



BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH

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DATE: 2nd October 2015

To: Members of the
EXECUTIVE

Councillor Stephen Carr (Chairman)

Councillors Graham Arthur, Robert Evans, Peter Fortune, Kate Lymer, Peter Morgan and Colin Smith

A meeting of the Executive will be held at Bromley Civic Centre on **WEDNESDAY
14 OCTOBER 2015 AT 7.00 PM**

MARK BOWEN
Director of Corporate Services

*Copies of the documents referred to below can be obtained from
<http://cds.bromley.gov.uk/>*

A G E N D A

- 1 **APOLOGIES FOR ABSENCE**
- 2 **DECLARATIONS OF INTEREST**
- 3 **TO CONFIRM THE MINUTES OF THE MEETINGS HELD ON 9TH SEPTEMBER 2015 AND 17TH SEPTEMBER 2015** (Pages 5 - 20)
 - a) to confirm the minutes of the meetings held on 9th September 2015 and 17th September 2015
 - b) Matters Arising report
- 4 **QUESTIONS FROM MEMBERS OF THE PUBLIC ATTENDING THE MEETING**

In accordance with the Council's Constitution, questions must be received in writing four working days before the date of the meeting. Therefore please ensure that questions are received by the Democratic Services Team by 5pm on Thursday 8th October 2015.
- 5 **PUBLIC HEALTH COMMISSIONING INTENTIONS 2016/17** (Pages 21 - 28)
- 6 **POST DIAGNOSIS DEMENTIA SUPPORT** (Pages 29 - 38)
- 7 **GATEWAY REPORT: OLDER PERSONS RESPITE CARE** (Pages 39 - 46)

- 8 **PROCUREMENT STRATEGY FOR PROVISION OF CARE SERVICES IN EXTRA CARE HOUSING** (Pages 47 - 56)
- 9 **DEPRIVATION OF LIBERTY SAFEGUARDS UPDATE** (Pages 57 - 62)
- 10 **DRAW-DOWN OF GOVERNMENT GRANT FUNDING TO SUPPORT THE LOCAL AUTHORITY IN IT'S ROLE AS A LONDON REGIONAL LEAD FOR THE IMPLEMENTATION OF THE SPECIAL EDUCATIONAL NEEDS & DISABILITY (SEND) REFORMS FROM APRIL 2015/16** (Pages 63 - 70)
- 11 **CONSIDERATION OF ANY OTHER ISSUES REFERRED FROM THE EXECUTIVE AND RESOURCES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE**
- 12 **LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 AND THE FREEDOM OF INFORMATION ACT 2000**

The Chairman to move that the Press and public be excluded during consideration of the items of business listed below as it is 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 there would be disclosure to them of exempt information.

Items of Business

Schedule 12A Description

- | | |
|--|--|
| <p>13 EXEMPT MINUTES OF THE MEETINGS HELD ON 9TH SEPTEMBER 2015 AND 17TH SEPTEMBER 2015 (Pages 71 - 78)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> <p>Information which reveals that the authority proposes - to give under any enactment a notice under or by virtue of which requirements are imposed on a person, or to make an order or direction under any enactment,</p> |
| <p>14 ANERLEY TOWN HALL (Pages 79 - 110)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
| <p>15 GRAFFITI REMOVAL CONTRACT EXTENSION 2017-19 (Pages 111 - 116)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |

16 AWARD OF ICT CONTRACT

Report to follow

Information relating to the financial or business affairs of any particular person (including the authority holding that information)



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EXECUTIVE

Minutes of the meeting held on 9 September 2015 starting at 7.00 pm

(adjourned until 17 September 2015 following the Special Executive meeting)

Present

Councillor Stephen Carr (Chairman)
Councillors Graham Arthur, Peter Fortune, Kate Lymer,
Peter Morgan and Colin Smith

Also Present

Councillor Simon Fawthrop and Councillor William
Huntington-Thresher

255 APOLOGIES FOR ABSENCE

Apologies were received from Councillor Robert Evans.

The Leader also conveyed apologies from Councillor Nicholas Bennett who was unable to attend the meeting as a visiting Member.

256 DECLARATIONS OF INTEREST

Noting the agenda for the Executive's Special meeting to be held on 17th September 2015, Councillor Simon Fawthrop declared an interest by virtue of his employment with British Telecom.

257 TO CONFIRM THE MINUTES OF THE MEETINGS HELD ON 15TH JULY 2015 AND 7TH AUGUST 2015

The minutes for both meetings were agreed.

258 QUESTIONS FROM MEMBERS OF THE PUBLIC ATTENDING THE MEETING

A number of questions had been received. Details of the questions and replies are at **Appendix A**.

Noting that one of the received questions was similar in content to a question previously asked at an Executive meeting, the Leader highlighted provision in the Council's Constitution enabling a question to be rejected if substantially the same as one asked in the previous six months.

Although willing to accept the question on this occasion, the Leader explained that it would be necessary to reject such a duplicate question in future.

**259 LEAD LOCAL FLOOD AUTHORITY UPDATE AND GRANT
DRAW-DOWN**

Report ES15041

Report ES15041 provided an update on the Council's role as Lead Local Flood Authority, including progress in implementing provisions of the Flooding and Water Management Act 2010 (FWMA), and changes in responsibilities. The report sought approval for the Local Flood Risk Strategy (LFRS) and Action Plan (the strategy having been drafted as part of a joint procurement approach with the South East London Flood Risk Group). It also reviewed L B Bromley's response to the groundwater flooding issue in 2014 and sought agreement for a sum of £213k being released from Central Contingency to implement a programme of future responsibilities and work streams.

At the previous meeting Councillor Nicholas Bennett explained that he had made a number of suggestions in comments submitted during consultation on the proposed LFRS (appended to Report ES15041) but that these did not appear to have been taken into account. In the circumstances Members agreed to defer the report to the next meeting.

Report ES15041 advised that comments received during consultation were now included at Appendix C to the strategy, with the LFRS document amended as appropriate.

Referring to recommendations from the Executive and Resources PDS Committee at their meeting on 3rd September 2015, the Deputy Leader and Portfolio Holder for the Environment indicated that work on the Council's flood risk register had not yet concluded. Concerning a Flood Asset Register, Report ES15041 advised that following condition surveys and ad hoc investigations, knowledge continued to develop of assets with a potential to contribute to flooding.

In regard to the Environment Agency document "*Living on the Edge*", providing a guide to the rights and responsibilities of riparian landowners, the document would be made available on the Council's website. The Portfolio Holder highlighted that riparian landowners would also be reminded by letter of their responsibilities for helping to manage flood risk.

Members agreed to the recommendations in Report ES15041 and further agreed that the additional recommendations from the Executive and Resources PDS Committee be taken forward.

RESOLVED that:

(1) a sum of £213k be released from the 2015/16 Central Contingency budget to implement the proposals detailed in Report ES15041;

- (2) the Local Flood Risk Strategy and associated Action Plan be approved;**
- (3) the LLFA future works programme be approved;**
- (4) the Register of Flood Risk features be published on the Council's website; and**
- (5) a positive programme be undertaken to highlight the responsibilities of riparian landowners, including publication to the Council's website of the Environment Agency document "Living on the Edge".**

**260 SCHOOLS PROGRAMME, VOLUNTEER MANAGER, AND
 RESETTLEMENT OFFICER - DRAW-DOWN**

Report ES15067

The Department for Communities and Local Government (DCLG) had allocated a total of £86,570 Preventing Homelessness Grant to L B Bromley. The Public Protection and Safety Portfolio Holder agreed in June 2015 that £26,570 be released from Central Contingency and approval was now sought to release the remaining £60k.

The funding would be used to enable Bromley Women's Aid (BWA) to continue and expand their Schools Programme to develop awareness of healthy relationships and domestic violence. It would also be used so that a Volunteer Manager and a Resettlement Officer could be employed to expand the BWA support service for the next two years. The scope of support available within BWA's services could improve so that women move from a refuge when ready into a range of different housing options, rather than wait for a local authority housing offer.

Early identification, intervention, and support would not only help prevent domestic abuse but could also remove a need for refuge accommodation, allowing bed spaces to be provided for those in urgent need.

The grant would fund the project to 31st March 2017. The service specification and project plans had been developed by BWA and the grant awarded on the understanding that BWA would deliver the project. There were no other known local providers with the capacity, knowledge or skill set to undertake the work.

Some Members of the Executive and Resources PDS Committee were concerned that children as young as seven years old should be addressed on domestic violence, and suggested that raising the awareness of teachers might be more appropriate. There was also concern at how outcomes would be measured and it was suggested that Executive Members be sent summaries of the content of actual sessions with further details of DCLG methodology and performance standards. Councillor Fawthrop suggested that the methodology behind the programme needed consideration and he

supported the involvement of teacher staff who would have an understanding of the children and be familiar with their history.

The Schools Programme was delivered by a BWA officer in a one hour session in the children's classroom with the children's teacher present. The session would include the use of DVD material and feedback suggested that the children engaged well. Any children disclosing domestic abuse during a session were referred to the school's safeguarding lead and offered one to one support by a BWA Child Support Officer. The Portfolio Holder for Public Protection and Safety suggested that information on the Service Level Agreement with BWA be circulated to highlight activities and outcomes from the project. Referring to the Executive's Children's Board, the Leader was reassured on measures for dealing with some of the safeguarding issues and all schools had a nominated safeguarding officer.

Confirmation was sought on whether issues unrelated to safeguarding would be passed to agencies. It was explained that a focus would be on the most vulnerable children with identified concerns. The school would manage the relationship between the BWA officer and children. Assessments would be made around the degree of risk for a child and of hearsay issues not related to domestic violence and child abuse. The BWA officer would be encouraged to report concerns to the Head Teacher and/or Safeguarding lead and feed back concerns to the project organisers via the Council's Head of Trading Standards and Community Safety.

As part of ongoing scrutiny, it was suggested that the Public Protection and Safety PDS Committee receive a presentation from the BWA officer providing sessions at schools. A Member was unsure on whether means were available to judge project outcomes; he was also concerned about a DVD on domestic violence being shown to children as young as seven years old. He suggested that schools already covered the matter without a need for BWA sessions which could incentivise children to report issues that might not be there.

The Leader felt that if one child could be prevented from serious harm then it was necessary to consider release of the funds. Although concerned to ensure there would be no ongoing cost should grant funding be withdrawn, the Leader suggested that the recommendations be agreed in principle. The Portfolio Holder for Public Protection and Safety added that Bromley Women's Aid were experts in their field and the DVD would focus on what a healthy relationship would look like.

It was agreed to support the recommendations in principle with the Portfolio Holder for Public Protection and Safety delegated to obtain responses to concerns raised in discussion. This would include feedback on the range of matters reported on from the BWA classroom sessions.

RESOLVED that, in principle:

- (1) draw-down of the £60k sum held in Central Contingency be approved and allocated to the Public Protection and Safety Portfolio Budget for 2015/16;**
- (2) award of the contract to provide a Schools Programme, Volunteer Manager, and Resettlement Officer to Bromley Women's Aid be approved; and**
- (3) any residual balance of the year two grant be carried forward into 2016/17 to enable Bromley Women's Aid to deliver the project.**

261 CONSIDERATION OF ANY OTHER ISSUES REFERRED FROM THE EXECUTIVE AND RESOURCES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

There were no additional issues to be reported from the Executive and Resources PDS Committee.

262 LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 AND THE FREEDOM OF INFORMATION ACT 2000

263 EXEMPT MINUTES OF THE MEETINGS HELD ON 15TH JULY 2015 AND 7TH AUGUST 2015

The exempt minutes of the above meetings were agreed.

264 BROMLEY ADULTS AND BROMLEY YOUNG PERSONS SUBSTANCE MISUSE CONTRACT TENDERS - AWARD OF CONTRACT

Report CS15920

Report CS15920 outlined the results of a tendering process for provision of the Bromley Adults Substance Misuse Service and the Bromley Young Persons Substance Misuse Service. The report also provided a recommendation for award of contracts.

265 AWARD OF CONTRACT FOR CAPITAL WORKS AT BEACON HOUSE

Report ED15104

Members were updated on progress in refurbishing Beacon House, Old Holmesdale Road, Bromley so that it could open as Burwood School's KS4 and KS5 provision next year.

Executive
9 September 2015

The meeting was adjourned on 9th September 2015 and re-convened following the Executive's special meeting on 17th September 2015 to *inter-alia* enable clarification on costs related to the refurbishment project.

