

ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 6.30 pm on 17 March 2021

Present:

Councillor Mary Cooke (Chairman)
Councillor Robert Mcilveen (Vice-Chairman)
Councillors Judi Ellis, Robert Evans, Simon Jeal,
David Jefferys, Keith Onslow and Angela Wilkins

Francis Poltera and Vicki Pryde

Also Present:

Councillor Angela Page, Executive Assistant for Adult Care and Health
and Councillor Diane Smith, Portfolio Holder for Adult Care and Health

54 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Roger Chant.

55 DECLARATIONS OF INTEREST

Councillor David Jefferys declared that he was an elected Lay Governor on the Council of Governors at King's and Councillor Robert Evans declared that he was a Governor on the Council of Governors at King's.

56 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

No questions had been received.

57 MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 20TH JANUARY 2021 AND 3RD FEBRUARY 2021

The minutes of the meetings held on 20th January 2021 and 3rd February 2021 were agreed and signed as a correct record.

58 WORK PROGRAMME AND MATTERS OUTSTANDING

Report CSD21042

The Committee considered a report setting out matters outstanding from previous meetings and the proposed work plan for 2020/21.

The Portfolio Holder for Adult Care and Health thanked the Chairman for agreeing to add an agenda item to the Committee's June 2021 meeting regarding the loneliness and befriending agenda to formalise the work being undertaken across the Council.

In response to questions from a Member, the Chairman advised that the oversight of domestic abuse and violence against women had always sat within the Children, Education and Families portfolio. This was considered to be a more natural home for ensuring an oversight of the impact on children within a family setting. This was acknowledged by the Member, but it was highlighted that there would also be a number of women subject to domestic violence who did not have children. The Chairman suggested and this could be discussed further at a future meeting of the Committee and, going forward, they could seek to work more closely with the Children, Education and Families PDS Committee.

The Portfolio Holder for Adult Care and Health advised that the new Domestic Violence and Abuse (DVA) and Violence Against Women and Girls (VAWG) Strategy 2021/24 had been approved at the January 2021 meeting of the Children, Education and Families PDS Committee. This would also be brought to the Health and Wellbeing Board meeting on 29th April 2021.

The Chairman informed Members that the newly appointed Independent Chair of the Bromley Safeguarding Adults Board (BSAB) had presented an update at a recent meeting of the Health and Wellbeing Board. The Committee could not insist that the Independent Chair of the BSAB attend the Adult Care and Health PDS meetings, however, she could be invited to address any specific aspects of safeguarding that the Committee identified. It was noted that the previous Independent Chair of the BSAB had attended the Adult Care and Health PDS Committee meetings of her own volition rather than it being a requirement of the post.

RESOLVED that the report be noted.

59 UPDATE FROM THE DIRECTOR OF ADULT SOCIAL CARE

The Director of Adult Social Care gave an update to Members on work being undertaken across the Adult Social Care department.

The Director of Adult Social Care advised Members that the department had continued to be busy as they worked to get back to the "new normal". Staff were still largely working from home, sickness levels remained very low and teams were completing the work required. It was noted that referral numbers had started to increase but were still lower than would be expected.

The team had continued to provide support to care providers who were experiencing infections, but the Director of Adult Social Care said she was pleased to confirm that the level of infections was now very low. This being the case, the multi-agency surveillance meetings had been stepped down to one per week.

Lateral Flow Test Grants had been allocated to providers, which would enable them to provide tests for visitors who were now allowed into care homes, and the grant could be used to generally support the additional activity required. The Workforce Grant was being used to assist with “training-up” staff in Infection Control measures. The department were seeking to create a network of Infection Control Champions across the sector who, following training, could give advice which would reduce the demand on public health colleagues.

The Director of Adult Social Care advised that support had continued to be provided to the vaccination programme with a national focus on care staff. The number receiving the vaccination continued to increase and in care homes now averaged 80%, with a number of homes reaching 100%.

The previous week, with Community Links Bromley, the department had held the second workshop to develop a new vision and action plan for day services. Twelve providers were working with the Council to consider how, together, they could develop a balanced portfolio of day activities across the borough and to better communicate what day opportunities were available to residents. Topics under discussion had included creating more community-based activities; linking day activities to extra care housing and care homes activities; creating a directory of services that people could access on coming out of lockdown; and developing intergenerational activities. Representatives from six local organisations were working with Council officers in a Task and Finish group to complete an action plan for sharing by the summer.

