ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 7.00 pm on 5 September 2023

Present:

Councillor Mark Brock (Chairman) Councillor Felicity Bainbridge (Vice-Chairman) Councillors Kim Botting FRSA, Dr Sunil Gupta FRCP FRCPath, Jessica Arnold, Robert Evans, Mike Jack, David Jefferys and Kevin Kennedy-Brooks

Stacey Agius, Jo Findlay and Michelle Harvie

Also Present:

Councillor Graeme Casey (via conference call)

19 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Councillor Diane Smith, Portfolio Holder for Adult Care and Health.

20 DECLARATIONS OF INTEREST

There were no declarations of interest.

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

No questions had been received.

22 MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 27TH JUNE 2023

The minutes of the meeting held on 27th June 2023 were agreed, and signed as a correct record.

23 MATTERS OUTSTANDING AND WORK PROGRAMME

Report CSD23104

The Committee considered a report setting out matters outstanding from previous meetings and the proposed work plan for 2023/24.

RESOLVED that the update be noted.

24 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 that it would normally be expected that things would quieten down over the summer months but this year they had certainly not experienced this – it had been extremely busy. Referrals had continued to be high, across all service areas, discharges from hospital had continued to increase and with a large proportion of staff taking much needed leave it had been very challenging to keep on top of demand.

As Members would hear during the meeting, the budget was under significant pressure, particularly in relation to spend against the Discharge to Assess arrangements, mental health services and growing demand coming through the Transition arrangements overseen by Children's Services. At this point in the year the department often showed increased pressures and the Director of Adult Social Care confirmed that management actions were being put in place to mitigate these pressures.

In response to a question, the Director of Adult Social Care advised that the respite service provided by BLG Mind was continuing – it had been paused for a period when it had reached capacity. There had been some changes in how people accessed the service, and this was something that would continue to be monitored. It was noted that, as agreed during the last budget setting, this had become a chargeable service.

As reported earlier in the year, there had been changes to the delivery of the Integrated Community Equipment Service. Members would recall that Bromley was part of a large consortium of Councils who accessed the same contract. It was disappointing to report that the initial teething problems, which were to be expected, had continued with a number of problems with delivery. These problems were largely created by frustration in the handover process from the previous provider, and the new provider working extremely hard to improve service delivery quickly. A future paper would be brought to the Committee once a robust set of plans had been put in place.

Work to transform services was continuing well, and a detailed report on some of this work would be presented later in the meeting. However, work had also continued to develop a robust workforce strategy, to make effective use of the grant to increase care fees with investment into local providers to grow local capacity and developing a further set of efficiencies that mirrored priorities going forward. The department were also continuing preparation for the assurance process, with all managers completing a self-assessment to determine the biggest areas of risk. The department would be seeking Invest to Save funding to continue the relationship with the Social Care Institute for Excellence (SCIE) and to build on the excellent work they had been undertaking with the team.

The Director of Adult Social Care informed Members that it was an important day as the teams led by the Assistant Director for Safeguarding, Practice and Provider Relations had moved as 'early movers' into the new Churchill Court offices. The new offices would eventually enable the entire Directorate to be based together, rather than being scattered across the large site – a very welcome move indeed.

The Director of Adult Social Care said she also had some very sad news to share. Some Members of the Committee would know John Harrison, Head of Learning Disability Services, well – John had been fighting cancer for a couple of years, and sadly lost that fight on Saturday. It was noted that some interim cover arrangements were already in place. Thoughts were with John's wife and family at this very sad time. The Chairman asked that the condolences of the Committee be passed on to John's wife and his family.

RESOLVED that the update be noted.

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

The Committee considered the following reports where the Adult Care and Health Portfolio Holder was recommended to take a decision.

A FORMAL CONTRACT EXTENSION HEALTHWATCH BROMLEY SERVICE

Report ACH23-035

The Committee considered a report proposing the formal contract extension for the Healthwatch Bromley service. The current Healthwatch Bromley contract commenced on 1st April 2021 for an initial term of three years which was due to expire on 31st March 2024. However, as the contract included the option to extend for a period of three years, the purpose of the report was to seek permission from the Portfolio Holder (subject to the scrutiny of the ACH PDS) to extend the Healthwatch contract for the final term, which would result in a revised contract expiration date (31st March 2027). The current value of the contract was £81,580 per annum.