Having considered supplementary information and explanation from officers, Members accepted the costs as presented and agreed the recommendations in Report ED15104.

Chairman

The Meeting ended at 8.27 pm

EXECUTIVE

Minutes of the meeting held on 17 September 2015 starting at 6.00 pm

Present

Councillor Stephen Carr (Chairman)
Councillors Graham Arthur, Robert Evans, Peter Fortune,
Kate Lymer, Peter Morgan and Colin Smith

Also Present

Councillor Nicholas Bennett J.P., Councillor Ian Dunn,
Councillor Simon Fawthrop, Councillor Russell Mellor and
Councillor Keith Onslow

266 APOLOGIES FOR ABSENCE

There were no apologies.

267 DECLARATIONS OF INTEREST

As a visiting Member, Councillor Simon Fawthrop (Executive and Resources PDS Chairman) declared a Discloseable Pecuniary Interest at item 6 of the agenda by virtue of his employment with British Telecom (BT). Accordingly, Cllr Fawthrop vacated the Council Chamber for the entire length of time the matter at item 6 was considered and debated by the Executive.

268 CIVIC CENTRE DEVELOPMENT STRATEGY

Report DRR15/086

Transforming the Council into a Commissioning Authority would further reduce staff numbers and impact on future office requirements. With the Local Plan process underway it was also necessary to optimise development opportunities for the Civic Centre and align the site's planning designation with its potential development opportunities.

Consultancy firm Montagu Evans LLP had produced a Development Strategy for the site, proposing three options for accommodating staff and the potential value of surplus land for disposal consequent upon each option. The Strategy identified potential uses and opportunities for the site and a number of planning and other constraints were taken into account.

Councillors and Chief Officers were consulted during the process with Option 3 identified for further investigation. This focused on remaining at the site in two or three buildings e.g. North Block, Stockwell Building and Adventure Kingdom. The remainder of the site would be sold with the multi-storey car park and park land retained.

Although disposing of part of the site would provide a lower capital receipt, significant costs and risks would be avoided in acquiring or constructing a new Civic Centre. The Council could reduce its costs (revenue savings in the region of £0.8m were estimated), stay on site, and have a greater element of control over redevelopment and flexibility for the future.

Additional work was needed during the next four to six months to produce a detailed Business Case for Option 3. A further report could then be brought to Executive in early 2016.

To review the site designation, it was recommended that the Council submit a formal representation as part of the Local Plan consultation process with approval of the representation being delegated to the Civic Centre Project Board in consultation with Ward Councillors.

Representations/decisions on the Local Plan policies and designations could form the basis of a landowner development brief, which would become part of the tender documentation for disposal. The Council could then potentially exercise control without complicating the disposal.

A document management work stream would also be necessary to reduce paper files and encourage electronic filing.

In principle, the Leader and Deputy Leader both supported Option 3 subject to further investigation and production of a detailed business case. However, the Leader felt that it was too early to be clear on buildings for disposal - supporting Option 3, the Portfolio Holder for Care Services agreed.

In developing a business case for Option 3, it was confirmed that a multi-use of buildings was being considered to increase revenue streams. The Leader also indicated that more certainty would be needed on planning constraints at decision taking in early 2016. It would also be necessary for the business case to cover all eventualities.

RESOLVED that:

(1) the additional work necessary to produce a business case for option 3, as outlined at paragraph 3.42 of Report DRR15/086, be approved;

(2) Montagu Evans LLP be reappointed to provide further consultancy services in preparing work for the second stage of the business case and for preparing the planning representations – this in addition to a desktop archaeological survey and condition survey being required;

(3) the planning representations are to show an area of land for proposed disposal and aspirations for the uses and development based on Option 3, and the representations be agreed by the Civic Centre Project Board in consultation with Ward Councillors prior to submission;

- (4) further work is to be undertaken to identify the buildings for disposal and all options should be considered;**
- (5) a sum of £57,500 be approved for additional consultancy services;**
- (6) comments regarding the multi-storey car park be noted; and**
- (7) a single development partner be selected.**

269 LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 AND THE FREEDOM OF INFORMATION ACT 2000

270 CIVIC CENTRE DEVELOPMENT STRATEGY

Report DRR15/087

Further information was provided about legal constraints related to the Civic Centre site and actions being considered. The Civic Centre Development Strategy was also provided along with further financial information for Options 1, 2, and 3 (including costs and, where appropriate, capital receipt) and financial implications. A broad estimated cost of the document management work stream was also included.

271 AWARD OF ICT CONTRACT

Report CSD15107

Approval was sought on matters related to the future provision of ICT services for the Council.

Chairman

The Meeting ended at 6.43 pm

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QUESTION FROM COUNCILLOR FOOKES FOR WRITTEN REPLY

What action will Bromley be taking to assist those people displaced by events in Syria?

Reply

At present political discussions are taking place in London to assess the potential for London authorities to provide assistance, particularly in light of the current pressures regarding homelessness and temporary accommodation. All London authorities have therefore been asked to indicate the level of accommodation they would be able to procure within their borough boundaries within the current temporary accommodation rental prices. Bromley has responded to confirm that it is not currently possible to procure accommodation within the borough within these financial limits. Evidence has also been submitted to show the current pressures around homelessness and temporary accommodation supply to meet our statutory homelessness duties.

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Decision Maker: Executive

Date: 14th October 2015

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **MATTERS ARISING FROM PREVIOUS MEETINGS**

Contact Officer: Keith Pringle, Democratic Services Officer
Tel. 020 8313 4508 E-mail: keith.pringle@bromley.gov.uk

Chief Officer: Director of Corporate Services

Ward: N/A

1. Reason for report

1.1 **Appendix A** updates Members on matters arising from previous meetings.

2. **RECOMMENDATION**

2.1 **The Executive is invited to consider progress on matters arising from previous meetings.**

Non-Applicable Sections:	Policy/Financial/Legal/Personnel
Background Documents: (Access via Contact Officer)	Executive Minutes

Corporate Policy

1. Policy Status: Existing Policy The Executive receives an update on matters arising from previous meetings at each meeting.
 2. BBB Priority: Excellent Council
-

Financial

1. Cost of proposal: No Cost
 2. Ongoing costs: Not Applicable
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: £326,980
 5. Source of funding: 2015/16 Revenue Budget
-

Staff

1. Number of staff (current and additional): 8 posts (7.39fte)
 2. If from existing staff resources, number of staff hours: Monitoring the Executive's matters arising takes at most a few hours per meeting.
-

Legal

1. Legal Requirement: Non-Statutory - Government Guidance
 2. Call-in: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): This report is intended primarily for the benefit of Executive Members
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

<u>Minute Number/Title</u>	<u>Executive Decision/Request</u>	<u>Update</u>	<u>Action by</u>	<u>Completion Date</u>
11th February 2015				
138. Community Services Integration	It was agreed that options towards an integrated community health and care service would be explored with the borough's existing community health services provider, Bromley Healthcare (BHC), and their commissioners, Bromley Clinical Commissioning Group (BCCG). Recommendations could then be provided to Members in June 2015.	It is intended to approach the Care Services PDS Committee initially before reporting to the Executive.	Assistant Director, Commissioning	To be confirmed
24th March 2015				
171 Crystal Palace Park	Progress made on business planning for the establishment of an alternative management option for Crystal Palace Park to be reported back to Members in autumn 2015, with an expected request to Members to proceed with the formation of a Trust or other not-for-profit management option.	It is intended to provide a further report in the new year.	Executive Director of Environment and Community Services	Please see opposite.
177/1 Site G: Revised Development Options	Quarterly updating reports should be submitted to the Executive.	It is anticipated that an updating report will be provided to the Executive meeting on 2 nd December 2015.	Director of Regeneration and Transformation	Please see opposite

15 th July 2015				
<p>232 Council Tax Support – 2016/17</p>	<p>.....(3) a decision on minimum Council Tax liability be deferred until the outcome of public consultation is known.</p>	<p>The consultation exercise commenced on 17th August 2015. Residents are being asked whether they believe the minimum contribution to council tax liability for working-age claimants should be 19%, 25% or 30%.</p>	<p>Director of Finance</p>	<p>Result of consultation exercise to be reported to Executive on 2nd December 2015</p>

Report No.
CS15925

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by Care Services PDS Committee on:

Date: 23rd September 2015

Decision Type: Non-Urgent Executive Key

Title: PUBLIC HEALTH COMMISSIONING INTENTIONS 2016/17

Contact Officers Mimi Morris-Cotterill, Assistant Director, Public Health
E-mail: mimi.morris-cotterill@bromley.gov.uk
Kay Spurrier, Procurement Officer, ECHS
E-mail: kay.spurrier@bromley.gov.uk

Chief Officer: Dr Nada Lemic, Director of Public Health

Ward: (All Wards);

1. Reason for report

This report sets out the Public Health commissioning intentions for 2016/17.

2. **RECOMMENDATIONS**

2.1 **Care Services PDS are asked to note and comment on the contents of this report.**

2.2 **Subject to corporate savings decisions, the Executive are asked to:**

- (i) **approve the extension of the Public Health Framework for two years until 31 March 2018.**
- (ii) **note the intention to continue to use the commissioning arrangements with Bromley Clinical Commissioning Group (CCG) through section 75 for provision of community services by Bromley Healthcare.**
- (iii) **note that the Public Health lead for sexual health has pursued a cross-London solution for the commissioning of Genito-Urinary Medicine (GUM) services as agreed by Executive in Nov 2014.**
- (iv) **approve the exemption of acute GUM contracts from tendering in line with CPR 13.**
- (iv) **approve the continued use of Service Level Agreements for services offered by General Practitioners for 2016/17 by granting an exemption as per sections 3 and 13 of the contract procedure rules.**

Corporate Policy

1. Policy Status: Existing Policy
 2. BBB Priority: Children and Young People Excellent Council Supporting Independence
-

Financial

1. Cost of proposal: Within existing officer capacity
 2. Ongoing costs: Recurring Cost:
 3. Budget head/performance centre: Director of Public Health
 4. Total current budget for this head: £12.9million (2015/16)
 5. Source of funding: Department of Health; Public Health Grant
-

Staff

1. Number of staff (current and additional): 25 FTE
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement Non-Statutory - Government Guidance:
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Borough Wide
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1. In terms of administration of Public Health contracts, they are divided into four types:

- Contract Type A: Standard Contracts
- Contract Type B: Bromley CCG Community Block Contract with Bromley Healthcare
- Contract Type C: Sexual Health Clinical Contracts with acute hospital providers
- Contract Type D: Service Level Agreements with General Practitioners

3.2. Public Health are seeking to build on the progress made in commissioning services on behalf of the Council since responsibility for Public Health was transferred to the Council in April 2013. A paper on 2014/15 performance of Public Health Contracts is to be presented to the Care Services Policy Development and Scrutiny Committee on 17 September 2015.

3.3. This paper sets out, for Members' approval, Public Health commissioning intentions for 2016/17. It recognises that the proposed contractual arrangements discussed in this paper will depend on the corporate savings decisions. Members' approval at this stage merely provides public health commissioners the ability to respond flexibly according to those saving decisions.

3.4. With contractual arrangements put in place during 2013/14, there are few changes to the method of procurement.

Contract Type A: Standard Contracts

3.5. Substance misuse contracts will account for the majority of the Category A Standard Contracts spend in 2016/17, with a total annual value of £1.6m. They were subject to a recent tendering process which was presented in a separate paper to the Executive.

3.6. Another group of 21 Category A Standard Contracts have been called off from the Council's Public Health Framework in 2015/16. The Framework was put in place in April 2014 with an estimated annual value of £800,000. The actual value of these 21 Framework contracts totalled £502k with an actual spend of £503k in 2014/15.

3.7. Commissioning intentions for these services are subject to corporate savings decisions. The framework approach gives flexibility to commissioners as there is no commitment to call off any services from the appointed providers. All of the initial framework contracts were awarded for a 1 year term. This has allowed the service budgets to be included for consideration as part of the wider corporate savings decisions.

3.8. The Framework expires on 31 April 2016 with an option to extend for further two years. Given its flexibility in responding to corporate saving decisions, it is proposed to extend the Framework for two years.