A Member noted that the grants scheme and day centre workshop sounded extremely positive and enquired as to how the views of carers would be taken into account when developing the vision. It was also questioned if other groups, such as the faith sector, would be engaged with and what work was being undertaken to identify underused spaces. The Assistant Director for Integrated Commissioning advised that the second workshop had allowed voluntary sector partners to share their ideas and thoughts. They planned to initially scope a vision for day activities which was inclusive and provided a diverse range of services. This information would then be shared, and the views of carers and service users would be gathered. Community Links Bromley (CLB) had a digital directory of services, which the team were looking to help rejuvenate. They hoped to capture as many services as possible and would like to have more faith sector groups included within the database. With regards to the work being undertaken to identifying community spaces, good progress was being made and CLB would also be compiling a database of this information. It was noted that representatives from the Hanover Housing Association had offered the use of spaces attached to their Extra Care Housing at a reduced rate for the delivery of day services for vulnerable

residents. The Assistant Director for Integrated Commissioning advised Members that, following the consultation being undertaken, they would be provided with a further update in the summer.

In response to a question, the Portfolio Holder for Adult Care and Health said that the workshop had emphasised the fantastic support delivered by providers throughout the pandemic. Consideration would be given to new and innovative ways to take ideas forward, particularly connected to Extra Care Housing. The feedback received from providers indicated that a number were supporting cohorts of service users with severe dementia. It was important that, within the training identified, activities from the dementia services were promoted and used.

The Director of Adult Social Care highlighted that relationships with both care providers and the voluntary sector had gone from strength to strength and they were considering ways to maintain this across the whole of Bromley post-pandemic.

Members were advised that Tricia Wennell, who had headed up the older adults service, would sadly be leaving the Council on the 9th April 2021 following many years of work for the Local Authority. Some temporary arrangements had been put in place whilst they recruited an Assistant Director for Operational Services, who would take the lead on services for all adults, including those for people with a learning disability and mental health needs. The new post would work alongside the newly appointed Principal Social Worker, Christine Mak, who had joined the team a few weeks ago and was already developing good relationships across the services and would help to embed strengths-based practice. Overall, the Director of Adult Social Care felt that the department was in a very positive position as they moved into spring, and hopefully out of the pandemic.

A Member thanked the Director of Adult Social Care for the notification of staff changes. This was extremely helpful and it was considered that other Directors may wish to report the same information at other Committees.

With regards to mental health, a Member asked what impact was being seen on services as a result of the pandemic. The Director for Adult Social Care advised that Oxleas NHS Foundation Trust were commissioned to provide Care Act responsibilities and the department worked with them closely. There had been a very real increase in demand, both from existing patients and new patients not previously known to the service. During discussions with Oxleas they had confirmed that people were presenting with much more complex needs which they believed were linked to the pandemic. It was noted that the Service Director (Bromley Directorate) – Oxleas NHS Foundation Trust could be asked to provide an update relating to this at a future meeting of the Health Scrutiny Sub-Committee.

RESOLVED that the update be noted.

**60 PRE-DECISION SCRUTINY OF ADULT CARE AND HEALTH
PORTFOLIO HOLDER REPORTS**

**A CONTRACT EXTENSION VARIATION FOR DEMENTIA
RESPIRE AT HOME SERVICES**

Report ACH21-024

The Committee considered a report outlining a proposed contract extension variation for dementia respite at home services.

Following the presentation of an Award Report at the Care Services Policy and Scrutiny Sub-Committee (10th January 2017), Bromley, Lewisham and Greenwich (BLG) Mind were granted a contract to provide a respite service for carers of older people with dementia to help them maintain their caring roles. The contract commenced on 1st April 2017 for a period of 3 years and was due to expire on 31st March 2020. However, there was an option to extend the contract for up to a further two years on a 1+1 basis. Following the Adult Care and Health PDS Committee meeting on 17th November 2019, the Portfolio Holder for Adult Care and Health approved the extension of the contract for a period of 1 year from 1st April 2020 until 31st March 2021 and a variation to the hourly rates (Report ACH19-018). A further one-year extension option remained.

