

CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 7.00 pm on 13 October 2016

Present:

Councillor Judi Ellis (Chairman)
Councillor Pauline Tunnicliffe (Vice-Chairman)
Councillors Kevin Brooks, Mary Cooke, Hannah Gray,
David Jefferys, Catherine Rideout and
Charles Rideout QPM CVO

Linda Gabriel and Justine Godbeer

Also Present:

Councillor Robert Evans, Portfolio Holder for Care Services

29 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Councillor Ruth Bennett, Councillor Terry Nathan and Councillor Diane Smith. Apologies were also received from Rosalind Luff, Carers Forum and Lynn Sellwood, Voluntary Sector Strategic Network.

30 DECLARATIONS OF INTEREST

Councillor Judi Ellis declared that her daughter was employed by Oxleas NHS Foundation Trust

Councillor Kevin Brooks declared that he was employed by the Shaw Trust.

Councillor David Jefferys declared that he had been appointed a Public Governor of King's College Hospital NHS Foundation Trust to take effect from February 2017.

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

Three written questions were received from a member of the public and these are attached at Appendix A.

32 MINUTES OF THE CARE SERVICES PDS COMMITTEE MEETING HELD ON 13TH SEPTEMBER 2016

In respect of Minute 22: Ofsted Inspection of Children's Services, the Portfolio Holder reported that the report of the Commissioner for Children's Services in Bromley had been considered by the Secretary of State who had issued a statutory direction. This had confirmed that another Commissioner would be

appointed to monitor the progress made by the Local Authority in implementing the required improvements to children's services over the next six months, following which a further report would be provided to the Secretary of State.

RESOLVED that the minutes of the meeting held on 13th September 2016 be agreed.

33 MATTERS ARISING AND WORK PROGRAMME

Report CSD16136

The Committee considered its work programme for 2016/17, the schedule of visits to day centres and residential homes and matters arising from previous meetings.

In considering the work programme for 2016/17, the Chairman noted that a report on Shaw Trust/Scadbury Service Contract would be considered at the next meeting of Care Services PDS Committee on 15th November 2016.

RESOLVED that the Care Services work programme for 2016/17, the schedule of visits to day centres and residential homes and matters arising from previous meetings be noted.

HOLDING THE PORTFOLIO HOLDER AND EXECUTIVE TO ACCOUNT

34 PRE-DECISION SCRUTINY OF CARE SERVICES PORTFOLIO REPORTS

A CARE SERVICES PORTFOLIO PLAN PRIORITIES JUNE 2016-MAY 2017

Report CS17037

The Care Services Portfolio Holder introduced a report outlining the draft Portfolio Plan priorities for 2016/17 for Members' consideration.

The draft Care Services Portfolio Plan 2016/17 comprised six key priority outcomes that were in line with the Local Authority's "Building a Better Bromley" vision of creating an environment where people could lead healthier, more independent and self-reliant lifestyles, and to ensure the best possible future for the children and young people of Bromley, with a clear focus on supporting the most vulnerable. The six key priority outcomes were aligned to the national areas covering housing and adults and children's social care, and reflected the Government's outcome frameworks for these services and for the integration of local health and social care together with the requirements of adult social care services as defined by the Care Act 2014. The Portfolio Plan also took account of the Children's Service Improvement Action Plan, developed in partnership with a range of key agencies in response to the Ofsted Inspection of children's services and the Bromley Safeguarding

Children Board in Spring 2016, for which the Local Authority had received an overall judgement of 'Inadequate' and the Bromley Safeguarding Children Board was rated with a judgement of 'Requires Improvement'.

In considering the draft Portfolio Plan priorities, the Chairman underlined the need for progress in delivering actions relating to areas of children's services not included in the Children's Service Improvement Action Plan, as well as those for older people, adult safeguarding and health to be monitored robustly alongside the monitoring of the Children's Service Improvement Action Plan. A Member suggested that consideration be given to how scrutiny could best be undertaken, such as through a select committee model. The Chairman also noted the importance of the work of the Bromley Safeguarding Adults Board and the Bromley Safeguarding Children Board and requested that further details regarding the meetings of the Boards be provided to Members following the meeting. The Chairmen of both Boards would be invited to attend a future meeting of the Care Services PDS Committee to inform Members about the work being undertaken by the Boards.

