engagement, BHCC reported that the table at paragraph 3.1 set out the month 5 position. There were a number of areas of underspend. There was an overspend in the Sussex Community Trust in the Intermediate Care Service. A process was in place to deal with this pressure. The budget position for the Sussex Partnership Foundation Trust was improving. There was a 50/50 risk-share arrangement in place between the council and the provider in 2012/13. There was a forecast underspend on Learning Disability Services. The block contract and inflation arrangements were set out in paragraph 3.5.
- 13.3 The Chair informed the Board that she would expect a much more detailed report to be submitted to the Board at the meeting on 28 January 2013.
- 13.4 **RESOLVED** (1) That the forecast outturn for 2012/13 as at month 5 be noted.

14. LEARNING DISABILITIES ACCOMMODATION

14.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which informed members that a report had been presented to the Adult Care & Health Committee in June following a three month consultation which recommended the re-modelling of the council's accommodation for people with learning disabilities. The Committee decided to defer a decision pending consultation with the service users and additional information being provided. A further report was submitted to the Adult Care & Health Committee on 24 September where option 1 was agreed. Option 1 was set out in paragraph 3.1 of the report.

- 14.2 The Head of Adult Care & Health (Provider) informed the Board that the summary of the consultation prior to and after June 2012 was attached as appendix 1 to the report. The outcome of the consultation was attached as appendix 2. Option 1 had been recommended as it delivered a more efficient service and delivered savings whilst providing homes for an additional 5 people. Alternative options were set out in the report in paragraph 3.2.
- 14.3 Colin Vincent referred to the consultation and expressed concern and disappointment that the LINk were not directly consulted on the proposals. They had heard about the proposals from an outside source. The LINk were eventually contacted on 30 August and replied in September 2012.
- 14.4 The Head of Adult Care & Health (Provider) apologised if the LINk had not been consulted and stressed that this was an oversight. As soon as the LINk contacted the council, full details had been sent to the LINK. There would be a full review of the way the council consulted stakeholders and the Head of Adult Care & Health undertook that the LINk would be consulted in future.
- 14.5 Janice Robinson stated that she considered the arguments for the decision were well made in the report. She was interested to hear that there would not be compulsory redundancies. She asked how the staff in the new set up would be deployed differently and whether they were currently underworked. Ms Robinson noted that several of the women residents and one in particular, were concerned that they might have male carers. Ms Robinson asked for assurance that the requirements of those women would be met.
- 14.6 The Head of Adult Care & Health (Provider) replied that with regard to staff, the council were working on plans to move service users to their new accommodation. The council did not need to make redundancies as there were staff vacancies and posts had been frozen. The council had an in-house agency called Care Crew which covered vacancies with flexible workers.
- 14.7 The Head of Adult Care & Health (Provider) explained that there were very few women in the service. There was a proposal to move three young women to a new home where they would be joined by a fourth young woman. Staff would consider very carefully whether to use any male carers. The council would maintain a women's service and would ensure that their needs were met.
- 14.8 **RESOLVED** (1) That the decision made by Adult Care and Health Committee to remodel the council's accommodation for people with learning disabilities as set out in Option 1 (paragraph 3.1), be noted.

15. CARE HOME APPROVED PROVIDER ARRANGEMENTS

15.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which proposed a generic care home contract. Some existing care home contracts needed to be reviewed and current arrangements needed updating to reflect the changes in national policy as outlined in Putting People First and Caring for the Future, together with the new flexibilities around registration categories introduced by the Care Quality Commission.

- 15.2 The Contracts Manager explained that the council currently had two separate contracts for older people and people under 65 and over 18. The aim was to bring these contracts together and have a policy that spanned all age groups. The terms and conditions remained the same as before but the specifications were more robust. There were different clinical standards for nursing homes.
- 15.3 The Chair asked what sort of response had been received from the consultation. The Contracts Manager replied that there had been two issues raised by providers. The first issue related to concerns relating to the level of financial information required and health and safety issues. The smaller providers felt that the level of financial information required was inappropriate. This requirement had now been streamlined and a more proportionate system had been agreed for smaller providers. The other concern related to quality. Providers wanted assurance that good quality systems were in place.
- 15.4 The Chief Operations Officer welcomed the clinical standards in the contract documentation. She asked how officers measured compliance against those standards.
- 15.5 The Contracts Manager explained that the Clinical Review Nurse would be responsible for reviewing care.
- 15.6 Councillor Norman asked for clarification as to why the Joint Commissioning Board was being asked to agree the report rather than note it.
- 15.7 The Chair explained that as the contract in question was a joint health and social care contract, it had been decided that there should be a joint decision.
- 15.8 **RESOLVED** (1) That the process for procuring & the awarding of the contract and the timescales outlined in this report be agreed.
- (2) That it is agreed that the Director of Adult Social Services has delegated authority to award contracts.

(Note: These recommendations were agreed by the Adult Care & Health Committee on 24 September 2012)

16. TRANSFER OF CARE FROM A SHORT TERM BED

- 16.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which presented the Transfer of Care from a Short Bed Policy. The policy sought to give clarity to the situation when a person was in a short term bed that no longer met their assessed need. It also sought to make the process fair so all cases were resolved using the same principles that were captured in one policy.
- 16.2 The Commissioning Manager explained that there had been a thorough consultation process and the policy had sought to ensure that people understood the process and moved from their short term bed in a timely way. Paragraph 3.4 of the report related to

guidance on how the process should be managed when a service user refused to move. The Commissioning Manager stressed that this was a very rare occurrence.

- 16.3 Janice Robinson remarked that the report was very clear but asked why the report was being submitted at this time. She asked if the problem of people not leaving short term beds had increased. The Commissioning Manager explained that the policy had been driven by new contractual arrangements. There had not been an increase in people refusing to leave beds.
- 16.4 George Mack asked for an explanation of paragraph 3.5. "If a person needs a care home it is important to note that they may have much more choice regarding which care home they will live in, after they have moved out of a short term bed." The Commissioning Manager explained that following the move from a short term bed a person would be re-abled to meet their full potential. Some people might be able to go home, whilst others might need a care home place. People would be given time to look for a care home place and might need to wait in a temporary care home while they looked for their long term home of choice.
- 16.5 **RESOLVED** (1) That the Transfer of Care from a Short Term Bed policy and the implementation thereof, be agreed.

Note: The recommendation above was agreed by the Adult Care & Health Committee held on 24 September 2012)

Part Two Summary

17. RECOMMENDATION - AWARD OF FUNDING AGREEMENTS FOR COMMUNITY MENTAL HEALTH SUPPORT SERVICES - EXEMPT CATEGORY 3.

- 17.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People and Chief Operating Officer, Brighton & Hove Clinical Commissioning Group, NHS Sussex concerning the evaluation and recommendation for the award of funding agreements for Community Mental Health Support Services.
- 17.2 **RESOLVED** (1) That the recommendations detailed in the Part Two confidential report be accepted.

18. PART TWO PROCEEDINGS

- 18.1 The Board considered whether or not the above item should remain exempt from disclosure to the press and public.
- 18.2 **RESOLVED** That item 17 contained in Part Two of the agenda, remain exempt from disclosure to the press and public.

The meeting concluded at 6.08pm

JOINT COMMISSIONING BOARD

Signed

Chair

Dated this

day of

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