Healthwatch England was established in accordance with the 'Local Government and Public Involvement in Health Act 2007' (as amended by the Health and Social Care Act 2012) to provide NHS England with the views and experiences of people who used health and social care services. Healthwatch England was the conduit for conveying the local/borough level engagement and consultation activity, undertaken by borough Healthwatch organisations.

The Health and Social Care reforms (2012) also confirmed the ambition of putting people at the centre of health and social care. To help realise that ambition, the reforms created a local Healthwatch in every local authority area across England. Since this date, Bromley Council had commissioned, via a competitive tender, Healthwatch providers. The current provider was 'Your Voice in Health and Social Care'. Local Healthwatch were also regulated in accordance with 'The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012'. The regulations required that local Healthwatch were both independent and impartial (despite being commissioned by the Local Authority).

The Head of Community Commissioning informed Members that the provider was doing a very good job in relation to delivery of the key performance indicators (KPIs) and positive feedback was also received from service users.

In response to a question, the Head of Community Commissioning advised that Healthwatch Bromley had a consistent group of volunteers – they had 12 volunteers which were believed to create around £10k worth of cost avoidance savings. In addition to this their Governing Body also consisted of volunteers, and they provided internships – as the organisation operated across London they had a good recruitment campaign.

RESOLVED that the Portfolio Holder for Adult Care and Health, in agreement with the Chief Officer, Director of Corporate Services, Assistant Director of Governance & Contracts and the Director of Finance be recommended to approve the Formal Contract Extension, resulting in the continuation of the contract with 'Your Voice in Health and Social Care' until 31st March 2027. The estimated value of the three-year extension is £245k.

B GATEWAY REPORT - EXTENDING THE SERVICE CONTRACT FOR CO-OCCURRING CONDITIONS OF MENTAL HEALTH AND SUBSTANCE MISUSE

Report ACH23-040

The Committee considered a report seeking approval to extend the existing service contract for co-occurring conditions of mental health and substance misuse for a further two years from 1st April 2024 to 30th March 2026. The total value for the 2-year extension was £259,679.

On 13th January 2021, the Executive approved the recommendation in report ACH20-088 that the direct award of contract, via an exemption from tendering, be granted to Oxleas NHS Foundation Trust (Oxleas) for delivery of the service for co-occurring mental health and alcohol/drug use conditions (COMHAD). The contract was for 3 years from 1st April 2021 (with the option to extend for up to a further two years) at an annual value of £87,000 (average) and a whole life value of £432,000. Approval from Chief Officers to vary the current contract for 6 months from 1st October 2023 was given to

ensure adequate capacity and the appropriate clinical skills and autonomy required was available to support those with co-occurring needs.

In response to questions, the Assistant Director of Public Health advised that this was a very small service with just 2 full-time equivalent members of staff – there was a limited number of specialist services in the market and therefore it was a benefit if the department continued to work with Oxleas. Between the services they were able to co-manage patients very well, without any push back. It was noted that they had previously looked to go out to tender, however there were no other providers that had been interested in delivering the contract.

A Member highlighted that this was a very specialist area and Oxleas had been providing a good service. There was a cost associated with the 2-year extension, however this could be met through the Public Health grant. It was anticipated that demand in this area would increase, and the proposal was supported.

RESOLVED that the Portfolio Holder for Adult Care and Health be recommended to approve the contract extension for two years from 1st April 2024 to 30th March 2026 with a total contract value of £259,679.

C BUDGET MONITORING 2023/24 Q1

Report FSD23047

The Committee considered a report providing the budget monitoring position for 2023/24 for the Adult Care and Health Portfolio, based on activity up to the end of July 2023.

