

BRIGHTON & HOVE CITY COUNCIL

JOINT COMMISSIONING BOARD

5.00PM 20 FEBRUARY 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,

Councillor Brian Fitch,

Dr Neil Stevenson, LINK (Brighton and Hove Local Involvement Network)

PART ONE

31. PROCEDURAL BUSINESS

31 (a) Declarations of Substitutes

31.1 There were none.

31(b) Declarations of Interests

31.2 There were none.

31 (c) Exclusion of Press and Public

31.3 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).

31.4 **RESOLVED** - That the press and public be not excluded from the meeting.

32. MINUTES OF THE PREVIOUS MEETING

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

33. CHAIRMAN'S COMMUNICATIONS

Welcome to members of the public

- 33.1 The Chair welcomed members of the public who were interested in item 38.

34. PUBLIC QUESTIONS

- 34.1 There were none.

35. FINANCIAL PERFORMANCE REPORT - MONTH 9

- 35.1 The Board considered a report of the Director of Finance, NHS Sussex Cluster and Director of Finance, BHCC which set out the financial position and forecast for the partnership budgets at the end of Month 9.
- 35.2 The Head of Financial Reporting & Governance stated that the results were very pleasing. Consistent improvements had been made throughout the year to address the pressures on the section 75 budget. As a result of this work, the Section 75 partnership was now forecast to underspend overall by £137K.
- 35.3 The Board were informed that Sussex Partnership NHS Foundation Trust were now forecasting an underspend of £67K. The forecast outturn for services provided by Sussex Community NHS Trust was £70k underspent.
- 35.4 **RESOLVED** - (1) That the forecast outturns for the s75 budgets as at month 9, be noted.

**36. COMMUNITY SUPPORT SERVICES FOR PEOPLE WITH LEARNING DISABILITIES:
A COMMISSIONING FRAMEWORK**

- 36.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People concerning a proposal that Community Support Services (i.e. outreach or floating support) for people with Learning Disabilities (LD) should be commissioned through a revised framework of quality monitoring and value for money.
- 36.2 Janice Robinson noted that the hourly rate was going to change. She made the point that the hourly rate was being paid to organisations paying staff. She raised concern that this might result in some staff receiving a reduced rate of pay.
- 36.3 The Lead Commissioner, Learning Disabilities agreed that it could be a risk. Officers had held discussions with providers regarding rates of pay. It was felt that smaller organisations would need a higher rate as it was more difficult for them to pay staff a living wage.

- 36.4 The Director of Adult Social Services/Lead Commissioner People mentioned that the council were about to re-contract homecare. The aim was to drive up rates in the city, with fee increases next year. Some of the increase would be passed on to staff.
- 36.5 Councillor Fitch asked for more detail on the providers. For example, whether they were companies or charities and how many people were working for them.
- 36.6 The Lead Commissioner, Learning Disabilities explained that the council worked with 8 different providers. There was a mixture from the voluntary sector and larger national organisations. The council purchased from providers. One provider was Scope. Another was Autism Sussex. A range of diverse provision was needed.
- 36.7 **RESOLVED** - (1) That the revised contract monitoring proposals be noted.
- (2) That the revised pricing framework is agreed
- (3) That subject to the transitional arrangements set out in the report the Board agrees to de-commission services from providers who are unable or unwilling to work within the parameters in the framework outlined in the report. Should there be any providers that do not transfer; a further report will be brought back to JCB. Any resulting change in provider will not alter the nature or level of services provided to individuals.