Contract Type B: Bromley CCG Community Block Contract

3.9. The Community block contract with Bromley Healthcare includes the following service lines which Public Health has responsibility for:

- Contraception and Reproductive Health
- Health Improvement
- Smoking Cessation
- School Nursing
- The National Childhood Measurement Programme
- Child Healthy Weight Programmes
- Health Visiting (from October 2015)

- 3.10. The services have been managed by the Director of Public Health through a Section 75 agreement with the CCG. However, in practice, the Public Health team has assumed commissioning responsibility of these services by direct contract negotiations with Bromley Healthcare and separate quarterly performance monitoring of these services.
- 3.11. The CCG has extended the community block contract with Bromley Healthcare until 31 March 2017. The intention is to continue with this arrangement subject to corporate savings decisions until 31 March 2017. Subject to Members' decision, this will provide the potential for a joint procurement exercise with the CCG during 2016/17 for the relevant community services post saving decisions.
- 3.12. The total value of these services has increased from £3m per annum to £4.9m for 2015/16 with a recurrent value of £6.8m per annum. This change reflects the addition of Health Visiting, which falls under the remit of Public Health in October 2015. The annual value for this service is £3.8m. The Health Visiting service specification has been developed nationally and is mandated in five key areas (antenatal health promoting reviews, new baby reviews, six to eight week assessments, one year assessments, and two to two and a half year reviews) by the Department of Health.

Contract Type C: Sexual Health Clinical Contracts (Acute)

- 3.13. Under 'The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2012' the Council has a duty to provide open access sexual health services. The term 'open access' refers to the fact that such services are available to anyone requiring treatment, irrespective of their personal characteristics, place or residence or GP registration, without referral. These services are known as Genito-Urinary Medicine (GUM) Services.
- 3.14. In 2014/15 the actual spend on GUM services was £1.6m funded directly by the Council's Public Health Grant. The commissioning arrangements with two of the Council's main GUM service providers (Kings College Hospital NHS Foundation Trust and Guys and St Thomas NHS Foundation Trust) have been covered by Section 75 agreement with Bromley CCG. These two providers accounted for £1.14m of the 2014/15 total spend.
- 3.15. Following Members' approval (Executive on 12 June 2013 (Item 193), Executive on 16 July 2014 (Report CS14067), and Executive on 26 November 2014 (Report CS14101)), the Sexual Health lead has pursued a collaborative commissioning approach with 25 London Boroughs in contract negotiations with London GUM providers. A Collaboration Agreement, approved by each borough legal team, is in place between all participant Boroughs.
- 3.16. While contracts are yet to be finalised with every GUM provider involved, the Collaborative has achieved an overall reduction in the 2015/16 published GUM Tariff and a set of more advantageous terms than those that could have been negotiated by individual commissioning authorities. The opening offer of these terms include tariff at £131 for first attendance and £80.77 for follow up attendance compared with the NHS published GUM tariff of £131 for first and £103 for follow-ups. No inflation (NHS recommended inflation of 1.93%), efficiency of 5%, marginal rates for growth (growth of 0-5% at 60% of full price and growth of 5-10% at 40%), replace Market Forces Factor (an allowance imposed on the published NHS national tariff to reflect geographical differences which for some inner London provider could be as high as 29.39%) with a lower geographical allowance of 20% for inner London and 17% for outer London.

3.17. The sexual health lead proposes that for any Out of London GUM service provision, payable by the Council as Non-Contractual Activity, the Council takes the position of paying rates no higher than those negotiated by the providers host Local Authority commissioner.

3.18. The proposal is to continue with these arrangements into 2016/17 and that an exemption from the Council's procedure rules be granted. This proposal is made in line with CPR 13.1, regarding authorisation to exempt these services from tendering.

Contract Type D: Service Level Agreements with General Practitioners

3.19. In 2014 Executive approved an exemption of the contract procedure rules in order that the Council could enter into one year Service Level Agreements (SLAs) with GPs to support the delivery of:

- Sexual Health Services
- Substance Misuse Services
- NHS Health Checks

3.20. The implementation of these SLAs has streamlined the commissioning activity of these services as well as improving the contract and budget monitoring processes and payment arrangements. All 45 registered GP Practices in the Borough have signed up to deliver one or more elements of these services during 2015/16 which have an estimated total value of £565,350.

3.21. GP participation in these Public Health programmes remains vital as GP practices hold patient lists covering the local population and have direct access to those patients the Public Health programmes seek to target. Therefore this report proposes that an exemption from the Council's contract procedure rules be granted to support the continuation of these programmes by enabling the Director of Public Health to establish a new round of SLAs with GP Practices for 2016/17. No significant changes will be made to these programmes apart from cessation of the substance misuse SLA as these services have been incorporated into a wider substance misuse contract with consequential savings. The estimated total value of GP SLAs for 2016/17 is £539,350.

4. POLICY IMPLICATIONS

4.1. This report is in relation to the business processes that will be established or maintained to administer existing contracted services. Authorisation to commission these services remains with Members working within the stipulations and statutory responsibilities laid out in the Public Health grant. The work is in accordance with the Health and Social Care Act 2012 and The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2012.

5. FINANCIAL IMPLICATIONS

5.1. The Public Health Grant is a central government grant which is ring-fenced until 2016/17. The Department of Health grant allocation for Bromley was £12,953,600 in 2015/16, although this has now been reduced by an estimated 6.2% which would take the grant down to broadly £12m.

5.2 Details of the exact reduction have not yet been given by the Department of Health. However, work is being conducted currently by Public Health officers to ensure savings will be identified to compensate for the loss of grant in year. It is anticipated, at this stage that the reduction will likely continue into the 16/17 grant allocation.

- 5.3 This is in addition to any savings already identified as part of the 2016/17 budget. By extending the framework for another two years, this does not commit Bromley to a particular level of expenditure and Officers retain the manoeuvrability to adjust expenditure should the need occur.
- 5.4. The grant conditions require quarterly financial reporting to the Department of Health against a set of standardised budget reporting lines and the expenditure must be explicitly linked to the Health and Wellbeing Strategy, Public Health Outcomes Framework and the Joint Strategic Needs Assessment. The Council will need to show that it spends the Grant on Public Health related expenditure. The reporting categories are sufficiently flexible to allow local decisions about what services are commissioned to be reflected sensibly. The Grant can be used for both revenue and capital purposes.
- 5.5. The expectation is that funds will be utilised in-year, but if at the end of the financial year there is any under spend this can be carried over, as part of a Public Health Reserve, into the next financial year. In utilising those funds the next year, the grant conditions will still need to be complied with.
- 5.6. There is also a statement of assurance that needs to be completed and signed off by the Chief Finance Officer and Director for Public Health at year end. The expenditure for Public Health services will be included within the overall audit of the council's statement of accounts and the Council needs to evidence that it spends the Grant on public health activities across the Council.
- 5.7 2016/17 spending decisions are subject to Member approval as part of the Medium Term Financial Strategy/budget setting process. Therefore the 2016/17 budgets for these contracts are indicative until that time.

6. LEGAL IMPLICATIONS

- 6.1. This report uses existing legal frameworks, such as the scheme of delegation, to manage and administer the responsibilities placed on the Council.
- 6.2 The need to follow the guidance in paragraph 13 of the Ring Fenced Public Health Grant letter is key:

“13. In giving funding for public health to local authorities, it remains important that funds are only spent on activities whose main or primary purpose is to improve the health and wellbeing of local populations (including restoring or protecting their health where appropriate) and reducing health inequalities.”
- 6.3 As is condition 3 of the Grant Conditions:

“the grant must be used only for meeting eligible expenditure incurred or to be incurred by local authorities for the purposes of their public health functions as specified in Section 73B(2) of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012) (“the 2006 Act”).”
- 6.4 There is independent audit and provision for claw back if the money is not spent appropriately.
- 6.5 Education, care and health services are subject to the application of the “light touch” regime under the Public Contracts Regulations 2015.

Non-Applicable Sections:	Personnel Implications
Background Documents: (Access via Contact Officer)	Report CS14018 – Appointments to the Framework for Various Public Health Services, February 2014 Report CS14067 – Public Health Contracts – Annual Update, July 2014 Report CS14101 – Public Health Commissioning 2015/16, Nov 2014 Report CS14134 – Gateway review of Substance Misuse Services, May 2015

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Report No.
CS15926

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by Care Services PDS Committee on:

Date: 23rd September 2015

Decision Type: Non-Urgent Executive Key

Title: POST DIAGNOSIS DEMENTIA SUPPORT

Contact Officer: Andy Crawford, Commissioning Manager
Tel: 020 8461 7446 E-mail: andy.crawford@bromley.gov.uk

Chief Officer: Lorna Blackwood, Assistant Director: Commissioning (ECHS)

Ward: (All Wards);

1. Reason for report

- 1.1 Bromley is known to have the highest number of people with dementia in London and dementia support remains a key priority under the Council's Health and Wellbeing Strategy.
 - 1.2 In recent months there has been a national programme, led by NHS England to increase diagnosis rates. In the last 12 months diagnosis rates in the borough have gone up from 47% to 58% due to the work of Oxleas and GP Surgeries in primary care. The Council and local Clinical Commissioning Group now propose to commission against the funds set aside in the Better Care Fund for Dementia to improve and in some cases fill a critical gap in post diagnosis support to Bromley residents with dementia.
-

2. **RECOMMENDATIONS**

- 2.1 **The Care Services Policy Development and Scrutiny Committee is asked to comment on the proposals in the report.**
- 2.2 **The Care Services Portfolio Holder is asked to recommend approval of the commissioning approach to the Council Executive**

The Council Executive is asked:

- 2.3 **To note that funding for these services comes from the Better Care Fund where funds had previously been set aside for dementia services and approved by the Executive and Health and Wellbeing Board, as well as the CCG Clinical Executive in 2014.**
- 2.4 **To approve:**
 - a) **The proposed service as set out in 3.5**
 - b) **The procurement approach as set out in 3.6 a)**
 - c) **The extension of contracts as set out in 3.6 b)**

Corporate Policy

1. Policy Status: Existing Policy
 2. BBB Priority: Supporting Independence:
-

Financial

1. Cost of proposal: Estimated Cost: £566k
 2. Ongoing costs: Recurring Cost £566k
 3. Budget head/performance centre: Care Services; NHS Support for Social Care; Carers Budget
 4. Total current budget for this head: £152k
 5. Source of funding: New investment - Better Care Fund
Continued projects - CS Portfolio
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Non-Statutory - Government Guidance
 2. Call-in: Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 4,200 people with dementia and their carers, projected to rise to 4,650 in 2020
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Introduction

- a) It is estimated that there are currently over 4,200 people with dementia in Bromley, with this number set to rise to 4,650 by 2020. Since 2014 NHS England has had a national project to increase diagnosis rates to 67%. Some 12 months ago only approximately 47% of the estimated number of people in Bromley with dementia had received a diagnosis. This has now increased to 58% and the trajectory continues upwards.
- b) The push to increase diagnosis is based upon the premise that having a diagnosis can help people to live well with dementia, assist their carers to know how to support and help appropriately and to enable people with dementia and their carers to make good plans. This can only happen however if there are good post-diagnosis support services that are universally accessible.
- c) A diagnosis of dementia does not in itself mean that a person meets the eligibility criteria applied by the Council for access to Council funded services (critical or substantial needs pre April 2015, Care Act national threshold post April 2015). This means that for many people there is a break in the dementia pathway, often accelerating the decline to high level needs and precipitating carer stress and breakdown.
- d) The context of post-diagnosis dementia support services in Bromley is that they have largely grown out of services that have been commissioned and designed to meet wider care needs as opposed to being dementia specific in their focus. Examples of this are day centres, respite services and care homes.
- e) Because of the needs and demands of people with dementia accessing those services, they have adapted to be able to meet those specific needs as best they can within the context of their overall service. However, there are very few services that are specifically commissioned to meet the specific needs of people with dementia and the needs of their primary carers. Where there are services in place they have been commissioned as very much stand-alone services, not part of a wider dementia-specific strategic commissioning plan and dementia pathway.

3.2 Contracted Activity

- a) Only a small number of dementia related services that have a primary focus on providing support in the community (excluding care home beds) are delivered under contract to the Council, these are detailed below.

Provider	Service	Service type	Annual value £000
Bromley and Lewisham Mind	Sitting service	Respite	161
BUPA Elmstead care home	Residential care	Respite	56
Bromley and Lewisham Mind/Carers Bromley	Coping with Caring	Support	66
Alzheimer's Society	Café	Support	6
Bromley and Lewisham Mind	Training and consultancy in ECH	Training	30
Oxleas NHS Foundation Trust	Support to care homes	Training	50
			369

- b) The vast majority of spend is on services for people who meet eligibility requirements based on need rather than in a direct response to a dementia diagnosis. These are funded either on a contracted basis for nursing home beds or on an individual basis through

personal budgets or spot purchase arrangements for care home beds (nursing and residential) and day opportunity services.