A Member welcomed Priority Outcome 1 which was to work with health partners to focus on wellbeing and prevention to improve health outcomes for the residents of Bromley, and reported that the new Dementia Hub which offered a single point of access for information, advice and personalised support planning was now in place. The Member also requested that three performance measures relating to service users and carers marked as 'to be confirmed' be specified.

With regard to Priority Outcome 2, the Chairman was pleased to note the target to complete 100% of Child Protection reviews within timescale, and emphasised the need for the Local Authority to always seek to attain 100% when fulfilling its duty of care for vulnerable children. In relation to Action 2.2, the Chairman requested that a report on the action to be taken to address concerns relating to risks to sexually exploited children and young people and those that go missing be provided to the meeting of the Care Services PDS Committee on 10th January 2016. The Vice-Chairman raised concerns around children looked after going missing from educational establishments during the day and requested that clarification be supplied to foster carers around the point at which they should seek police intervention.

In response to a question from a Member around the role of the Children's Service Improvement Governance Board, the Portfolio Holder for Care Services confirmed that this was a multi-agency Board which had overseen the development of the Children's Service Improvement Action Plan. Initially chaired by the Leader of the Council whilst the plan was in development, an Independent Chairman had now been appointed and would lead the Board in monitoring progress in delivering the Action Plan. The Children's Service Improvement Governance Board had been established as a private committee whilst the Action Plan was in development, but it was hoped that the meetings would become public when appropriate, and legal advice would be sought on whether the minutes of the Governance Board could be shared with Members whilst it was still a private committee. Councillor Mary Cooke

underlined that the report of the Commissioner for Children's Services in Bromley had been critical of the scrutiny function of the Council and that there was a need for Members to have access to all available information to support strong scrutiny processes.

The Chairman noted that new legislation relating to children and young people was due to be announced in forthcoming months and requested that a report on how this would impact the Local Authority be provided to a joint meeting of the Care Services, Education and Public Protection and Safety PDS Committees in April 2017.

RESOLVED that the Portfolio Holder for Care Services be recommended to agree the Care Services Portfolio Plan 2016/17.

B PUBLIC HEALTH COMMISSIONING INTENTIONS 2017/18

Report CS17046

The Care Services Portfolio Holder introduced a report setting out the Public Health commissioning intentions for the delivery of the Substance Misuse Service, NHS Health Checks and Community Sexual Health Service for 2017/18 which were funded by the Public Health grant.

The proposed commissioning arrangements relating to the Substance Misuse Service included the components on Adults and Young People Substance Misuse Services, Supervised Administration of Methadone, and Needle Exchange Service. Adults and Young People Substance Misuse Services had been subject to a tendering process in 2015 following which new contracts worth £1.4m per annum were awarded to Change Grow Live for a period of two years from 1st December 2015 to 30th November 2017 with a possible one year extension, and as the provider continued to meet performance requirements and deliver efficiencies, it was proposed to extend this contract for a further year to 30th November 2018. Both Supervised Administration of Methadone (SAM) and Needle Exchange Services were procured through the Public Health Framework Agreement and were delivered by Community Pharmacies at locations which were easily accessible in the community and where services could be offered safely and securely with the opportunity to promote healthy living and wellbeing. As there was no other clinical provider who could cover such a wide geographical area, the proposal was to continue with these arrangements by extending the Community Pharmacy call-off contracts for these services for a further year to 31st March 2018 at a cost of £29k per annum for SAM and £15k per annum for the Needle Exchange.