37. JOINT DEMENTIA PLAN

- 37.1 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 presented the Joint Dementia Plan for Brighton and Hove for approval.
- 37.2 Members were informed that the 2011-12 NHS National Operating Framework set out a requirement for each local area to make improvements and changes to services against the four priority areas identified by the National Dementia Strategy. The 2012/13 NHS National Operating Framework required Health and Social Care commissioners in each area to publish a Joint Commissioning Plan setting out local progress in terms of implementation of the National Dementia Strategy.
- 37.3 The Locality & Transformation Programme Manager presented the report. She stated that nationally the numbers of people with dementia was expected to double over the next 30 years. The four priority areas identified by the National Dementia Strategy were set out in paragraph 1.2 of the report. Within Brighton and Hove it was expected that there would be an increase of dementia prevalence of 30% by 2030. Paragraph 3.6 of the report set out the priority areas for Brighton and Hove.
- 37.4 Janice Robinson stated that she regretted that it had taken so long in getting a good plan for the city. She paid tribute to the Locality & Transformation Programme Manager and her colleagues and acknowledged that progress was being made. Ms Robinson considered it was good news that there would be investment in memory services. She stressed the need for cultural change and asked how the Board would know if plans to develop staff and practices had improved.

- 37.5 Dr Christa Beesley, CCG Clinical Lead for Dementia explained that each organisation would have its own plan. She acknowledged the need to educate staff, and gave examples of where improvements had already been made.
- 37.6 Janice Robinson made the point that although it was called a Joint Dementia Plan, it appeared more like a NHS Dementia Plan. Dr Beesley agreed that there needed to be strengthened links with social care.
- 37.7 The Director of Adult Social Services/Lead Commissioner People stated that there had been conversations with the local authority. She agreed that there was a need for more integration. All staff needed to be delivery trained, and money needed to be ring fenced. In terms of home care, officers were working on contracts for the next year. The Home Care Commissioning Group was meeting on 21 February 2012.
- 37.8 The Director of Adult Social Services/Lead Commissioner People referred to the table on paragraph 5 of the report. She stressed that the Memory Assessment Service had no details about investment for 2013-2014. It would not be possible to agree an unlimited amount of money. She suggested that the Joint Dementia Plan be agreed in principle and that a further report be submitted to a future JCB meeting with financial details included.
- 37.9 Dr Stevenson referred to paragraph 3.6.1 of the report. He noted that only a third of people with dementia locally were receiving a formal diagnosis. He asked why funding for the Memory Assessment Service could not be in place earlier. The Locality & Transformation Programme Manager replied that it was disappointing that funding from the Regional Transformation Fund was withdrawn during 2011. A process of identifying alternative funding sources took place during 2011, and this had affected the pace of delivery. Funding had now been secured, and officers were in the process of re-procuring the service for 2013/2014.
- 37.10 Councillor Norman referred to paragraph 3.6.3 of the report which stated that ICAST (Integrated Community Advice and Support Team) and Community Rapid Response Service were being reviewed during 2012. He asked if the same support would be in place. The Director of Adult Social Service/Lead Commissioner explained that there were no plans to change the current service. However, there might be scope for the teams to work together. There might be some investment in 2012/13 on a non-recurrent basis.
- 37.11 Janice Robinson suggested that a report should be submitted to the JCB or its equivalent in a year's time to review progress made on every aspect of the report. The Chair agreed that the Joint Dementia Plan would be reviewed in a year's time.
- 37.12 **RESOLVED** – (1) That the actions in the Joint Dementia Plan be approved in principle.
- (2) That a further report be submitted to the next meeting of the Board providing financial details for the Memory Assessment Service.