3.3 Other organisations

- a) Some organisations in Bromley, such as church groups, have set up services to provide support and services to people with dementia and their carers in their own community or in a small locality. Similarly some of the organisations, such as Alzheimer's Society and Age UK, have set up some very small services using funds from other sources such as charitable grants to try to meet some of the need that they perceive. Bromley Council does not fund any low level, dementia specific universal access information advice and guidance or community dementia support service.

3.4 Gaps in service provision

- a) Because of the current position people who have passed through the Memory Clinic and have received a diagnosis of dementia do not have a consistent and simple pathway to follow through which they can receive information, advice, guidance, practical support and assistance to have control over their own lives or through which family members can be informed and supported in undertaking their caring role.
- b) The current pathway is illustrated in appendix 1.
- c) The consequences of this are that:
- i) people with dementia are often isolated and unsupported
 - ii) carers of people with dementia are often isolated and unsupported.
- d) This results in:
- i) people's condition deteriorating more rapidly than it would otherwise
 - ii) increased pressure on front line social care services and primary health services through people seeking support, advice and information not otherwise available to them and which could be more appropriately provided by the community sector in a non-clinical setting
 - iii) people with dementia being unable to manage other health conditions, precipitating unnecessary presentation to primary health services
 - iv) carers not knowing how to best support the person with dementia to remain independent in the community
 - v) carers becoming unnecessarily stressed, precipitating carer breakdown
 - vi) carers making poor decisions about long-term care, such as placing relatives into care home care at too early a stage

3.5 Proposed service

- a) To address these shortfalls, funded through the money specifically set aside for dementia within the BCF and approved by the Executive and Health and Wellbeing Board, it is proposed to establish a dementia hub, a co-ordinated framework of community support services with a central point of access that can work directly with integrated care networks (ICNs). This will build upon, wherever possible, the dementia-specialist organisations that already have a strong presence in Bromley, specifically:
- Alzheimer's Society
 - Bromley and Lewisham Mind
 - Age UK Bromley and Greenwich
 - as well as the expertise of Carers Bromley in working with carers.

b) These universal post diagnosis services will include:

- Dementia Advice Service - to provide the first point of contact for those newly diagnosed with dementia. This will provide tailored, accessible, accurate information about dementia from diagnosis and, if needed, throughout a person’s life, as well as supporting people to make use of this information, including signposting and facilitating access to services and support to ensure people have the help and care they need.
- Expanded Coping With Caring project - to improve the knowledge, skills and understanding of those caring for a person with dementia, by providing effective support and up to date, relevant and evidence based information through a structured training programme for families and friends of people with dementia
- Dementia Information Coordination - to ensure a comprehensive source of high quality information about dementia and support services are available for people with dementia, carers and professionals in the local area and that this information is disseminated out to key community services.
- Support group provision - to enable engagement with more people at early point of diagnosis and retain a supportive relationship throughout their dementia journey. This will include Dementia Cafés that provide access to practical information, open discussion and social engagement for both people with dementia and carers and Activity Groups that provide the opportunity for people to participate in stimulating and meaningful activities that enhance well-being and confidence.

The proposed post diagnosis pathway is shown in appendix 2.

- c) The new post-diagnosis support service will also include the following currently contracted services:
- Support to care homes
 - Dementia skills training in Extra Care Homes
 - Coping with caring
- d) The new specification for post diagnosis dementia services will comprise several components with organisations invited to bid for all or any parts of the service. Joint bids from providers will be encouraged either through an alliance arrangement or having a lead provider.
- e) The specification for these services will be set in the context of delivering services within the new Integrated Care Networks. As a core provider within those networks the 3rd sector will need to organise themselves to be able to provide a coherent offer back to joint commissioners at the Local Authority and Bromley Clinical Commissioning Group.

3.6 Proposed procurement route

- a) The procurement route to establish the Post Diagnosis Support Service and associated services will be through competitive tender. The anticipated timescale for this is shown below.

	SEPTEMBER			OCTOBER			NOVEMBER			DECEMBER			JANUARY			FEBRUARY			MARCH		
Gateway report			23rd	14th																	
Tender process																					
Evaluation etc																					
Report for award																	10th				
Contract award																					
Implementation																					

- b) A number of existing contracts are due to expire before this date as detailed below and it is therefore recommended that, to ensure continuity of service, these all be extended until the 30th June 2016 in order to allow time for the procurement activity to be completed, with new contracts that cover any existing services to commence from 1st July 2016.

Provider	Service
Oxleas NHS Foundation Trust	Support to care homes
Bromley and Lewisham MIND	Dementia skills training for Extra Care Housing Staff
Bromley and Lewisham MIND	Coping with Caring project
Carers Bromley	Coping with Caring project
Alzheimer's Society	Dementia café

- c) Note, the contract with Bromley and Lewisham Mind for the sitting service and BUPA for residential respite referred to in 3.2a) are the subject of a separate report to Members on respite care. The dementia café currently run by the Alzheimer's Society will be part of the new allocation for community support services and included in the tender and will not continue beyond the proposed extension period.

4. POLICY IMPLICATIONS

- 4.1 The Better Care Fund, which was created largely through top slicing health budgets, has created a pooled budget for joint commissioning. The drivers for joint commissioning are to better integrate and co-ordinate services across the local health and care system. This is an early example of utilising the Better Care Fund to:

- Address gaps in required service delivery
- Jointly commission for key services that impact on health and care spend
- Shift the focus to early intervention and focus on maintaining peoples independence in the community

- 4.2 Addresses a shared priority as dementia was highlighted as an area to tackle within the Health and Wellbeing Strategy and Portfolio Holder Plan as well as in the CCGs 5 year strategy.

4.3 FINANCIAL IMPLICATIONS The cost estimates of the new programme are:

NEW SERVICES	Part year cost (July to Mar 16) £000	Full year cost £000	BCF Funded £000	Core funded £000
Dementia Advice Service	191	254	254	0
Coping With Caring	38	50	50	0
Information Worker	33	44	44	0
Community Support Groups	54	72	72	0
EXISTING SERVICES				
Support to care homes	38	50	50	0
Dementia skills training for Extra Care Housing Staff	23	30	30	0
Coping with Caring project	50	66	0	66
TOTAL	425	566	500	66

4.4 For 2016/17 funding is available from the BCF grant and will be taken from the allocated dementia pot. The BCF allocation has been confirmed previously at Executive and the most recent allocation of £500k to Bromley has been agreed at the Joint Integrated Commissioning Executive (JICE) on the 4th September 2015. The balance of £66k will continue to be met from the current budget for this service.

4.5 The estimated costs are based upon known and established models in operation elsewhere with costs scaled as appropriate to Bromley's requirements and the known costs of the currently contracted services.

4.6 In order to align service the services together some contracts will need to be extended to the June 30th 2016. The costs are as follows:

Provider	Service	Extension value	
		2015/16 £'000	2016/17 £'000
Oxleas NHS Foundation Trust	Support to care homes	25	13
Bromley and Lewisham MIND	Dementia skills training for Extra Care Housing Staff	15	8
Bromley and Lewisham MIND	Coping with Caring project	18	9
Carers Bromley	Coping with Caring project	15	7
Alzheimer's Society	Dementia café	3	1
		76	37

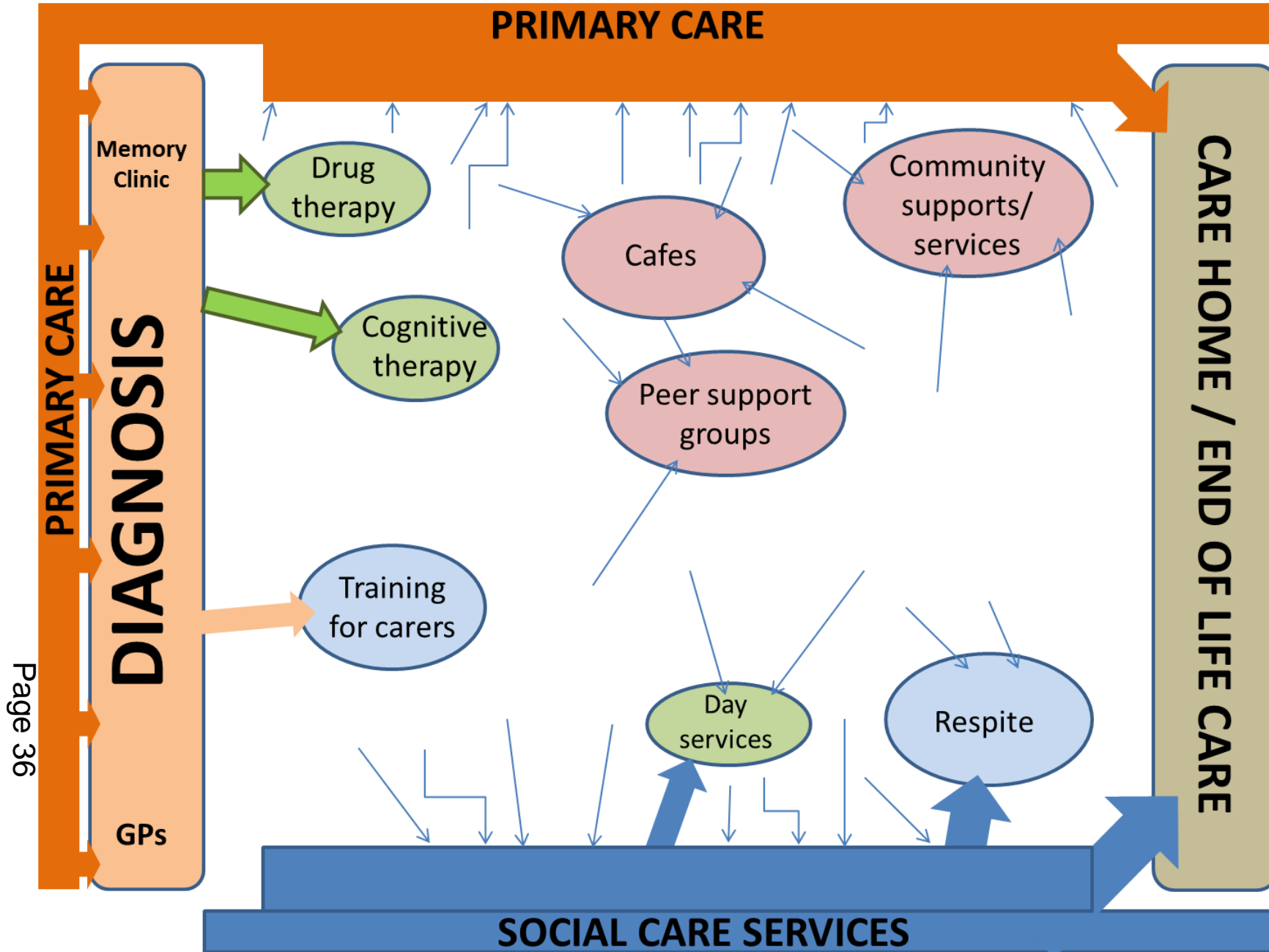
4.7 In 2015/16 funding is available in the budget for these extensions. In 2016/17 the extension will be funded in the main from BCF with the exception of the coping with caring service which will continue to be funded from core budgets.