There had been an additional contract extension, from 31st March 2021 to September 2021 in accordance with Executive approval to delegate contract extensions approval to the Chief Officer, with the agreement of the Portfolio Holder, where commissioning had been impacted by the pandemic (Report CSD20062 - Covid-19 Procurement Implications). The contract was awarded as detailed, and consequently there was a further (final) option to extend the contract up to 31st March 2022. However, the recommendation was that this service was extended up to 30th September 2022 and therefore the activation of the existing extension clause alongside a 6-month extension beyond the original term was requested. The extension would commence from 1st October 2021 until 30th September 2022 and would have an estimated value of £194k, whilst the budget would be £173k and the deficit funded from the social care budget.

The Head of Community Commissioning advised that an options appraisal had been undertaken. The preferred option (Option 3) was to extend the contract up until 30th September 2022 and recommission the service, incorporating the current specification into the tender for Bromley Well or new arrangements for day opportunities (coproduced and design led by the voluntary sector). In response to a question from the Chairman, the Head of Community Commissioning said that as part of the Bromley Well tender they would be looking at whether the new arrangements could incorporate this service. The existing Bromley Well model already had a carers pathway and it was considered that this could be a “good fit” for the respite at home service. Alternatively, respite at home support could be included in the extended vision

of day opportunities which was currently being scoped with the voluntary sector.

A Member emphasised that the service was extremely important and noted that without it being in place costs to the Council could considerably increase. At previous Committee meetings Members had stated their support for this service and it was firmly believed that it must remain free. This was echoed by several other Members who highlighted that it had been a particularly important service over last year and would continue to be so going forward. Carers had worked incredibly hard and had clearly been impact by the pandemic.

A Member noted the £15k underspend referenced in the reports and asked if this could be carried forward into the following year to reduce the projected overspend. The Head of Community Commissioning advised that the underspend would be included in social care deficit and used to “bridge the gap”. The Member further noted the statements made in the report regarding direct payments and asked for assurances that safeguards were in place to enable carers to procure respite care services. The Head of Community Commissioning said that the flexible use of direct payments did not take away the respite at home provided and was in addition. Service users or carers had the choice to be provided choice to receive respite at home or utilise a direct payment and this flexibility still remained. It was noted that the contract extension would retain what was currently being provided for a further period.

A Member noted the large underspend for CCG support for social care, that was referenced in the Budget Monitoring 2020/21 report, and enquired if it could be used within this service. The Director of Adult Social Care advised that this money was specifically provided to offset the pressures of COVID-19 which was why the department was now in a more favourable financial position than had been expected. In response to a question from the Chairman, the Director of Adult Social Care confirmed that this was a “one-off” payment received from the CCG.

The Chairman asked that the Director of Adult Social Care and Portfolio Holder for Adult Care and Health give due consideration to the strong views expressed by the Committee.

RESOLVED that the Portfolio Holder for Adult Social Care approve the extension of the contract, activating the existing extension clause, alongside a further 6-month extension via the Contract Variation process (Regulation 72 of the Public Contract Regulations) beyond the predefined contract duration. The extension would commence from 1st October 2021 until 30th September 2022 and would have an estimated value of £194k, whilst the budget would be £173k.

B ACH PORTFOLIO PLAN QUARTER 3 UPDATE

Report ACH21-007

The Committee considered a report providing an update of the Portfolio Plan for 2020-21 – Quarter 3.

The Adult Care and Health Portfolio Plan 2018 to 2022 was refreshed for 2020/21 in line with the Council's Transformation Programme and Bromley the Better Borough. The Plan continued to focus on four priority outcomes:

- Safeguarding;
- Life chances, resilience and wellbeing;
- Integrated health and social care; and
- Ensuring efficiency and effectiveness.

Within each priority were a number of statements which were underpinned by actions and measures of success within the work of Adult Care and Health Services. During 2020/21 officers had been delivering on the Portfolio Plan at the same time as responding to the COVID-19 pandemic. This included programmes to support residents who were clinically extremely vulnerable to coronavirus as well as other vulnerable residents, to match volunteers with those needing support, to provide social care providers with training, advice and PPE supplies and establish a local Contact, Test and Trace service. However, progress had been made on the majority of the actions within the Portfolio Plan.