The NHS Health Checks Programme was a mandated Public Health Programme with the aim of preventing vascular diseases including heart disease and diabetes and raising awareness of dementia. Eligible patients were identified through GP registers, with GP practices the main provider of NHS Health Checks, and the model of delivery was through a 'one stop shop' with Point of Care Testing used to allow the patient to receive a complete

check at the time of their assessment. Alere was commissioned through the Public Health Framework Agreement to provide the equipment, consumables and training for Point of Care Testing, as well as a quality management service to ensure the accuracy of results. As there was a very limited number of providers of this service and Alere was the only provider that had applied to be appointed to the Public Health Framework Services Framework and continued to make improvements to maintain service quality, it was proposed to extend the Alere contract for a further year to 31st March 2018 at a cost of £100k per annum and to continue the use of GP Service Level Agreements.

A range of providers were commissioned through the Public Health Framework Agreement to deliver sexual health services in the community. Community Pharmacies offered Chlamydia screening and treatment and Emergency Hormonal Contraception for young people at accessible locations where services could be offered in a discreet and confidential manner. The Doctor Laboratory provided a free self-sampling postal laboratory service for chlamydia and other STI screening that linked directly with an internet ordering facility with tests processed within set timescales. These services would be re-procured as part of the Sexual Health Early Intervention Services and as The Doctor Laboratory continued to deliver a high quality service and value for money by offering dual testing of chlamydia and gonorrhoea at no extra cost and at a competitive rate to those paid by other local authorities, and there was no other clinical provider of these services that could cover such a wide geographical area, it was proposed that these services be extended for a further six months to 30th September 2017 at a total contract value of £13k for Community Pharmacies and £35k for The Doctor Laboratory to align with other services tendered to start on 1st October 2017.

It was proposed that a continuing exemption from the Council's contract procedure rules be granted for a further year to support the continuation of the delivery of NHS Health Checks and Sexual Health Service via a Service Level Agreement with General Practices which had been identified as being able to offer significantly more checks than previous providers and value for money, as well as covering a wide geographical area at a total contract value of £550k. Following a reduction in the number of services called off the Public Health Framework and their values since 2014, it was also proposed that the Framework Agreement which was due to end on 2nd March 2018 be reviewed by Commissioners and that recommendations be made around commissioning services that were still actively called off the Framework.

RESOLVED that the Council's Executive be recommended to:

- 1) Note the intention to extend the current contract for Adults and Young People Substance Misuse Services for one year to 30th November 2018, and that approval for this extension had been delegated to, and was to be agreed by, the Director of Public Health in consultation with the Portfolio Holder for Care Services;**
- 2) Approve one-year call-off contracts (1st April 2017 to 31st March 2018) currently under the Public Health Framework Agreement for:**

- **Community Pharmacy Services for Substance Misuse; and,**
 - **Alere (Point of Care Testing) for NHS Health Checks.**
- 3) **Approve six month call-off contracts (1st April 2017 to 30th September 2017) currently under the Public Health Framework Agreement for:**
- **Community Pharmacy for Sexual Health Service; and,**
 - **TDL (The Doctor Laboratory) for Sexual Health testing and diagnostic service.**

So they align with the new Services currently tendered to start on 1st October 2017;

- 4) **Approve the continued use of Service Level Agreements for NHS Health Checks and Sexual Health Services offered by General Practitioners for a further year by granting an exemption as per sections 3 and 13 of the Council's contractual procedure rules; and,**
- 5) **Note the intention to continue to use the commissioning arrangements with Bromley Clinical Commissioning Group through section 75 for provision of community services by Bromley Healthcare until 30th September 2017 when the contract would expire.**

C ADVOCACY GATEWAY REVIEW

Report CS17040

The Care Services Portfolio Holder introduced a report reviewing the current provision of Advocacy services and recommending a future procurement strategy.