The Head of Finance for Adults, Health and Housing advised that there were significant pressures, particularly across packages and placements budgets, including hospital discharge. It was noted that this could be mitigated by monies received from the Market Sustainability and Improvement Fund and discharge funding. At this early stage in the financial year an overspend of £450k was currently projected.

In response to questions regarding the Learning Disabilities (LD) underspend, the Head of Finance for Adults, Health and Housing said that this figure was based upon the current level of client numbers and costs. It was anticipated that the underspend would reduce as clients came into the service throughout the year. The Director of Adult Social Care advised that further growth was expected as young people transitioned into adulthood, however robust figures were not yet available. It was noted that this was an area of the budget where some growth had been built in. With regards to the LD/Autism Funding from the South East London ICB, the Director of Adult Social Care advised that a report would be presented later in the meeting – this referred to new money that had just been drawn down, but not yet spent.

In response to questions in relation to areas of overspend, the Director of Adult Social Care said that the budget was built based on the target number

of residential placements. As discussed at previous Committee meetings, the Local Authority was looking to reduce the reliance on residential care – the figures provided were below what had been expected which demonstrated success in not placing people into residential care. However, this came at a cost as those who were going into residential care had more complex needs and care homes were charging the Local Authority a higher rate. At the last meeting it had been highlighted that, following the Fair Cost of Care work, there was the expectation from providers that the Council would meet this, which was building pressure into the budget. With regards to domiciliary care, the overspend was related to both costs and activity. More people were being supported at home, specifically people discharged from hospital, which created a significant pressure on the social care budget as people had more complex needs. It was noted that the Local Authority had been looking to increase the number of people in receipt of direct payments over a number of years and the budget just needed to be realigned to reflect current activity.

RESOLVED that the Portfolio Holder for Adult Care and Health be recommended to:

- i.) Note the projected overspend of £450k on controllable expenditure based on information as at July 2023;
- ii.) Agree the release of amounts carried forward from 2022/23 as set out in section 3.5 of the report; and,
- iii.) Recommend that Executive agree the release of funds from the Central Contingency as set out in section 3.6 of the report.

26 PRE-DECISION SCRUTINY OF EXECUTIVE REPORTS

A SUBSTANCE MISUSE SERVICE CONTRACT AWARD (PART 1)

Report ACH23-033

The Committee considered a report seeking Executive approval for an award of contract for the Substance Misuse Service.

On 30th November 2022 (Report ACH22-037) the Executive agreed to proceed to procurement for the Bromley Substance Misuse Provider Service. The report provided details of the outcome of the tender process and recommended contract award.

RESOLVED that the Executive be recommended to:

i.) Approve the award of contract for the Bromley Substance Misuse Service to the Service Provider named in the Part Two Report, commencing 1st April 2024 for five years with an option to extend for up to a further three years at an estimated contract value as detailed in the Part Two report;

- ii.) Approve delegated authority to the Chief Officer, subject to agreement with the Portfolio Holder, the Assistant Director Governance & Contracts, the Director of Finance and Director of Corporate Services, to apply the three-year extension in due course;
- iii.) Approve delegated authority to the Chief Officer, subject to agreement with the Portfolio Holder and the Director of Finance, to draw down expected Supplemental Substance Misuse Treatment and Recovery (SSMTR) Grants and future potential Substance Misuse grants that may be allocated by the Office for Health Improvements and Disparities (OHID) during the life of the contract; and,
- iv.) Approve delegated authority to the Chief Officer, subject to agreement with the Portfolio Holder, the Assistant Director Governance & Contracts, the Director of Finance and Director of Corporate Services, to vary the Substance Misuse Provider Service contract as required to incorporate additional requirements linked to the allocation of the SSMTR grant and other future Substance Misuse grants that may be allocated.

B ADULT SOCIAL CARE STRATEGY

Report ACH23-012

The Committee considered a report seeking Executive approval of the Adult Social Care Strategy 2023-2028.

The Council had developed a new Adult Social Care Strategy for the period 2023 to 2028 to take account of developments across the social care market, changing government policy and wider technological, demographic and economic changes. The strategy considered the key challenges of increased service demand and rising costs pressures in relation to supporting vulnerable older residents and working age adults with a disability and/or a long-term health condition.