The impact of COVID-19 had seen some positive developments such as new ways of working in partnership with health partners some of which had been incorporated into mainstream ways of working whilst others continued to be evaluated for incorporation into future plans. However, some developmental work and re-commissioning had needed to be delayed. Key achievements in Quarter 3 were:

Priority 1 – Safeguarding:

- Continuing to raise the profile of safeguarding awareness during COVID-19 by developing the Bromley Safeguarding Adults Board website and launching the Board's Twitter account.
- The launch of the Strengths and Outcomes Based Approaches Practice Framework in December 2020 to support front-line professionals and commissioners in developing and improving their practice to promote the independence and wellbeing of vulnerable residents.

Priority 2 – Life chances, resilience and wellbeing:

- The 0-19 years public health service contract commenced on 1st October 2020 delivering better, more co-ordinated health guidance and support for children, young people and families.
- The Public Health response to the COVID-19 pandemic continued with the development of the Outbreak Control Plan, frameworks for outbreaks in specific settings and vulnerable groups, engagement and communication plans and the successful development of the local Contact, Test and Trace programme.

Priority 3 – Integrated health and social care:

- The development of the Learning Disability Strategy and the establishment of the Learning Disability Partnership Board to take forward its strategic priorities.
- Establishing the integrated Rehabilitation and Reablement Pathway as part of the Single Point of Access resulting in increased capacity of 40% operating 7 days a week.
- Successfully re-tendering the CAMHS service and Direct Payments Support and Payroll Service contracts to begin in April 2021.

Priority 4 – Ensuring efficiency and effectiveness:

- The strong local response to Winter pressures and the second wave of COVID-19 due to Integrated commissioning arrangements and One Bromley collaborative working.

A Member noted that there were several references made in the Portfolio Plan to the 'Building a Better Bromley' document, which had now expired, and enquired when the new version would be published. The Assistant Director for Strategy, Performance and Corporate Transformation responded that an initial draft of the 'Bromley the Better Borough' had been presented to the Executive, Resources and Contracts PDS Committee at the end of last year, and Members had made a number of recommendations for refinement. One of the key points was that the initial drafting of the document had taken place prior to the pandemic, since which a number of changes had been made to the way services were delivered. Work had therefore been paused, and two Public Health reports had been commissioned – the first of these related to the impact of the pandemic, which would form part of the Joint Strategic Needs Assessment (JSNA), and the second would address what was being done to respond to these needs. It was noted that the priorities listed in the expired strategy would remain until they were replaced, and the higher-level vision would broadly remain the same. In terms of timeframe, it was anticipated that a redraft of the document would be presented in the summer.

The Member further noted the references made to the Council's obesity campaign materials. It was highlighted that it would be helpful to see the good work being undertaken by officers and suggested that Members could help to distribute information locally. Councillor Jefferys, Chairman of the Health and Wellbeing Board, advised that the Board had established a sub-group to undertake a piece of work related to obesity. Following discussions at the February meeting, the sub-group had reconvened and would provide an update at the Health and Wellbeing Board on 29th April 2021. The Director of Public Health said that an obesity campaign had been undertaken during the autumn for which they had tried to circulate information as widely as possible. It was suggested that the update presented to the next Health and Wellbeing Board meeting be circulated to Members of the Adult Care and Health PDS Committee.

In response to questions from a Member, the Director of Adult Social Care advised that the BSAB Conference had been cancelled this year as it was not possible to hold it face to face. However, there had previously been discussions as to whether it provided good value for money and the

department were already considering if this was the most appropriate way to bring people together. Members were assured that the Safeguarding Adults Board Manager was continuing to send out communication regularly to keep members “up to speed”. It was noted that information relating to e-learning statistics and the reason for selecting Twitter as the most appropriate social media channel could be sought from the Safeguarding Adults Board Manager following the meeting.

A Member asked for further information relating to the transfer from Children’s to Adult Care Services. The Director of Adult Social Care said that transition remained a challenge. Members were advised that the Children’s Services department were currently undertaking a piece of work to scope the benefits of establishing a 0-25 service which could help to “bridge the gap” between childhood and adulthood.