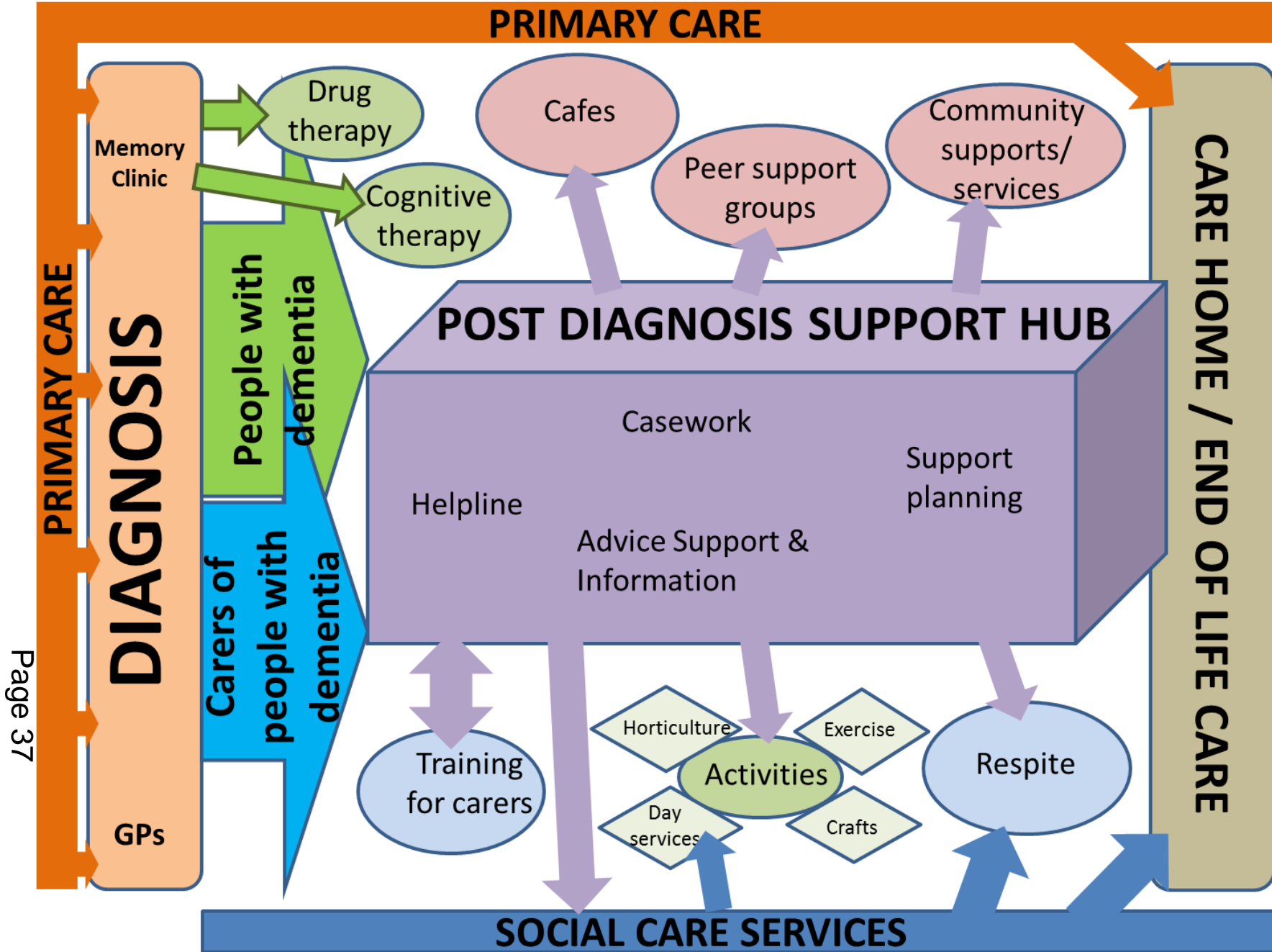
4.8 The overall aim is to generate greater efficiencies and outcomes through the strategic commissioning approach.

5. LEGAL IMPLICATIONS

It is a requirement of the Care Act that the Council supports people who are eligible for Council funded services and to identify carers with needs and to assess their needs for support.

Non-Applicable Sections:	Personnel implications
Background Documents: (Access via Contact Officer)	





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Agenda Item 7

Report No.
CS15922

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by Care Services PDS Committee on:

Date: 23rd September 2015

Decision Type: Non-Urgent Executive NonKey

Title: **GATEWAY REPORT: OLDER PERSONS' RESPITE CARE**

Contact Officer: Andy Crawford, Commissioning Manager
E-mail: Andy.Crawford@bromley.gov.uk

Chief Officer: Lorna Blackwood, Assistant Director Commissioning (ECHS)

Ward: (All Wards);

1. Reason for report

- 1.1 The Council contracts for and arranges respite care to enable carers to take a break from their caring role. This support makes an important contribution in preventing carer breakdown and supports them in maintaining their caring role.
- 1.2 The Council currently contracts for respite in care homes and for at home sitting services as well as making spot purchase arrangements. In order to ensure consistency in quality, accessibility and availability it is proposed to establish a framework of providers that can deliver respite care in the borough through an open tender. This will establish a pool of providers that are approved to provide these services and which can then either be approached directly to deliver specific services or from which a mini-tender can be conducted where larger tranches of service are required. The framework approach also allows flexibility in the allocation of the level of respite to an individual and in the allocation of funding.
- 1.3 The report proposes the extension of existing contracts for a short period in order to facilitate the establishment of the framework.

2. **RECOMMENDATIONS**

- 2.1 **The Care Services Policy Development and Scrutiny Committee is asked to comment on the proposals in the report.**
- 2.2 **The Care Services Portfolio Holder is asked to endorse and the Executive is asked to agree the commissioning intentions outlined in paragraph 3.4.1 and the extension of the following contracts at a cost of £14k in 2015/16 and £166k in 2016/17:**

- a) **Bromley and Lewisham Mind contract for respite at home sitting service from 1st April 2016 to 30th September 2016**
- b) **Carers Bromley contract for respite at home sitting service from 1st April 2016 to 30th September 2016**
- c) **The Heathers contract for residential respite from 1st July 2016 to 30th September 2016**
- d) **BUPA contract for residential respite from 3rd January 2016 to 30th September 2016**

Corporate Policy

1. Policy Status: Existing Policy
 2. BBB Priority: Supporting Independence
-

Financial

1. Cost of proposal: Estimated Cost: £14k in 2015/16 and £166k in 2016/17 for contract extensions; £524k FYE subject to future funding decisions
 2. Ongoing costs: Recurring Cost: £524k subject to future funding decisions
 3. Budget head/performance centre: Care Services; Carers Budget
 4. Total current budget for this head: £524k
 5. Source of funding: Care Services Portfolio
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Statutory: The Care Act 2014 requirements for carers are: "Where it appears to a local authority that a carer may have needs for support (whether currently or in the future), the authority must assess a) whether the carer does have needs for support and b) if the carer does, what those needs are.(or are likely to be in the future)."

"A local authority must have regard to – c) the importance of identifying carers in the authority's area with needs for support which are not being met (by the authority or otherwise)."
 2. Call-in: Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): There are approximately 30,000 people undertaking a caring role in Bromley
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1. Current position

- 3.1.1. There are approx. 30,000 people in Bromley who have identified themselves as providing care for a relative, friend or neighbour (Census 2011). Approximately 5,000 of these are known to Bromley Council and/or Carers Bromley, our strategic partner in providing support to carers.
- 3.1.2. The essential role that carers play in supporting people to remain independent is widely recognised and in 2011 research by Carers UK and acknowledged by the Government estimated the financial value of the contribution made by carers at £119 billion. With almost 7 million carers in the UK this equates to an average of £17,000 per carer.
- 3.1.3. The majority are able to care without serious difficulty but some people do need help and support in order to be able to continue in the caring role due to stress or their own ill health. In Bromley there are 7,900 carers aged over 65, with 3,200 of those aged over 75 and it is particularly within this group that ill health or the strain of caring can take its toll and lead to carer breakdown.
- 3.1.4. Where carer breakdown does occur not only can it be very distressing for all involved it can place significant pressure and costs on acute care (A&E), primary health care (GPs) and Social Care services.

3.2. Support for carers

- 3.2.1. Bromley Council's and Bromley Clinical Commissioning Group's strategic approach to support for carers is currently in development as a joint project, the content and detail of which will be the subject of a separate report to Members in November 2015.
- 3.2.2. An essential aspect of support for carers in enabling them to continue in their caring role is access to breaks and respite care. Respite care comes in various forms but essentially breaks down into care provided in care homes (residential) and care provided at home (sitting services).
- 3.2.3. The types of respite that carers choose to use and the way in which they use it will depend very much on the individual, their circumstances and the circumstances of the person they are caring for. Some people may only require an occasional break such as a holiday to recharge their batteries, some might need a more regular short break to maintain outside interests and networks whilst others could prefer an occasional short break when circumstances dictate.
- 3.2.4. Flexibility is the key and it is not possible to commission or arrange any one type of respite service that can meet all needs. The provision of a Personal Budget which can be taken as a direct payment can provide the most flexible option for many carers, enabling the individuals to arrange the breaks according to their own needs and preferences.
- 3.2.5. However, the availability of some respite services that are commissioned under Council contract ensures that a basic level of respite care is available within the borough and is accessible to people who are not well placed to make their own arrangements either because of their own circumstances or because of the nature of the respite required.
- 3.2.6. Bromley Council currently has the following contracts for the provision of respite care:
 - Bromley and Lewisham Mind – Respite at home sitting service for dementia
 - Carers Bromley – Respite at home sitting service
 - The Heathers – Residential respite for physically frail
 - BUPA (Elmstead) – Residential respite for both physically frail and dementia
- 3.2.7. Additional Council funded care home respite care is spot purchased at homes both within the borough and out of borough and respite care is an important element of day opportunity services. Respite care is not a primary service for all day centre users but it is

a major aspect for an estimated 75% of all users in mainstream centres and almost all carers of users in dementia specialist centres.

3.3. Details of current spend and contracts are shown in the table below:

Provider	Service	Annual value £000	Contract end date	Option to extend
Bromley and Lewisham MIND	Respite at home sitting service	161	31/03/2016	No
Carers Bromley	Respite at home sitting service	100	01/03/2016	No
The Heathers	Residential respite for physically frail	30	30/06/2016	No
BUPA (Elmstead)	Residential respite for physically frail and dementia	57	02/01/2016	Yes (one year)
Spot purchase	Nursing home care	49	N/A	N/A
Spot purchase	Residential home care	127	N/A	N/A
		524		

3.4. Commissioning intentions

3.4.1. It is proposed that the Council tenders for a framework for the provision of respite and carers' breaks services in order to establish a pool of providers that are approved to provide these services and which can then either be approached directly to deliver specific services or from which a mini-tender can be conducted where larger tranches of service are required. All spend will be within the available budget for 2016/17 onwards. The framework approach allows flexibility in the allocation of the level of respite to an individual and in the allocation of funding.

3.4.2. In order to allow for alignment of new contracts and to ensure continuity of service and transition to new arrangements, it is proposed that current contracts for respite at home and residential respite be extended to September 30th 2016. This will also allow for

clarification of criteria for accessing services or levels of respite provided to be clarified and for the budget position to be established.

3. POLICY IMPLICATIONS

The development of a new carers strategy is currently being undertaken and this will also serve to define future commissioning intentions. The establishment of a framework for respite care will enable the Council to make arrangements for carer breaks without locking the Council in to contracts that need subsequent amendment to respond to future needs and funding levels.

4. FINANCIAL IMPLICATIONS

4.1 Respite care purchased through the framework will be within the agreed budget from 2016/17 onwards.

4.2 The cost of extending the current contracts to 30th September 2016 is:

Provider	Service	Cost in 2015/16 £000	Cost in 2016/17 £000
Bromley and Lewisham MIND	Respite at home sitting service	N/A	80
Carers Bromley	Respite at home sitting service	N/A	50
The Heathers	Residential respite for physically frail	N/A	7
BUPA (Elmstead)	Residential respite for physically frail and dementia	14	29
		£14	£166

Funding is available from existing budgets to fund this.

4.3 The overall aim is to align services to generate greater efficiencies and outcomes through a strategic commissioning approach

5. LEGAL IMPLICATIONS

The Care Act 2014 states that “Where it appears to a local authority that a carer may have needs for support (whether currently or in the future), the authority must assess a) whether the carer does have needs for support and b) if the carer does, what those needs are.(or are likely to be in the future).”

“A local authority must have regard to – c) the importance of identifying carers in the authority’s area with needs for support which are not being met (by the authority or otherwise).”

There is a need for contract extensions to comply with both the Public Contract regulations 2015. The contract values are below the formal threshold for tendering under the 2015 regulations and the services are subject to the “light touch” regime. Taking these factors together with the fact that a prominent purpose behind the extensions is to align contracts for

competitive procurement then it is considered on balance that the proposals are compliant. The proposals are also compliant with the Councils Contract Rules.

Non-Applicable Sections:	Personnel implications
Background Documents: (Access via Contact Officer)	

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Report No.
CS15923

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by Care Services PDS Committee on:

Date: 23rd September 2015

Decision Type: Non-Urgent Executive Non-Key

Title: **PROCUREMENT STRATEGY FOR PROVISION OF CARE SERVICES IN EXTRA CARE HOUSING**

Contact Officer: Wendy Norman, Strategic Manager, Procurement and Contract Compliance
Tel: 020 8313 4212 E-mail: wendy.norman@bromley.gov.uk

Chief Officer: Lorna Blackwood, Assistant Director of Commissioning, Education, Care and Health
Tel: 020 313 4799 E-mail: lorna.blackwood@bromley.gov.uk

Ward: Boroughwide

1. Reason for report

- 1.1 This report sets out options and recommendations for the care and support services in the Extra Care Housing schemes in the borough when the current contracts expire.
- 1.2 The report also recommends that the extra care housing services currently provided by the in house Direct Care Service be included in the tender.