Advocacy services supported people's abilities to express their own views and wishes or for their interests to be represented in a variety of contexts, as well as to advance the social inclusion and independent of individuals through peer groups, meetings and workshops. The Local Authority had a range of statutory duties in regards to the provision of advocacy services which had historically been commissioned separately for specific client groups, causing duplication of some support as well as confusion for service users with complex support needs. There were currently eight active contracts with four suppliers to deliver this provision across the sub-categories of mental health, learning disabilities, general advocacy and children's advocacy with a total annual spend of £308,645. It was proposed that these contracts be extended to a joint expiry of 31st March 2018 in order to allow for the procurement of a single provider of Advocacy services from 1st April 2018.

In response to a question from a Co-opted Member, the Programme Manager – Commissioning confirmed that the move to a single provider of Advocacy

services would reduce the costs associated with commissioning multiple contracts, and that providers would be encouraged to submit joint bids which would enable specialist skills to be retained and for efficiencies to be realised around training and back office costs. An Equality Impact Assessment would be undertaken if appropriate and a wide range of stakeholders, including service users would be involved as part of the commissioning process.

RESOLVED that the Council's Executive be recommended to:

- 1) Extend the existing Advocacy contracts including Mental Health, Children's, Learning Disability and NHS Complaints Advocacy to 31st March 2018 as set out in para 3.8 to Report CS17040; and,**
- 2) Agree that Commissioners undertake a procurement exercise to commission all Advocacy provision through one provider with a contract term of 3 years starting 1st April 2018 with the option of 1 year + 1 year extensions.**

D GATE REPORT - NEW FRAMEWORK AGREEMENT FOR THE PROVISION OF ESSENTIAL HOUSEHOLD GOODS

Report CS17039

The Care Services Portfolio Holder introduced a report setting out the reasons for establishing a new Framework Agreement for the provision of essential household items needed to meet the basic requirements of homeless people leaving temporary accommodation and moving into settled accommodation.

The Welfare Reform Act 2012 ended the provision of Community Care Grants and Crisis Loans under the Discretionary Social Fund for living expenses provided by the Department for Work and Pensions with funding transferred to local authorities from 1st April 2013. Whilst there was no statutory duty requiring local authorities to deliver a specific scheme to administer this funding, the Local Authority considered it was in the best interests of the community to run such a scheme, and in July 2014 the Resources Portfolio Holder approved the adoption of a white goods and furniture welfare scheme from 2015/16. It was agreed that the scheme would be restricted both in terms of eligibility criteria and goods available (such as cookers, fridges and beds) which had been identified as the minimum items required for the Local Authority to meet its statutory duty to provide suitable settled accommodation for statutory homeless households, such as for people leaving temporary accommodation or an institution.

A Framework Agreement consisting of three lots comprising the supply and fit of specified white goods, beds and household goods had been tendered in early 2015 following which three companies had been appointed to the Framework. The services purchased through the Framework had been generally satisfactory, excepting problems with one provider regarding the health and safety of gas cooker installation that had now been rectified but which had highlighted the risk of having so few providers on the Framework.

It was therefore proposed to establish a new Framework Agreement from 1st April 2017 to allow for a significant increase in providers to be appointed to the Framework, reflecting changes in the market and supporting increased competition. It was proposed that the Children's Leaving Care Team be given access to the Framework to purchase essential household goods for care leavers to realise value for money and reduce delays in moving care leavers into independent living.

In response to a question from the Chairman, the Assistant Director: Housing Needs confirmed that there were sufficient funds remaining in the Discretionary Social Fund to support this scheme for four years, after which Members would need to consider if there was a business case to continue to fund this non-statutory service. Members requested that usage of this service be monitored, particularly relating to the number of service users assisted and those signposted to other services, and any cost savings realised by reducing delays in moving service users into permanent accommodation.

RESOLVED that the Portfolio Holder for Care Services be recommended to agree to proceed to procurement to establish a new Framework Agreement for the provision of essential household goods to commence on 1st April 2017 to 31st March 2021 for a period of four years.

E GATE REPORT FOR THE PROVISION OF STATUTORY HOMELESSNESS REVIEWS

Report CS17045

The Care Services Portfolio Holder introduced a report outlining the findings of a Gate report for the provision of statutory homelessness reviews.