In response to a question regarding Priority 3 and the integration of health and care, the Director of Adult Social Care said that there were clear rules regarding what services were charged for, and that it was unlawful for the Local Authority to deliver services that should be provided by health teams. With regards to any disputes, there was a local arrangement in place which was also applied nationally. The authority that initiated any work continued to fund it until the dispute was resolved and therefore the service user was not affected. The Assistant Director for Integrated Commissioning advised that the reference made to ‘brokerage’ related to there being two teams – one within the Local Authority and the other in the Clinical Commissioning Group (CCG). Following a decision being made that an individual required care or support, the teams worked to identify who this would be delivered by. Throughout the pandemic, significantly more joint working had been undertaken and, in the future, it was planned that these two teams would be brought together. This would create a single brokerage service which would bring efficiencies and ensure that clients had more choice. The Member further queried how decisions would be made within an integrated service. The Assistant Director for Integrated Commissioning advised that there were various ways, including using a trusted assessor arrangement whereby other health services or agencies could make decisions on behalf of the Local Authority. However, as part of the process, these decisions were always checked. It was noted that the decision as to who paid for ‘what, where, and when’ would be made prior to the service being established and therefore it would not be made by the brokerage team.

RESOLVED that the report be noted.

C ACH RISK REGISTER QUARTER 3 UPDATE

Report ACH21-015

The Committee considered a report providing the current Adult Care and Health Services’ Risk Register – Quarter 3 2020/21 and the existing controls to mitigate the risks.

Risk Management was the identification, analysis and overall control of those risks which could impact on the Council's ability to deliver its priorities and objectives. The Adult Care and Health Services Risk Register fed into the Corporate Risk Register, via the Corporate Risk Management Group, and comprised the high level departmental risks which were underpinned by more detailed registers contained within the divisional business plans.

The Council's Audit Sub-Committee agreed that the Corporate and Departmental Risk Registers would be reviewed at their meetings twice a year and then subsequently scrutinised by the relevant PDS Committee. Internal processes required that the departmental risk registers be updated and agreed by the Departmental Leadership Team (DLT) on a quarterly basis and be reviewed by the Corporate Risk Management Group. The Adult Care and Health Risk Register 2020/21 Quarter 3 update was agreed by Adult Services Leadership Team in February 2021.

The Assistant Director for Strategy, Performance and Corporate Transformation highlighted that the response by Bromley Council to the pandemic in supporting vulnerable residents and providers, as well as the additional pressures on the health and social care system, had impacted on the ability to reduce both gross and net risks. However, since the last report no risks had increased. One change had been made to the Risk Register since September 2020, with 'Risk 6 - Transport – Children and Adults' reducing from gross risk 15 to 12.

In response to a question, the Assistant Director for Strategy, Performance and Corporate Transformation advised that the mitigations put in place for the risks identified essentially limited the risk to vulnerable children and adults. Assurance was given through the acknowledgement that these risks were included on the register and were being managed.

RESOLVED that the report be noted.

D CAPITAL PROGRAMME MONITORING - 3RD QUARTER

Report FSD21017

On 10th February 2021, the Leader received a report summarising the current position on capital expenditure and receipts following the 3rd quarter of 2020/21, and agreed a revised Capital Programme for the five-year period 2020/21 to 2024/25. The Committee considered a report highlighting changes agreed by the Executive and Leader in respect of the Capital Programme for the Adult Care and Health Portfolio.

The Head of Finance for Adults, Health and Housing advised Members that there had been no further changes from the Quarter 2 report presented at the last meeting. It was highlighted that the main scheme remaining within Adult Care and Health Portfolio Capital Programme was the learning disability

element and a report regarding its potential use would be brought to the Committee later in the year.

In response to a question from the Chairman, the Director of Adult Social Care advised that the department were looking to spend the money against the scheme for 'Supporting Independence – Extra Care Housing', however there was the opportunity carry this money forward. The Head of Finance for Adults, Health and Housing confirmed that any underspend on the Capital Programme would automatically be rephased into the next financial year and would therefore be available to spend.

A Member noted the reference made to Chief Officers being invited to come forward with bids for new capital investment, including Invest to Save bids, and asked if consideration had been given to respite services and reducing the long-term costs which were anticipated to continue to rise. The Director of Adult Social Care noted that there were usually strict rules around what could be applied for. The Head of Finance for Adults, Health and Housing advised that no bids had currently been received and there was the potential for suggestions to be put forward by the Director of Adult Social Care and Assistant Director for Integrated Commissioning.

RESOLVED that the Portfolio Holder be recommended to note the changes agreed by the Leader on 10th February 2021.

E BUDGET MONITORING 2020/21

Report FSD21020

The Committee considered a report providing the budget monitoring position for 2020/21 for the Adult Care and Health Portfolio based on activity up to the end of December 2020. The Head of Finance for Adults, Health and Housing advised that the current position of the Adult Care and Health Portfolio was a projected underspend of £591k.