2. **RECOMMENDATIONS**

Members of the Policy Development and Scrutiny committee are asked to comment on the report.

The Executive is asked to agree:

- 2.1 **that the contracts for care and support in Bromley's six extra care housing schemes be tendered;**
- 2.2 **that the contract length will be for a period of five years with the potential to extend for a further two years plus a further two;**

- 2.3 that in order to facilitate the tendering of care and support in one contract, the contract with Hanover Housing Association to deliver housing related support in Crown Meadow Court be extended for one year from 25th March 2016 until 24th March 2017; and**
- 2.4 that in order to facilitate the bundling of a number of separate contracts, the contract with Mears Care to deliver care in Crown Meadow Court be extended for a maximum period of one year from 25th March 2016 until 24th March 2017.**

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: Estimated cost £2.4m
 2. Ongoing costs: Recurring cost. £2.4m
 3. Budget head/performance centre: Extra care housing 829**** Older people 824500/501/502
 4. Total current budget for this head: £ £2.4m
 5. Source of funding: Revenue Support Grant
-

Staff

1. Number of staff (current and additional): 47.54 FTE in in house extra care schemes
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Non-statutory - Government guidance.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 271 at any one time
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

Background

- 3.1 Bromley has the largest population of over 65s in London, exceeding 56,000 in 2014 – this represents 17.5% of the population and an increase of over 4000 since 2011. The number of people 80+ has increased by around 1,000 since 2011. This latter cohort are the most likely to have multiple long term health conditions and complex care needs, requiring intensive packages of support from social care. It is also estimated that there are currently over 4,200 people with dementia in Bromley, with this number set to rise to 4,650 by 2020.
- 3.2 The Council’s strategy for long term care for older people is to support independence by moving away from a reliance on residential care towards a new mix of services, marked by a greater emphasis on supporting independent living at home. Since 2004 reports to Members have highlighted the potential of extra care housing for older people as an alternative to residential care. Promoting choice and independence are two of the central concepts of current policy and legislation on health, housing and social care. The Department of Health champions extra care housing on the basis that it has potential to offer choice and independence to very frail or disabled older people whose care needs might have traditionally been met by residential care.
- 3.3 The Council’s strategy assumed that by 2013/14 there would be 140 new units of extra care, with a consequent reduction in the number of people in residential care to 218. Potential savings were calculated on the basis of the reduced costs to the Council of supporting someone with high level care needs in extra care rather than residential care. In 2008 this was estimated to be between £170 and £220 per week per person. Assuming all of those provided with extra care housing would otherwise have required residential care the annual savings to care costs from these 140 units were estimated to be as much as £1.3m by 2012. Even allowing for the slightly lower number of new units (115 rather than 140), as the results of the tenders for care and support services in the new schemes produced extremely competitive rates, the savings increased to £1.5m from 2013/14.
- 3.4 Officers have presented regular reports to Members setting out the progress with implementing the strategy. The target number of units has been adjusted over time to reflect demand for this type of housing. Three new extra care schemes were developed in partnership with Hanover Housing Association providing 170 new places and 3 older schemes were closed, the latest being Lubbock House which closed in Summer 2015. The three new schemes are owned by Hanover Housing Association who are the landlords; Apsley Court is owned by A2 Housing, and Durham House and Norton court are owned by Affinity Sutton who are the respective landlords in these schemes.
- 3.5 The table below sets out the list of current schemes, how care and support is provided and shows contract expiry dates where applicable.

Scheme	Number of units	Care provider	Care Contract Expires	Housing Related Support Provider	Housing Related Support Contract Expires
Apsley Court St Mary Cray	26	LBB Direct Care Service	n/a	LBB Direct Care Service	n/a

Durham House Shortlands	30	LBB Direct Care Service	n/a	LBB Direct Care Service	n/a
Norton Court Beckenham	45	LBB Direct Care Service	n/a	LBB Direct Care Service	n/a
Crown Meadow Court Bromley Common	60	Mears Care	24.3.2016	Hanover Housing Association	24.3.2016
Regency Court Bromley Common	60	Sanctuary Care	20.8.2016	Hanover Housing Association	30.7.2016
Sutherland House Penge	50	Sanctuary Care	20.8.2016	Hanover Housing Association	4.11.2016
Total	271				

Financial position

- 3.6** Members will be aware from previous reports that there have been significant budget pressures in extra care housing partially arising from the high void levels. The recent closure of Lubbock House, which reduced the available units by 30, was designed to improve the void position. However even allowing for all of the existing voids being filled during 2015 there remains a significant ongoing pressure arising from the increasing complexity of the needs of residents supported in extra care resulting in the average support hours in the external schemes averaging 15/16 hours per week compared to the anticipated 12 hours per week. This position is also reflected in the in house schemes.

	Budget 2015/16 £000s	Projected outturn £000s	Variance £000s
In house schemes	1,063	1,313	250
External schemes	1,326	1,406	80

- 3.7** The strategy assumed that the provision of extra care would reduce the number of people in residential care. There were 415 people in residential care at the end of March 2008. By the end of March 2015 this had reduced to 304 (compared to 218 assumed in the original projections). As at end of August 2015 there are still 293 people in residential care. This suggests that admissions to extra care are not only people who would otherwise have been considered for residential care, but that in effect extra care is absorbing some of the increase in demand for intensive care and support arising from the needs of the ageing population. The length of stay in care homes is also increasing from an average of approximately two

years to an average of 2.4 years. This means that at any given time there are more people in residential care than previously projected.

- 3.8 Taken together, the spend for residential care (which should reduce as people move into extra care instead) and the spend for extra care should be containable within the total budgets for these services even allowing for the increased number of care hours in extra care. This is the position currently. It is likely that tendering will result in service and financial efficiencies which will help to reduce the budget pressures. Should Members agree to the proposals in this report there will be further discussions with Finance and Care Services to identify the action which needs to be taken to ensure that the future cost of the service continues to be contained within the overall available budget. If this cannot be established a further report on the financial position will be brought to Members before any action is taken on the tender.

Tender proposal

- 3.9 The initial contracts with Mears Care, Sanctuary Care and Hanover Housing expire in 2016 and officers have met with the housing and care providers to review the service specifications and performance to date. Although there is provision to extend the contracts, the lessons learned during the initial contract term suggests there would be benefits in reconfiguring the model of care and support which could be achieved through retendering at this point. The model is explained in more detail below.
- 3.10 A report to Executive on 11th February 2015 agreed the market testing of the remaining Direct Care Services including extra care housing and in line with that decision it is proposed that the Council retenders the care and support in Apsley Court, Durham House and Norton Court along with the care and support services in Crown Meadow, Regency and Sutherland Courts in order to rationalise provision across all of the schemes.

Model of care and form of tender

- 3.11 The LBB Direct Care Service delivers a service model whereby all care, housing related support and activities are delivered by the Care Team. In the schemes where the care is provided by an external provider the landlord also has a contract for the delivery of housing related support and activities. The contract arrangements for external schemes require the care provider and the support provider to liaise closely in order that the residents are facilitated to access the mainstream activities provided within the schemes. The separation of contracts and the division of effort results in an additional layer of organisational complexity in the services without adding any service enhancement and therefore it is recommended that in future the provision of the support / activities function will be added to the care specification in all the schemes. There will still be an option for the care provider to sub-contract the provision of housing related support to a third party should they consider that this would provide a more effective service.
- 3.12 To manage the risk of over exposure to one provider it is intended to seek to contract with a minimum of two providers and a maximum of three providers across the six schemes. This should deliver some cost efficiencies on management overheads and potentially facilitate some movement of staff between schemes where appropriate. There is also scope for organising joint activities between schemes and co-ordinated activity management.
- 3.13 There are advantages to be gained through the sharing of experience, expertise and quality by partnering in house schemes with the externally managed schemes. It is therefore proposed that the tender will require providers to bid for a mix of in house and externally managed schemes.

- 3.14 There is a thriving market for the provision of care and support in extra care housing schemes. There are at least 10 major older peoples' housing providers active in the market nationally including for example Hanover Housing, Housing 21, Sanctuary Care, Mears Care, Anchor Housing, and MHA. There are also a significant number of more local domiciliary and extra care providers active in the market. Currently there are around 160 extra care schemes operating across London with a variety of care and support providers. The procurement exercise will include an open day for providers at which information about all the schemes will be made available. There will also be an opportunity for service users to participate in this process.
- 3.15 The majority of extra care schemes are set up by local authorities using a form of "core and flexible" hours model which is the Council's current approach in the external schemes. This provides for a basic number of core hours provided to each resident (currently 7 or 10 hours in the Bromley schemes) with residents able to receive their additional hours either from the contracted provider or in the form of a direct payment to secure their own provision. The ability for service users to receive their support in the form of a direct payment is a requirement of the Care Act 2014 and must be provided for in extra care. London Borough of Enfield has recently tendered their extra care provision and their "core and flexi" model is considered by other local authorities to be an improvement on block contracting. However it is not significantly different from Bromley's current model and it assumes a much more diverse community of residents (i.e. including people with very low care needs) than in Bromley. It is recognised that the current Bromley model requires some improvement to ensure that costs are contained and providers will be asked to demonstrate how they will meet the desired outcomes for service users (i.e. maximising independence and minimising dependence on care and support) as well as achieving efficiencies through more effective management of staff.
- 3.16 As one procurement exercise will be conducted including all the schemes, this could result in changes of care provider throughout all of the schemes which would require careful management. It is therefore proposed that the start date of new contracts be staggered across the schemes in order to ensure there is no disruption in service provision. A proposed timetable is set out in para 3.21.

Engagement

- 3.17 Residents in the in house extra care housing schemes were advised in late 2013 that the care and support in these schemes was to be market tested and were subsequently advised that the original exercise had been unsuccessful. Current residents have been advised that this report is being considered by the Executive and will be kept informed fully throughout the process. As with the original tender for the external schemes, there will be an opportunity for residents to be represented in the evaluation process.
- 3.18 Arrangements for staff engagement are detailed in section 6 below.

Enabling contracts

- 3.19 Hanover Housing Association currently provides housing related support in the three new schemes and has indicated willingness to extend their current contracts for the delivery of housing related support in order to facilitate the tendering of an integrated service. There is provision within the existing contracts for this extension. Officers are recommending that this option is exercised in order to facilitate continuity of service during the procurement exercise. This would require an extension of the contract to deliver housing related support in Crown Meadow Court for one year from 25th March 2016 until 24th March 2017.

- 3.20 As noted above, the current care contracts also have scope for extension. In order to manage the procurement exercise, it is proposed that the contract with Mears Care for care services in Crown Meadow Court be extended for a maximum period of one year from 25th March 2016 until 24th March 2017.
- 3.21 The contract with Hanover Housing Association for housing related support in Sutherland Court extends beyond the end of the care contract with Sanctuary Care. It is recommended that Officers explore the option of an early termination with Hanover in order that a new service combining care and housing related support could start on 21st August 2016.

Procurement and Implementation Timetable

- 3.22 The proposed timetable is as follows:

2015	
August	Meetings with existing providers
September	Gateway report to Executive
October	Provider Open Day
November	Issue Specification to market
2016	
May	Contract Award, subject to results of tendering
June - July	Due diligence
August	Contract start for Regency Court and Sutherland Court subject to results of tendering
November onwards	Contract start for Apsley Court, Durham House and Norton Court subject to results of tendering
2017	
March 2017	Contract start for Crown Meadow Court subject to results of tendering subject to results of tendering

- 3.23 Officers recommend that the new contracts are awarded for five years with optional extensions of two years and a further two years. This approach would make the contracts substantial enough to be interesting to Care Providers and would also keep the costs of retendering to a minimum.

4 POLICY IMPLICATIONS

- 4.1 The proposals within this report are consistent with current policy. The provision of extra care housing contributes to the Council's aim of helping people to remain independent.

5 FINANCIAL IMPLICATIONS

- 5.1 The financial implications are set out in paras 3.6 – 3.8 above. The budgets for domiciliary care, residential, nursing and extra care are looked at as one overall budget available. In the last two years there have been voids in extra care housing due to the complex needs of the service users but the closure of Lubbock House has addressed the capacity issue. For the individual service users as needs vary it is difficult to project forward what will be required within each individual budget group. Significant budget savings have been achieved over the years by diverting service users from residential and nursing care into extra care (£1.5m) or help to support them to remain in their own home with domiciliary care packages/ direct payments.