Under the provisions of Housing Act 1996, homeless households had a statutory right to a review of decisions made by the Local Authority in respect of eligibility for assistance with housing and decisions relating to the suitability of accommodation offered to them in discharge of the duty owed. The process for conducting such reviews was set out in the legislation under S202 Part VII of the Housing Act 1996 and required that reviews were conducted by someone independent of the original decision and senior in terms of rank or grade to the officer who made or authorised the original decision, and must be completed within set timeframes, usually 56 working days from receipt of the request for a review.

Since 2011, a proportion of review investigations for Bromley had been undertaken by external independent reviewers in order to deliver sufficient capacity for the increasing volume of reviews to be completed within statutory timescales. The current provider had been identified after a price and quality comparison with other possible providers and in discussion with other local authorities. Future service delivery options considered included continuing to contract out the reviews or for the Local Authority to employ a specialist housing review officer on a senior grade. Many local authorities kept an in-house service for the majority of statutory homelessness reviews, but this was

not considered to be the best option in terms of value for money or in responding to the varying workload. It was proposed to continue to provide statutory homelessness reviews as a contracted service as this allowed the Local Authority to pay solely for the work undertaken and was estimated to realise significant savings compared to an equivalent in-house service.

In response to a question from a Member, the Assistant Director: Housing Needs confirmed that the work of external independent reviewers was monitored through a range of performance measures and that these would be included in the annual quality monitoring report. The Member underlined the need to particularly monitor the quality aspects of this work, such as through benchmarking with other local authorities. The Chairman noted the importance of communication during the review process and suggested an automated e-mail message be used to provide an immediate response to queries and reduce multiple contacts. Copies of the information supplied to clients during the review process would be provided to Members following the meeting.

RESOLVED that the Council's Executive be recommended to:

- 1) Confirm the current arrangements for contracting out homelessness reviews until the new contract begins;**
- 2) Contract out the statutory reviews function under the terms set out in Report CS17045;**
- 3) Tender the external homelessness reviews contract for a period of three years with an option to extend for a further two year period; and,**
- 4) Delegate agreement to extend the current contract, if required, to the Portfolio Holder for Care Services for a period of up three months until the start of the new contract to enable handover and completion of any existing reviews under the current contract.**

F RELOCATION OF OXLEAS LD SERVICE (WITHDRAWN)

This item was withdrawn from consideration as the current position on the Oxleas relocation of LD Services was not clear and an update was awaited from Oxleas NHS Foundation Trust.

G COMMISSIONING INTENTIONS FOR THE GUM SERVICE

Report CS17051

The Care Services Portfolio Holder introduced a report setting out the Public Health intentions for the provision of Genito-urinary Medicine (GUM) Service for 2017/18.

The Local Authority had a statutory duty to provide open access sexual health services, by which services should be available to anyone requiring treatment without referral. The Sexual Health Commissioner had pursued a collaborative commissioning approach for GUM services with other London Boroughs to achieve lower unit prices and marginal rates. This arrangement was supported by the Collaboration Agreement between various local authorities across London to provide GUM services, which set out the roles and responsibilities of each borough, including financial organisations. Under the Collaboration Agreement, Lead Boroughs were nominated to enter into annual contracts with providers to deliver services to all participating authorities within the region. Bromley's actual spend in 2015/16 on GUM at tariffs negotiated by the London Collaborative had been £1,524k in London with a total spend of £1,578k including services outside of London. This reflected a saving of over £60k compared to the previous year, despite an overall 4.5% growth in activities.