The Assistant Director for Integrated Commissioning advised that a draft of the strategy had been provided to the Adult Care and Health PDS Committee in March 2023. Further consultation had taken place over the summer and the key changes made to the document had been summarised in the report.

In response to questions, the Assistant Director for Integrated Commissioning advised that as the strategy consolidated and continued the work undertaken over the last three years, huge differences would not be seen. There had been a shift towards community-based services supporting more people to remain living at home and greater joint working with partners. The document communicated the offer being made to residents.

A Member suggested that the second bullet point within Priority 5 should separate digital inclusion and assistive technology as they were defined differently.

The Assistant Director for Integrated Commissioning confirmed that reporting in relation to the new service offer would be done through the Adult Care and Health Portfolio Plan. It was noted that the team were constantly trying to identify new providers that were willing to provide more respite care. A Coopted Member highlighted that there was a lack of information, advice and guidance available in relation to respite care. The Director of Adult Social Care advised that the team were working with the SCIE on improvements relating to how information was provided/communicated to those that wanted to help themselves. The Assistant Director for Integrated Commissioning said that part of the issue was that care homes were reluctant to provide respite care as they wanted longer term placements. A Member questioned how care homes were able to dictate which placements they accepted. The Assistant Director for Integrated Commissioning advised that most contracts were single contracts in relation to the person being placed in their care. There were some block contracts, but when a person was to be placed providers would also have to consider the needs of the others already in the care home. The Director of Adult Social Care said that Bromley had a complex market as just under 50% of care was paid for privately, and at a higher rate. This reduced the Local Authority's negotiating power as the care homes did not rely on them for business.

A Member questioned whether a model for the Local Authority to provide its own care homes had been considered. The Director of Adult Social Care said that this had previously been looked into – however the responsibility, buildings and expertise had been passed over and it would not be economically viable to rebuild these elements in-house. When this was considered 2-3 years ago the cost of the Council providing the care itself was found to be significantly higher than the costs at which they were able to purchase care. The Assistant Director for Integrated Commissioning noted that there was also a focus on helping and supporting people at home.

In response to a question from a Co-opted Member, the Assistant Director for Integrated Commissioning advised that most of the provision was contracted and therefore a specification would be provided. A procurement exercise would be undertaken, and providers would submit their proposals and references. A lot of information was gathered to provide a high level of confidence. The Director for Adult Social Care noted that feedback was also provided through Healthwatch Bromley and the Quality Checkers who spoke with service users about how services were operating.

RESOLVED that the Executive be recommended to approve the proposed Adult Social Care Strategy 2023 to 2028.

C ADDITIONAL LEARNING DISABILITIES FUNDING (SECTION 256 FUNDING ALLOCATION)

Report ACH23-037

The Committee considered a report seeking Executive approval for the transfer of non-recurrent funds being made via a Section 256 arrangement.

The South East London Integrated Care Board (ICB) had made available financial support to the London Borough of Bromley (LBB) to help provide the borough with funding to support services to adults and children with autism and to support admission avoidance and prevention into adult Assessment and Treatment Units or children's CAMHS in patient provision.

The Strategic Commissioner advised that an additional recommendation was proposed as follows:

iv.) Note that the final non-recurring sum transferred for the Community Discharge Grant Funding is £281,000.

In response to questions, the Strategic Commissioner advised that each provider was required to have an exit strategy, and it had been made very clear to them that these were time-limited projects. The all-age projects were for families and those over the age of 18 years – this covered the whole pathway, delivering preventative services, which were working very well.

With regards to a question in relation to the Travel Support Programme, the Strategic Commissioner said that some people may need support on just a couple of trips whist they acquainted themselves with a new workplace or activity before travelling independently – whereas others may need a lot more ongoing support. The project had been costed based on 42 people, however more individuals may ultimately benefit from this service. It was noted that funding for autism had to be used for people in the community and it had been agreed with providers that the LD team would be able to refer people into the services. It was noted that the funding would be put into the services identified to further enhance them.