A Member noted the change of variations related to learning disability and mental health budgets included in the Adult Care and Health Portfolio Budget Monitoring Summary and enquired as to how these gains had been made. The Head of Finance for Adults, Health and Housing said that the reduction in the learning disability overspend was mainly due to the continued closure of day services and the related transport provision. The Quarter 2 Budget Monitoring report had been produced in September 2020 when it had not been foreseen that they would remain closed for the remainder of the financial year. It was noted that several factors had contributed to the reduction in the mental health overspend. Sadly, there had been some additional client deaths but also a reduction in packages and an increase in client contributions.

A Member noted the statement made that the closure of day care centres had led to an increased demand for domiciliary care and asked if this could be quantified. The Head of Finance for Adults, Health and Housing said he was

unsure that it would be possible to provide this detail if the reasons for using a package of care were not recorded in the finance module of the case management system. It was considered that the majority of the overspend was likely to be linked to post-discharge packages of care. The Director of Adult Social Care highlighted that where services had been closed alternative support had been funded. This would be recorded against individual case files but not within the financial system.

The Head of Finance for Adults, Health and Housing noted the underspend within the department and Members were advised that the Council-wide budget monitoring report to the Executive was due to be published recommending that departmental underspends for this year be set aside in a reserve, and used to help manage COVID-19 related pressures during the following financial year. In response to a question, the Head of Finance for Adults, Health and Housing emphasised that the report had not yet been published, so may change, but he believed that the intention was for all underspends to be placed in a single reserve which any departments facing pressures could call upon. Any request would be subject to Executive agreement however it was considered that the source of the underspend, and its need during the next financial year, would be taken into account.

RESOLVED that the Portfolio Holder note the projected net underspend of £591k on controllable expenditure (excluding the impact of COVID-19), based on information as at December 2020.

61 PRE-DECISION SCRUTINY OF EXECUTIVE REPORTS

A LEARNING DISABILITY - COMPLEX NEEDS DAY SERVICE (PART 1)

Report ACH21-016

The Committee considered a report outlining proposals relating to the learning disability complex needs day service.

The Council had a contract in place with the Southside Partnership (also known as Certitude) to provide learning disability supported living and community-based day and respite services. Executive approval was obtained in November 2019 to extend the contract for a period of up to 2 years from 1st October 2020 to 30th September 2022. The Council was unable to reach mutual terms to extend the contract as originally intended and subsequent negotiation has resulted in a 6-month extension of the contract to 31st March 2021.

At the Adult Care and Health PDS Committee meeting on 24th November 2020 Members scrutinised a report that set out the procurement proposals in relation to these services, and the report was subsequently agreed by the Leader. Future learning disability day provision was being divided so that people with lower needs would receive their services from community based

locations that were spot purchased or funded via direct payments, and people with complex needs would receive a building-based service. The report provided focussed upon the building-based complex needs day service which had been subject to a full tender process.

The tender process for complex needs day services closed on 4th February 2021 but did not attract any compliant bids; the report provided Members with details of the negotiated process that was now being followed and the interim arrangements that were required. The report sought Member agreement to a contract variation and extension of the current block contract with Southside Partnership to enable service provision whilst the negotiation and contract award processes were progressed, and the new contract was mobilised.

In accordance with the Council's financial and contractual requirements, the Executive were requested to agree the variation and extension of the block contract with Southside Partnership. The contract extension would commence on 1st April 2021 for a period of up to 5 months and a value as detailed in the Part 2 report to enable the provision of complex day services as the lockdown was eased and whilst the negotiation / mobilisation process of a new contract was completed. The block contract extension would end as soon as contract implementation with a new provider could be achieved. The cumulative spend in relation to the block contract since 1st October 2015 was detailed in the Part 2 report along with the total contract expenditure.

In response to a question, the Head of Complex and Long-Term Commissioning advised that the original contract with the Southside Partnership was for 5 years with a 2 year extension. They were currently five and a half years into the contract, which allowed this element to be extended for a further 5 months, as it still fell within the overall contract period.

A Member noted that the tender process had not attracted any compliant bids and asked if the reasons for this had been identified. The Head of Complex and Long-Term Commissioning said that they had spoken with providers involved in the tendering process who advised that there had been concerns regarding the TUPE transfer of staff and the time required to undertake due diligence.