38. REVIEW OF COMMUNITY MENTAL HEALTH SUPPORT SERVICES

- 38.1 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 summarised the results of a consultation to test the validity of proposals to make changes to the community mental health support services. The report also set out updated proposals in light of the feedback obtained and in context of changes to the configuration of other mental health services in Brighton and Hove.
- 38.2 The Locality and Transformation Programme Manager gave a presentation on the main aspects of the paper, providing details of the result of the consultation which ran from 22 November 2011 to 16 January 2012. She also set out the revised proposals. (This was set out on slides that can be made available on request).
- 38.3 The Director of Adult Social Services/Lead Commissioner People asked how service users would remain involved in the process. The Locality and Transformation Programme Manager explained that there were arrangements in place with MIND regarding service user involvement. Meanwhile, she was happy to hold further meetings with service users before the contracts were let out.
- 38.4 The Director of Adult Social Services/Lead Commissioner People asked if there would be one to one sessions with services users once the contracts were awarded. The Locality and Transformation Programme Manager replied that there would be consultation throughout the process. There would be one to one sessions with service users once officers had specific options for the future, after October 2012.
- 38.5 The Director of Adult Social Services/Lead Commissioner People asked if everyone currently using a service would continue to receive a service. The Locality and Transformation Programme Manager replied that there was a commitment that everyone who wanted to access the Mental Health Day Centre would be able to do so.
- 38.6 Councillor Norman referred to paragraph 4.5 in the report in relation to Day Services. This stated that the provider' proposal was to provide services from 3 different buildings rather than a single base and to integrate services more with other facilities such as a community café. Councillor Norman asked if there were specific risks indentified in this proposal. He also asked if the centres would all be open the same hours.
- 38.7 The Locality and Transformation Programme Manager replied that officers were still in discussion with service users about this issue. The aim was to produce like for like provision. It might not be provided from a single base but would be provided from a range of bases. She stressed that the current base was not an open day centre at present. People needed to know which day they went there for a particular activity. The service was specific for named individuals.
- 38.8 The Locality and Transformation Programme Manager stated that a great deal of information was received as a result of the consultation. She referred to a diagram in the last page of her presentation (New Models of Services). This showed how these services fitted in with the mental health services. They were not considered in isolation.

- 38.9 Dr Stevenson hoped that there was discussion with other service providers. This was not mentioned in the report. He was pleased to see the role of carers was highlighted. Dr Stevenson stressed how day services were the most expensive part of the service. He felt that the report concentrated on buildings rather than on contents, and considered it was time for a review of Day Services.
- 38.10 The Locality and Transformation Programme Manager referred to paragraph 4.5 of the report which gave a brief mention of the functions of a day service. Officers were in the process of working on the detail which would be presented to the Joint Commissioning Board on 23 April 2012.
- 38.11 Dr Stevenson stated he hoped that the impact of the voluntary sector would be taken into account. The Locality and Transformation Programme Manager stated that this matter was considered in the consultation. Officers would look at the impact in more detail at the next stage of the process.
- 38.12 **RESOLVED** – (1) That the findings of the consultation process be noted.
- (2) That the updated proposals for service changes detailed in sections 4.2 c), 4.3 c), 4.4 c), 4.5 c) and 4.6 c) of the report be approved.
- (3) That the following be agreed:-
- All existing contracts within the framework of the review remain in place until 31st March 2013. At this point all existing contracts will terminate and new contracts will replace the current service contracts.
 - New service specifications and outcome based performance indicators are developed for all new services to be commissioned (based on the proposals for service changes detailed in sections 4.2 c), 4.3 c), 4.4 c), 4.5 c) and 4.6 c)
 - A further report is provided to the JCB in April to approve:
 - Specifications for the new services described in this report.
 - The preferred route to obtain the new services (for example whether this is via procurement or grants process or a mixture of both).

39. RE-MODELLING IN-HOUSE ACCOMMODATION FRO PEOPLE WITH A LEARNING DISABILITY

- 39.1 The Board considered a report of the Director of Adult Social Services/Lead Commissioner People which set out proposals consulting on the re-modelling of the council's in-house accommodation for people with learning disabilities. The re-modelling of the in-house service was required to contribute to an increase in local services for people with challenging behaviour and other complex needs who were often at risk of being placed out of the City.
- 39.2 The Head of Service, Adults' Provider outlined the report, which proposed to remodel the in-house service by making some changes to the accommodation, further increasing staff skills and flexibility, and by focusing the in-house service on those with the greatest

needs. The paper updated JCB on the decision by the Cabinet Member Meeting to commence consultation staff and service users to inform the development of a model of accommodation which delivered improved value for money in line with other authorities and focused on providing specialist accommodation.

- 39.3 **RESOLVED** - (1) That the start of a period of 90 days consultation with all stakeholders be noted.
- (2) That it is noted that following full consultation a further report will be brought to the Adult Social Care & Health Cabinet Member Meeting or relevant committee meeting in June 2012.
- (3) That a further report is brought back to JCB following the full consultation.

The meeting concluded at 6.16pm

Signed

Chair

Dated this

day of