RESOLVED that the Executive be recommended to:

- i.) Agree to receipt the funds from the Integrated Care Board under a Section 256 Agreement;
- ii.) Award contracts to the following organisations via an exemption from tendering:
 - 18 months contract with Bromley Mencap for an Autism Pathway Project at a total cost of £82,321
 - 12 months contract with Bromley Mencap for an All-Age Autism Specialist Welfare Benefit Service at a total cost of £58,769
 - 12 months contract with CASPA for a Travel Support Programme at a total cost of £40,000;

- iii.) Delegate to the Director of Adult Services, in consultation with the Portfolio Holder for Adult Care and Health Services, the Assistant Director Governance & Contracts, the Director of Finance and the Director of Corporate Services, authorisation to directly award the Community Discharge Grant funding; and,
- iv.) Note that the final non-recurring sum transferred for the Community Discharge Grant Funding is £281,000.

27 SOCIAL CARE INSTITUTE OF EXCELLENCE AND ASSISTIVE TECHNOLOGY UPDATE

Report ACH23-038

The Committee considered a report providing an update on the directorate's work with the Social Care Institute of Excellence (SCIE) and assistive technology (AI).

In May 2023, Adult Services commissioned the SCIE to complete an independent review and produce a forward plan outlining the key findings, improvement recommendations and a roadmap for delivery, focussing on the opportunities to make better use of digital solutions. The report provided the initial findings from the independent review and a progress update on the Al offer in Bromley.

The Vice-Chairman highlighted the bespoke training sessions that had been mentioned in the report and enquired if Members would be able to participate in these session, or have oversight of the tools being used. The Assistive Technology Lead said he would be very happy to deliver a bespoke training session for Members to demonstrate the products and discuss some case studies.

In response to a question from a Co-opted Member, the Assistive Technology Lead said that AI provided clinical oversight to undertake appropriate assessment looking at whether an individual's needs could be met and if there were any products that could be trialled. It also brought a sense of process and governance. It was noted that there was no charge for the initial assessment. The Programme Manager – Adult Social Care Reform informed Members that part of the work being undertaken with SCIE was to explore external funding opportunities which would be outlined in the strategy presented at a future Committee meeting. The Director of Adult Social Care advised that the Department of Health and Social Care (DHSC) already had a relationship with SCIE and were watching the progress made in Bromley – they were keen to provide support and roll out the work being undertaken in Bromley across other areas.

The Chairman highlighted that AI technology had been moving at speed since the pandemic. The Assistive Technology Lead agreed, and noted that with this came challenges as they needed to be mindful of ethics, consent,

intrusiveness of the devices and co-ordination of data across services. The pilot had been very successful, generating efficiencies, and going forward they would need to consider managing the digital switchover for residents. In response to a question from a Member, the Assistive Technology Lead said that there were various challenges, with boroughs working slightly differently. Bromley was unique in terms of its makeup, with lots of individuals not wanting, or needing, to access social care. They were able to provide support for self-care which could potentially prevent the need to access care for longer.

A Member advised that there was a focus across London to promote science to children and young people, and this work showed direct relevance. It was suggested that an article in relation to the AI work could be published in the Council's new magazine.

RESOLVED that:

- i.) the key themes and opportunities emerging from SCIE's independent review, the next steps and business case method, and expected benefits (Appendix 1) be noted; and,
- ii.) the progress, impact and outcomes associated with using Assistive Technology as part of Bromley's care and support offer (Appendix 2) be noted.

28 ADULT CARE AND HEALTH PDS INFORMATION BRIEFING

The Adult Care and Health PDS Information Briefing comprised 1 reports:

• Capital Programme Monitoring Q1

RESOLVED that the Information Briefing be noted.

29 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

30 PRE-DECISION SCRUTINY OF EXEMPT EXECUTIVE REPORTS

A SUBSTANCE MISUSE SERVICES CONTRACT AWARD (PART 2)

The Committee noted the Part 2 information within the report.

The Meeting ended at 8.11 pm

Chairman