The Portfolio Holder for Adult Care and Health expressed her thanks to the Head of Complex and Long-Term Commissioning for the work undertaken to ensure continuity of the contracts and service provision.

RESOLVED that the Executive be recommended to approve the variation and extension of the existing block contract with Southside Partnership to provide building-based complex needs day services, the extension to commence on 1st April 2021 for a period of up to 5 months to 31st August 2021 at a cost detailed within the Part 2 report; this would increase the total expenditure on the Southside Partnership block contract since 1st October 2015 to the amount detailed in the Part 2 report.

B GATEWAY 0 PROCUREMENT OPTIONS FOR THE PRIMARY AND SECONDARY INTERVENTION SERVICE (BROMLEY WELL)

Report ACH21-018

The Committee considered a Gateway 0 report advising them of the work that was being undertaken by commissioners in preparation for the end of contract and detailed procurement options for the Primary and Secondary Intervention Service.

The Primary and Secondary Intervention Service contract would expire on 30th September 2022 with no further extension options remaining. This service was currently delivered by Bromley Third Sector Enterprise and provided integrated prevention and early intervention services across health and social care for the residents of Bromley. The service was jointly commissioned by London Borough of Bromley (LBB) and Bromley Clinical Commissioning Group (BCCG) with LBB as the lead commissioner. LBB and BCCG jointly attend contract meetings and had joint representation on the Bromley Programme Board, which currently oversaw operational delivery of the contract.

The current contract had an estimated annual value of £2.5m and was awarded on a 3 plus 2 year contract basis. The contract commenced on the 1st October 2017 and was due to expire on the 30th of September 2022. In line with current procurement guidance, commissioners would conduct a soft market test to determine the availability of suppliers in the market to deliver the service and use this exercise to inform the procurement options. It was noted that commissioners would provide a Gateway 1 report to the Committee in June 2021 which would detail procurement options and the recommended commissioning approach.

The Integrated Strategic Commissioner advised Members that the basis for recommending to proceed with Option 2 (Conduct a Soft Market Test to inform procurement options) was that it allowed commissioners to use early market engagement to talk to the supplier market before the start of the procurement process and bench mark it against current supplier products. It also provided an opportunity to refine/refresh the service specification/offer. In response to a question from the Chairman, the Integrated Strategic Commissioner said that the soft market testing did not oblige commissioners to procure the service.

A Member enquired as to when the Committee would have sight of the specification and KPIs for the contract and be given an opportunity to comment on and recommend amendments if necessary. The Assistant Director for Integrated Commissioning noted that the report provided an early indication of the procurement process that would be undertaken. It was intended that consultation with the market would be completed before the specification was designed and it was anticipated that details of the specification would be brought back to the Committee in early autumn. The

Director of Adult Social Care assured Members that sufficient time had been included in the timeframe of the process to allow for discussion and debate.

A Member considered that any intelligence gathered at the present time as part a market review may not necessarily be useful in the longer term as the roadmap out of the pandemic was still hypothetical. The Member enquired if a stronger line on managing conflicts of interest would be taken to ensure that people were signposted to the most appropriate service. The Integrated Strategic Commissioner responded that as part of the soft market test they would be looking at other models to see if they enabled a clearer way of managing conflict of interest. During their service review, Bromley Third Sector Enterprise had been asked to strengthen their governance process, particularly related to managing partners and having independent board members.

The Member further noted that a clear framework was needed to ensure that the service was not wholly reliant on the volunteers to deliver the contract. The Integrated Strategic Commissioner said that the pandemic had highlighted the role that volunteers could play in helping to deliver services, however they would not be relied on to sustain them. This would be considered as part of the soft market testing.

RESOLVED that the Executive be recommended to approve the option to conduct a Soft Market Test prior to submitting a Gateway 1 report to the Adult Care and Health PDS Committee in June 2021.

C SEXUAL HEALTH EARLY INTERVENTION SERVICE - CONTRACT EXTENSION

Report ACH21-025

The Committee considered a report outlining a business case for the proposed contract extension for the Sexual Health Early Intervention Service.

The local Sexual Health and Contraception Services were delivered through a number of contracts. COVID-19 had impacted on service delivery and procurement timelines and processes and the ongoing uncertainties and recovery would further impede procurement and market engagement. The providers of Sexual Health and Contraception Services were health partners and their capacity to participate and engage in a procurement process was likely to be restricted by their involvement in, and responses to, the ongoing COVID-19 pandemic. In order to provide consistency in service delivery and to allow the market to recover, it was necessary to delay the planned sexual health procurement and therefore extend current contracts.