- 5.2 The annual contract value for the extension of the contract with Mears is £444,653.
- 5.3 The extension of contract with Hanover will cost £43,244.
- 5.4 The current budgets for extra care housing are as follows:

	Budget 2015/16 £000s
In house schemes	1,063
External schemes	1,326

6 PERSONNEL IMPLICATIONS

- 6.1 The personnel implications relate solely to the staff in the in house schemes. As indicated in previous reports informal consultation with staff and their representatives around market testing these services has been ongoing since 2011 following the publication of the Departmental Business Plan which outlined the services identified for market testing.
- 6.2. Following Executive's approval to commence the market testing staff and representatives including unions were invited to attend briefing sessions with the Assistant Director for Care Services in November 2013. Concerns from staff have remained around how the Council would assure the quality of any contracted provision. Staff were assured that the evaluation process would take into account both cost and quality.
- 6.3. Staff and their representatives have been engaged throughout the process of earlier market testing, with opportunities to feed in the process as appropriate. Staff and their representatives were advised in March 2015 that a decision had been made, based on staff and provider feedback, to re-tender these services as separate services to ensure best value. Engagement with staff will continue.
- 6.4. There are 47.54 FTE and an additional 25 casual staff working across the services in scope of this market testing. Any staffing implications arising from any recommendations or any potential award will need to be carefully planned for and managed in accordance with the Council policies and procedures and with due regard for the existing framework of employment law. In the event that a decision is made to recommence the tendering process there will be further consideration as to whether or not the Transfer of Undertakings (protection of Employment) Regulations 2006 (TUPE) as amended (2014) would apply and the consequential legal and financial implications arising from this. If an award was made, some or all of the staff maybe subject to TUPE.
- 6.5. If Members agree to commence the re-tendering process, staff and their representatives, including trade unions, will be updated as appropriate.

7 LEGAL IMPLICATIONS

- 7.1 As Social Care Services, any tender would subject to the application of the "Light touch" regime under the Public Contracts Regulations 2015.
- 7.2 It is not anticipated that any award of contract will result in any changes to services, any changes to delivery models would be scrutinised. Providers will be made aware of the duties under the Equality Act 2010 and made aware that the Council would seek their corporation in

conducting a full equalities impact assessment with service users and other stakeholders as part of the due diligence process prior to or upon award of any contract if appropriate.

<p>Non-Applicable Sections:</p>	
<p>Background Documents: (Access via Contact Officer)</p>	<p>CS13045 October 2013 Extra care housing strategy for older people – update</p> <p>CS1424 Executive 11th February 2015 Long term care for older people - extra care housing supply and demand</p> <p>CS14143 Executive - May 2015 – Long Term Care for Older People – Extra Care Housing Supply and Demand.</p> <p>CS14122 – Executive 11th February 2015 – Direct Care Update</p>

Report No.
CS15921

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by Care Services PDS Committee on:

Date: 23rd September 2015

Decision Type: Non-Urgent Executive Non-Key

Title: DEPRIVATION OF LIBERTY SAFEGUARDS UPDATE

Contact Officer: Claire Lynn, Strategic Commissioner Mental Health and Substance Misuse, Commissioning Division,
Tel: 020 8313 4034 E-mail: claire.lynn@bromley.gov.uk

Chief Officer: Lorna Blackwood, Assistant Director, Education, Care and Health Services

Ward: Boroughwide

1. Reason for report

This report updates Members on the service activity following the Supreme Court judgement in March 2014 relating to Deprivation of Liberty Safeguards and to deprivation of liberty of individuals. The report updates the actions to address the implications of the judgement.

The report requests that the Executive agree the drawdown of the further agreed funding for continued staffing as highlighted in the report to Executive in February 2015.

2. **RECOMMENDATION(S)**

2.1 **Members of Care Services PDS are asked to:**

i) **Note and comment on the report including the additional grant funding relating to 2015/16**

ii) **Agree proposals set out in paragraph 5 and refer to the Executive for approval.**

2.2 **The Executive are asked to:-**

i) **Note that additional grant funding of £126,982 has been allocated by Government and approve that it is released from the central contingency to the Care Services budget to fund the additional costs of £130k as set out in this report.**

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence. Safer Bromley
-

Financial

1. Cost of proposal: Estimated cost £755k full year
 2. Ongoing costs: Recurring cost. £755k
 3. Budget head/performance centre: Mental Capacity Act
 4. Total current budget for this head: £441k
 5. Source of funding: Core funding
-

Staff

1. Number of staff (current and additional): 5.5wte tempory staff, 1.5 wte established post
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement. Mental Capacity Act 2005
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 900-1000 people
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Members will recall that the Deprivation of Liberty Safeguards, introduced as an amendment to the Mental Capacity Act in April 2009, aimed to prevent decision making which deprived people of their liberty unless properly authorised. The safeguards cover people, regardless of the funding source, in registered care/nursing homes and in hospitals, who have a mental disorder, and who lack the capacity to consent to the care provided, where that care may include the need to deprive people of their liberty. It does not apply to people detained under the Mental Health Act 1983. Assessments are carried out by a doctor, who is qualified under section 12 of the Mental Health Act 2007, and a Best Interest Assessor these establish the following:

- Establishing the individual is over 18 years
- Individual lacks capacity to consent to being in the care home or hospital in order to receive the care or treatment that is necessary to prevent harm to them
- Individual has a mental disorder
- Whether this is the least restrictive placement and whether it is in the individual's best interest to be deprived of their liberty
- That the individual is not liable for detention or treatment under the Mental Health Act
- Whether there is an advance decision or any other legal notice in place

3.2 On completion of these assessments and the paperwork the Assistant Director for Care Services authorises the DOLS. This has to be reviewed a minimum of annually although in some cases it will be more regularly than that, which requires the above process to be repeated.

3.3 Hospitals and care homes are the 'managing authorities', under the Act responsible for identifying when a deprivation of liberty is occurring within their own service provision and for making referrals to the designated 'supervisory body'. The supervisory body is the Local Authority for both health and social care provision.

3.4 On 19 March 2014, the Supreme Court handed down its judgment in the case of "P v Cheshire West and Chester Council and another" and "P and Q v Surrey County Council". The Court held that the individuals, all young people with learning difficulties, had been deprived of their liberty as they were under continuous supervision and control and were unable to leave their placements. This was the case even though the individuals enjoyed lives outside their placements and seemed to be content with their situations. The Court held that the individuals were entitled to the protection afforded to them by the Mental Capacity Act 2005, which requires, among other things, a periodic review to ensure the deprivation of liberty remains in the individual's best interests.

3.5 The Supreme Court confirmed that to determine whether a person is deprived of their liberty there are two key questions to ask, which they describe as the 'acid test':

- Is the person subject to continuous supervision and control?

AND

- Is the person free to leave? (The person may not be saying this or acting on it but the issue is about how staff would react if the person did try to leave).

This now means that if a person is subject both to continuous supervision and control and not free to leave they are deprived of their liberty. Unfortunately the Court did not define these elements.

- 3.6 The judgment is significant in determining whether arrangements made for the care and/or treatment of an individual lacking capacity to consent to those arrangements amount to a deprivation of liberty. The Court emphasised that even though an individual may never have tried to leave, the fact that there are measures in place to prevent them from leaving amount to a deprivation. A deprivation of liberty for such a person must be authorised in accordance with one of the following legal regimes: a deprivation of liberty authorisation or Court of Protection order under the Deprivation of Liberty Safeguards in the Mental Capacity Act 2005, or (if applicable) under the Mental Health Act 1983.
- 3.7 The other consequence of the Supreme Court judgement is that a deprivation of liberty can take place because of a care regime in supported living, day care or the individual's own home and although currently the Mental Capacity Act does not cover a Deprivation of Liberty Safeguard process being followed these situations should be referred to the Court of Protection. The judgement also lowered the age of consideration for a deprivation of liberty to 16 years. This is in terms of an individual's capacity and takes no account of whether there is parental consent for any care regime

4. UPDATE ON THE ACTIONS FOLLOWING THE REPORT TO EXECUTIVE IN NOVEMBER 2014

4.1 Following the Supreme Court judgement a report was agreed at Executive to drawdown monies from the Local Reform and Community Voices grant in order to meet the initial work that needed to be undertaken to map the implications of this judgement. This included ensuring that staff are fully briefed, that all applications are responded to within the timeframes and that work was undertaken to identify the numbers of people who may be subject to deprivation of liberty. The outcome of this was reported to Executive in February 2015, when it was agreed that further monies would be identified to establish a small team, pay for Section 12 doctor's assessments and Independent Best Interest assessors as required. The monies also included a budget for legal costs as required.

4.2 The activity to date in terms of assessments is detailed in the table below:

	April 2014-April 2015	April 2015 – July 2015
Number of referrals	388	258
Number Granted	351	238
Number not granted	31	9
Number withdrawn	6	11

- 4.3 There are also 70 possible Court referrals awaiting further details and 66 referrals awaiting advice from Queens Counsel.
- 4.4 The current volume of work has been delivered by a small team of a senior practitioner and one best interest assessors seconded from Care Services with the use of additional assessors based in care services, a co-ordinator and other staff time in processing the authorisations. Temporary staff (four) are being used to assess people within Bromley and London. Independent assessors have been used for people placed outside of London and the Home

Counties. A permanent central DOLS team will be established as agreed with adverts placed internally in September.

- 4.5 A contract framework, as agreed has been established for the use of S12 doctors and Independent BIA's, ensuring that professionals used comply with the requirements of the Act and of the Council.
- 4.6 As a consequence of the Supreme Court Judgement the death of any individual subject to DOLS has to be reported to the Coroner for investigation. This has required liaison with Coroner's Office to ensure that the process for this is in place and that they have all the required documentation.
- 4.7 Training and awareness still continues with all the teams and services. Letters has been sent to all care providers to raise awareness of the Supreme Court judgment, as we are obliged to do by the Department of Health, and how to make a referral, with regular updates being given. Updated training is being provided both for providers and staff to ensure the awareness of the need to reduce restraint and restrictions and promote liberty in care plans. The new forms from the Department of Health have been distributed and are being used (from April 2015) with guidance circulated.
- 4.8 There are further cases which may need to be brought before the Court for which the preparatory work is being carried out. The Court recently changed its requirements which mean that individuals have to be represented with the costs being borne by the Council, this may increase the legal costs to the authority. To date no cases have been taken to Court and therefore there has (to date) been no spend on this additional monies.
- 4.9 A new Independent Mental Capacity Advocacy Service was established, with the responsibility to provide paid Relevant Persons Representative's (specialist advocate for people subject to a DOLS) locally if required, as agreed in a report to this Committee in November 2014.

5 FINANCIAL IMPLICATIONS

- 5.1 A sum of £127k is available in the 2015/16 budget for Deprivation of Liberty Safeguards. In addition to this a sum of £628k was approved by the Executive in February 2015 as part of the 2015/16 budget process to meet the additional cost pressures arising from the legislation.
- 5.2 In March 2015 the government allocated one off grant of £127k to help meet some of the new cost pressures arising from the legislation. This grant is for 2015/16 only and therefore this needs to be used before any further drawdown from the central contingency.
- 5.3 This report is requesting drawdown of a further £130k to continue to fund additional staff and the continuation of doctors' assessments as set out in this report and the previous report to Executive in February 2015. Without this funding the Council would not be able to meet its statutory obligations. The additional grant allocated in March 2015 by government can be used to offset this expenditure.
- 5.4 In total there is £755k of expenditure available in the budget for DOLS broken down as follows:-

DOLS

£000

2015/16 ORIGINAL BUDGET	127
GROWTH - ALLOCATED TO CARE SERVICES BUDGETS	314
GROWTH - ALLOCATED TO CENTRAL CONTINGENCY	314
	755

Of the total budget of £755k, £441k has been allocated to Care Services. A further £130k is being requested for cost pressures which will be offset by the additional grant leaving 314k in the central contingency should it be required.

6 LEGAL IMPLICATIONS

- 6.1 The statutory regime for the implementation and administration of what is deemed to constitute the deprivation of liberty of an individual is prescribed within sections 4-6 of the Mental Capacity Act 2005 and statutory guidance. Such must also be taken together with any decision and interpretation of the requirements placed upon a local authority or hospital by the recent decision of the Supreme Court in P-v-Cheshire.
- 6.2 The local authority is obliged to put in place and ensure that its DoLS regime is compliant with all legal requirements and have due regard to relevant guidance and case law.

