

## **EXECUTIVE**

Minutes of the meeting held on 30 September 2016 starting at 8.30 am

(The meeting continued the Executive's adjourned meeting on 14<sup>th</sup> September 2016 in order to give further consideration to the item, *Commissioning Strategy for Primary and Secondary Intervention Services*)

### **Present**

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

### **90 APOLOGIES FOR ABSENCE**

Apologies were received from Cllr Graham Arthur.

### **91 DECLARATIONS OF INTEREST**

Although any interest declared at an adjourned meeting continues for a re-convened meeting, the interest declared on 14<sup>th</sup> September 2016 related to items 7 and 17 of the agenda and not to the item under discussion at item 3 of the reconvened meeting.

### **92 COMMISSIONING STRATEGY FOR PRIMARY AND SECONDARY INTERVENTION SERVICES**

#### **Report CS17033**

A commissioning strategy with Bromley Clinical Commissioning Group (BCCG) was presented for Primary and Secondary Intervention Services providing Third Sector help to residents in maintaining independence (L B Bromley would lead on procurement with BCCG support). The services would target support to vulnerable residents prior to a need for full social care assessment, helping to avoid early admission to care homes and/or hospital.

L B Bromley currently holds 12 active contracts with six suppliers. Annual spend amounts to £1,595,835, with long standing contributions from BCCG. The contracts are due to expire on 31st March 2017 and a proposed new contract would start from April 2017.

It was intended to seek a preferred provider for a negotiated procurement process. The proposals would maintain current levels of joint L B Bromley and BCCG funding and utilise new funds available through the Better Care Fund (BCF). The funds would collectively create a pooled Primary and Secondary Intervention Fund, with the pool apportioned against eight categories of service namely:

- Carers Support Services
- Dementia Support Services (already tendered)
- Services to Elderly Frail
- Services to residents with Long Term Health Conditions
- Learning and Physical Disability
- Mental Health support services
- Single point of access to Primary and Secondary Intervention services
- Support to the 3<sup>rd</sup> sector to sustain and grow capacity

Detailed specifications would be developed with the preferred partner focusing on outcome and overarching objectives. It was intended to support the sector build capacity beyond available core BCF funding. The impact of preventative services would be measured by tracking referrals using the NHS number. The preferred partner would also need to demonstrate reach into the local Third Sector market, build sustainability for community services, and reduce pressure on existing social care and clinical health services.

Bids would be negotiated to determine final apportionment. A draft indicative budget indicated a total level of available funding at £3,262k comprising £851k from L B Bromley, £249k from BCCG and £2,162k from BCF. A contract for the eight categories of service would cover a period of up to three years with an option to extend for a period of two years (subject to agreed funding) at an estimated total value of £3.2m per annum. BCCG Clinical Executive supported the proposals and both BCCG Board and L B Bromley would be required to agree any recommendation to award the contract.

Since the adjourned meeting on 14<sup>th</sup> September 2016, supplementary information had been published for the item.

The Portfolio Holder for Care Services commended the proposed strategy referring to similar arrangements for the Dementia Hub, agreed by the Executive at a previous meeting. The Council would have financial control and the strategy was a positive step forward.

Members considered consequences should Government withdraw BCF arrangements in future and it was confirmed that the strategy would be subject to the continued availability of BCF funding. Although L B Bromley/BCCG funding levels would be maintained for the present, they were expected to reduce in future with increased reliance placed upon BCF funding. Unless L B Bromley and BCCG were prepared to contribute following any BCF withdrawal, the service would cease.

Members were advised that, as with most Council contracts, wording would be incorporated into the contract giving the Council authority to terminate in the event of any funding being withdrawn. Such clause(s) were particularly appropriate where there might be uncertainty on the continued provision of funding streams. It was additionally indicated that it could be unfavourable to include termination wording specifically for any BCF withdrawal - such

wording could then preclude any Government replacement arrangement which might be adequate; sometimes Government can replace one initiative with another favourable initiative.

The new contract was expected to target voluntary services for those whose condition might worsen or where there might be difficulty managing in current circumstances. Services would be developed to enable residents to self-manage conditions as much as possible and to explore what the community might do to assist further. The strategy would enable tracking of Third Sector services so that the cause and effect of voluntary interventions and their implications can be considered; there would be more likelihood of residents with long term conditions being identified and supported as a result of the new contract.

Following discussion, Members supported the recommendation(s) in Report CS17033 and it was **RESOLVED that a Primary and Secondary Intervention Fund be developed within the Better Care fund, jointly managed with Bromley Clinical Commissioning Group, and the services be procured against the eight categories outlined in Report CS17033, including carers support services, using a new model from April 2017.**

Chairman

The Meeting ended at 8.52 am