In June 2020 (Report No. ACH20-026), the Portfolio Holder for Adult Care and Health authorised an extension beyond term of the contract from 1st October 2021 until 31st March 2022. The report requested authorisation to vary the contract with Bromley Healthcare CIC for the provision of Sexual Health Early

Intervention Services to extend it beyond term for a further 12 months from 1st April 2022 to 31st March 2023. This would align the expiry date of the local contraception and sexual health contracts with the King's College Hospital NHS Foundation Trust (King's) contract which provided the Genitourinary Medicine (GUM) element of the local service at the Beckenham Beacon. Under the South East London Collaborative Arrangement, King's contract was also being extended for a one-year period (this was due to the impact of COVID-19 on the market and the procurement process). As it would be more prudent to deliver an integrated sexual health service in Bromley, in line with the national specification, it was necessary to align both the Bromley Healthcare and King's contracts so that an integrated 'one stop shop' service could be provided to Bromley residents from 1st April 2023. The contract variation would also allow commissioners to evaluate the models of service delivery that had been more successful during the COVID-19 pandemic and develop an appropriate, local integrated sexual health service model. It was also envisaged that the planned procurement would be managed over a longer time period than was normally assigned due to the ongoing impact of COVID-19.

A Member asked for further information relating to the separate LGBTQ element listed on the table of key performance data. The Assistant Director for Public Health advised that this was a specific service provided to the LGBTQ community. It was a confidential service promoting peer support in a safe environment for service users to discuss any issues and was delivered through a sub-contracting arrangement with Metro. Metro had a wide network of groups and service users were able to access more varied levels of support.

RESOLVED that the Executive be recommended to approve the variation of the Bromley Healthcare CIC Sexual Health Early Intervention Service to further extend the contract for a period of 12 months from 1st April 2022 – 31st March 2023 at an estimated annual value of £934k (revised whole life value of £5,116k).

62 CONTRACTS REGISTER AND CONTRACTS DATABASE (PART 1)

Report ACH21-017

The Committee considered an extract from February 2021 Contracts Register for detailed scrutiny by the PDS Committee. Members noted that the Contracts Register contained in Part 2 of the agenda included a commentary on each contract to inform Members of any issues or developments.

The Head of Complex and Long-Term Commissioning advised Members that one contract, the Certitude Adult Social Care Services – Learning Disabilities, had been flagged for attention due to the tight timescales for tender.

In response to questions from a Member, the Head of Complex and Long-Term Commissioning advised that there were two other contracts delivered by Certitude, however they were of a different nature and they did not see the likelihood of similar concerns arising. It was noted that the circumstances around the Certitude Learning Disabilities contract had been exceptional but other contracts would be closely monitored to avoid a reoccurrence of this situation in the future.

RESOLVED that the report be noted.

**63 QUESTIONS ON THE ADULT CARE AND HEALTH PDS
INFORMATION BRIEFING**

The Adult Care and Health PDS Information Briefing comprised two reports:

- Rapid Testing Programme
- Minutes of the Health Scrutiny Sub-Committee meeting held on 14th January 2021

RESOLVED that the Information Briefing be noted.

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

RESOLVED that the Press and public be excluded during consideration of the items of business listed below as it was likely in view of the nature of the business to be transacted or the nature of the proceedings that if members of the Press and public were present there would be disclosure to them of exempt information.

**The following summaries
Refer to matters involving exempt information**

**65 EXEMPT MINUTES OF ADULT CARE AND HEALTH PDS
COMMITTEE MEETING HELD ON 3RD FEBRUARY 2021**

RESOLVED that the exempt minutes of the Adult Care and Health PDS Committee meeting held on 3rd February be agreed and signed as a correct record.

66 PRE DECISION SCRUTINY OF EXEMPT EXECUTIVE REPORTS

**A LEARNING DISABILITY - COMPLEX NEEDS DAY SERVICE
(PART 2)**

The Committee noted the Part 2 information within the report.

**67 CONTRACTS REGISTER AND CONTRACTS DATABASE
(PART 2)**

The Committee noted the Part 2 information within the report.

The Meeting ended at 8.35 pm

Chairman