Non-Applicable Sections:	Policy Implications Personnel implications
Background Documents: (Access via Contact Officer)	http://cds.bromley.gov.uk/documents/g4918/Public%20reports%20pack%20Tuesday%20Jun-2014%2019.00%20Executive.pdf?T=10

Report No.
ED15100

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive

For Pre-Decision Scrutiny by the Education PDS Committee on:

Date: 8th July 2015

Decision Type: Non-Urgent Executive Non-Key

Title: **DRAWDOWN OF GOVERNMENT GRANT FUNDING TO SUPPORT THE LOCAL AUTHORITY IN IT'S ROLE AS A LONDON REGIONAL LEAD FOR THE IMPLEMENTATION OF THE SPECIAL EDUCATIONAL NEEDS & DISABILITY (SEND) REFORMS FROM APRIL 2015/16**

Contact Officer: Mary Cava, SEND Implementation Lead
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Helen Norris, Head of Specialist Support & Disability Service
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Chief Officer: Jane Bailey, Assistant Director: Education

Ward: Borough-wide

1. Reason for Report

- 1.1 The Children & Families Act received Royal Assent in April 2014 and became law on 1st September 2014.
- 1.2 The London Borough of Bromley has been a Pathfinder since 2011 and Pathfinder Champion for London, in partnership with the London Boroughs of Bexley and Enfield. Following a joint application the London Borough of Bromley in partnership with the London Borough of Enfield has been named as the SEN & Disability (SEND) Regional Leads for London to build on the joint borough Pathfinder Champion work. This will facilitate a peer SEND learning approach, sharing best practice to support statutory compliance and the London-wide implementation of the Special Educational Needs & Disability Reforms 2015/16.
- 1.3 This report seeks approval of the release of grant funds, held in the 2015/16 central contingency, of £61,924 funding which has been allocated by the DfE for the London Regional SEND programme. The funding is allocated to Bromley to work with partners in Enfield to coordinate the programme across 33 London boroughs. This has been made up of £37,500 base funding with a top-up amount based on the number of authorities in the London region of £24,424, making £61,924. In addition £45,941 has been allocated for a new grant: 'Preparation for Employment', of which £15k is for Regional Leads to coordinate work opportunities across the London Region for this cohort of young people with SEN & Disabilities.

2. RECOMMENDATIONS

- 2.1 The Education PDS Committee is asked to consider the contents of this report and recommend approval from the Council Executive to drawdown £61,924 SEND Regional Lead for London grant funding from the central contingency.**
- 2.2 The Executive is asked to:**
- i) Consider the contents of the report; and,**
 - ii) Approve the release of £61,924 of non-ring fenced funding for the continued role of the London Borough of Bromley as SEN & Disability (SEND) Regional Lead for London in partnership with London Borough of Enfield 15/16.**

Corporate Policy

1. Policy Status: New Policy
 2. BBB Priority: Children and Young People
-

Financial

1. Cost of proposal: £76,924
 2. Ongoing costs: Not Applicable: One off payment until March 2016
 3. Budget head/performance centre: SEND Regional Lead for London grant (DfE) 136355
 4. Total current budget for this head: £0
 5. Source of funding: DfE Grants
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Children and Families Act 2014
 2. Call-in: Applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Children and young people with SEN and disabilities and their families across 33 London boroughs including 2,000 children and young people together with their parents/carers in Bromley.
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
 2. Summary of Ward Councillors comments: N/A
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3. COMMENTARY

- 3.1 The London Borough of Bromley has been working as an SEND Pathfinder since September 2011 testing the SEN & Disability Green Paper proposals described as the most radical reform in this field in more than 30 years. Bromley, working with Bexley Pathfinder, was one of 20 Pathfinders agreed across England with 31 Local Authorities and their health partners.
- 3.2 As a consequence of the successful work carried out during the first phase of the Pathfinder, Bromley achieved Joint Pathfinder Champion status (firstly with Bexley and then Enfield) for two years from April 2013, to support non-Pathfinder authorities across London in their preparation for the implementation of the new statutory SEN & Disability Reforms. In addition the work was to support the Department for Education (DfE) / Department of Health (DoH) and national delivery partners in developing the emerging new SEND Code of Practice. The joint bid was one of only 9 national Pathfinder Champion bids selected across England. The grant received from the DfE was allocated to support the implementation of the new SEN and Disability Reforms in 15 non-Pathfinder London local authorities designated as London Region 1. This programme was successfully delivered and highly evaluated.
- 3.3 During this period extensive progress has been made on testing the key areas of SEND Reform and reporting findings and conclusions back to the DfE and DoH in order to inform both the legislative process and the drafting of the new statutory Code of Practice. This work also supported Bromley in developing new systems and processes and provided key staff with important opportunities to attend stakeholder meetings and conferences. This contributed to staff understanding of the new legislative and organisational/ cultural changes as set out in the Children and Families Act 2014 and new SEND Code of Practice.
- 3.4 The delivery targets for Pathfinder Champion activity 2013 -15 were set by the DfE and assessed around implementation of the emerging SEND Reform programme.
- 3.5 As Pathfinder Champion for London Region 1 in 2014/15, Bromley, Bexley & Enfield delivered:
- Bespoke support on the SEND reforms in the 15 London Region 1 Champion authorities
 - 4 regional case studies
 - An extensive workforce development programme on key priority areas of the SEND reforms. Workshops and conferences were often delivered by senior officers from the DfE and other national delivery partners. As a Champion LA Bromley staff had extended access to many of these training opportunities which were highly evaluated by attendees
 - Coordination and delivery of workshops and training across the London region on key areas of the SEND Reform programme has been achieved at all levels and included a briefing to the Association of London Directors of Children's Services in association with the London Councils where the SEND priorities for London in 2015/16 were considered. Work with the DfE, Ofsted, CDC, DoH, Parent/Carer forums across London and other voluntary sector and national delivery partners contributed to the training plan.
 - Development of a London Region 1 Champion Information WIKI on resources and information to support the new SEND reforms.

In 14/15 workforce development included all key priority areas as outlined in 3.3 and support to the processes around quality conversion of Statements of SEN and Learning Difficulty Assessments into statutory Education, Health and Care (EHC) plans

- 3.6 The DfE's vision is for children and young people with special needs is that they achieve well in early years, at school and in college; lead happy and fulfilled lives; and have choice and control. Raising aspirations and achievement for children and young people with SEND set the context for Bromley's Pathfinder and Champion work, and this needed to be considered in a context of

rising numbers of disabled children. The general increase in population and the result of medical advances has led to this large increase in the number of children and young people with more severe SEN and disability, coupled with greatly increased health needs and complex family circumstances requiring an integrated approach across Education, Health & Care.

- 3.7 Evaluations from the 14/15 Pathfinder Champion for London programme were used to inform a joint application with Enfield to lead a London wide SEND Regional Lead programme of support with the aim of building sustainability of the new SEND reforms across London post March 16. Due to the funding available this will be a reduced programme from the 14/15 offer which will also develop SEND support networks and the sharing of best practice across London, offering further training opportunities.

4. FINANCIAL IMPLICATIONS

- 4.1 The £76,924 DfE Grant funding is made up of £37,500 base funding, a £24,424 top-up based on the number of authorities across the London region and £15,000 Preparation for Employment grant. As lead partner Bromley is receiving the SEND Regional Lead funding on behalf of both Bromley and Enfield Local Authorities. The £15k has already been requested for drawdown on report ED15089, as it is just an element of the Preparation for Employment grant carried forward from 2014/15.
- 4.2 The funding from the DfE is an un-ring-fenced grant and the Department has set out its aspirations for how Regional Leads should use the allocated funding with suggested success measures to assess impact.
- 4.3 The 15/16 grant allocation is the last year to DfE funding to support Regional Implementation of the new SEND Reforms and share best practice across England.
- 4.4 All activities and costs arising from the implementation of the SEND Regional Lead for London reform work would be met from within the DfE grant allocation in a partnership approach with Enfield.
- 4.5 The table below identifies provides a summary of the 2015/16 anticipated spending plan for this funding. The budget holder would be the Head of Specialist Support & Disability Services who is the current Regional SEND Lead for London from Bromley with further oversight by the Bromley SEND Implementation Project Board and a Delivery Support Contractor appointed by the DfE. Further details are provided in Appendix 1.

	£'000
Employees - LBB	25,500
Employees - Enfield	14,500
Consultancy	10,000
Employment pilot	10,000
Venue hire/expenses etc	8,500
Contingency	7,924
	76,424

- 4.6 The above table includes £25,500 for Bromley staff time, in respect of Head of Specialist Support & Disability Services, Parent Participation Officer, 16-25 Commissioning Manager, Officer and administrative support to deliver and coordinate the London Regional SEND Programme and Preparation for Employment grant activity coordination across London. This will ensure that all Bromley staff supporting the Programme are fully funded through the grant. £14,500 will be allocated towards Enfield staffing with £10,000 allocated to time limited resources including external consultancy to support expertise and specific elements of the

programme. The remaining sum reflects venue hire, expenses and Preparation for Employment grant coordination of activity across London.

5. LEGAL IMPLICATIONS

5.1 Statutory Compliance with the Children & Families Act 2014.

Non-Applicable Sections:	Policy and Personnel Implications
Background Documents: (Access via Contact Officer)	N/A

ACTIVITIES		COST (inc Staff)
1.	<p>Infrastructure Development: Establish a new London-wide SEND Information & Implementation Management Forum involving both professionals and parents</p> <p>10 x half day seminars (5 days), including venue/refreshments/preparation + Enfield and Bromley staffing</p> <p>[Staffing Enfield: 5 x £500 =£2500 Bromley £2500 + venue hire etc = £3000]</p>	8000.00
2.	<p>Workforce Development: Role out a bespoke SEN training programme on key themes and issues across London</p> <p>12 x half day seminars (6 days), including venue/refreshments + Enfield and Bromley staffing</p> <p>[Staffing Enfield: 6 x £500 = £3000 Bromley £3000 + venue hire etc = £3600]</p>	9600.00
3.	<p>Workforce Development: Local and national accountability framework: 1 day workshop on the Accountability framework in relation to the Ofsted/CQC proposed new inspection framework</p> <p>[Staffing: Enfield = £500 Bromley = £500 + venue hire etc = £600]</p>	1600.00
4.	<p>Annual seminar building onto regular ALDCS forum in partnership with London Councils, CDC, DfE and Ofsted (March 2016) – attendance/presentation by regional leads + consultancy input and preparation of presentation materials</p> <p>[Staffing: Enfield = £500 Bromley = £500 + expenses = £500]</p>	1500.00
5.	<p>Developing new networks and limited local authority in-borough bespoke support</p> <p>Develop new Under 5s network across London – including 3 training days + venue costs/preparation/network development (Bromley leading £2500)</p> <p>Bespoke work in London local authorities on key themes £3500 (staff £1750 Enfield, £1750 Bromley)</p>	6000.00
6.	<p>a. Monitoring, evaluation & communication: Ensure that the views of all stakeholders are captured and addressed</p> <p>b. Develop tools and processes to ensure region-wide communications are effective</p> <p>E.g. Monthly telekits between regional leads and key delivery partners - 9 x £500 (Bromley & Enfield Leads) + development of tools & WIKI</p> <p>[Enfield staffing: £3250 Bromley staffing: £3250]</p>	6500.00
7.	<p>Regional co-ordination / administration / evaluation / preparation</p> <p>The main administration for the SEND Regional Lead Programme to sit with Bromley</p> <p>[Staffing: Enfield = £1000 Bromley = £5000]</p>	6000.00
8.	<p>External consultancy – e.g. Quality assurance workshop: additional consultancy support/input TBC</p>	10000.00
9.	<p>Contingency @ 10% of regional funding [Notional: approx. Enfield = £3000 Bromley = £3000]</p>	7924.00

10.	Termly meetings for Principal Educational Psychologists – 3 x one day meetings, support to London Strategic Managers Network and aligned Delivery Partner reform work and activity [Staffing: Enfield = £1000 Bromley = £2500 + venue hire/expenses etc = £1300]	4800.00
	Total	£61,924
11.	Preparing for Adulthood (PfA)/Preparation for Employment Grant Coordination (led by Bromley) [Staffing: Enfield = £1000 Bromley = £4000 + £10000 employment pilot]	15000.00
	Total	£76,924

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