The continued growth of activities had led to further collaboration amongst London commissioners to contain escalating costs. The London Sexual Health Transformation Programme was set up to reduce costs for sexual health care across London, specifically GUM services through innovation, service redesign, demand management and pricing strategy. This included work on a new set of prices for London known as the London Integrated Sexual Health Tariffs that reflected the interventions provided by GUM and the Contraceptive Services more accurately than attendance-based tariffs and was expected to achieve significant cost savings across London. There was broad agreement across London that Integrated Sexual Health Tariffs would be the payment mechanism for sexual health services from 1st April 2017. Locally, arrangements were in place to shadow Integrated Sexual Health Tariffs during 2016/17 to understand the direct impact of implementation and extent of savings that could realistically be achieved. Further discussions with commissioners were required to determine how implementation could effectively take place due to different contractual arrangements both within the region and across London, and it was therefore proposed to implement Integrated Sexual Health Tariffs on a phased approach starting from 2017/18.

Given the need for continued collaboration across London and the level of change required, it had also been agreed by the London Sexual Health Transformation Programme that transformation would be more effective and responsive implemented at sub-regional level. Bromley was part of the South East London region and shared the same GUM providers as the London Boroughs of Lewisham, Southwark and Lambeth, of which Lambeth was the Lead Authority and had negotiated tariffs and entered into contracts with King's College Hospital NHS Foundation Trust and Guy's and St Thomas' NHS Foundation Trust under the London collaborative arrangement. Significant innovation had already taken place in the South East London region over recent years, with a major drive of clinical and cost effective interventions that promoted self-management, including online provision of sexual health services. The plan for the region was to upscale online self-sampling (testing) service for Sexually Transmitted Infections which continued to rise, and divert testing for those patients showing no symptoms of

infections to community access points. This new model was being piloted by King's College Hospital NHS Foundation Trust and Guy's and St Thomas' NHS Foundation Trust, with the final model expected to be in place by April 2017. It was proposed that Lambeth would negotiate an arrangement to secure new GUM provisions from these providers from April 2017 with the direct involvement of all four boroughs, and that a Memorandum of Understanding to support the collaborative management of these contracts be established between Lambeth and Bromley.

Samples of the testing kits provided through the online self-sampling service were shown to Members who were advised that the kits were posted in plain packaging and that online videos were available to support users with the testing process. In response to a question from a Member, the Assistant Director: Public Health confirmed that the potential to establish a 'click and collect' style service for the kits from community pharmacies was being considered and that this would provide opportunities for direct advice to be given on preventative measures.

RESOLVED that the Council's Executive be recommended to:

- 1) Note the benefits of the London-wide Collaborative arrangement and approve the continuation of this arrangement to provide open access Genito-urinary Medicine (GUM) service in London for Bromley residents, estimated to cost £1,609k per year;**
- 2) Approve the phased approach to implementing the London Sexual Health Integrated Tariffs starting from 2017/18; and,**
- 3) Approve the South East London arrangement to secure the provisions of new GUM services from Kings College Hospital NHS Foundation Trust and Guy's and St. Thomas' NHS Foundation Trust for Bromley residents from 1st April 2017 and to authorise the Sexual Health Commissioner to enter into a Memorandum of Understanding with the London Borough of Lambeth to enable the London Borough of Bromley to access the arrangement.**

35 POLICY DEVELOPMENT AND OTHER ITEMS

A PUBLIC HEALTH PROGRAMMES UPDATE 2016

Report CS17038

The Committee considered a report providing an update on the contractual arrangements and provider performance of Public Health commissioned services in 2015/16.

In considering the report, a Member queried the contract value of the Family Nurse Partnership and requested more information on the support offered. A detailed breakdown of costs and the support provided, including how the

service worked with other early intervention services such as Children's Centres would be provided to Members following the meeting.

RESOLVED that the activity and performance of Public Health programmes during 2015/16 be noted.

36 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The Care Services PDS Information Briefing comprised one report:

- Bromley Safeguarding Adults Annual Report 2015/16

RESOLVED that the Information Briefing be noted.

37 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.

38 EXEMPT MINUTES OF THE CARE SERVICES PDS COMMITTEE MEETING HELD ON 13TH SEPTEMBER 2016

RESOLVED that the exempt minutes of the Care Services PDS Committee meeting held on 13th September 2016 be agreed.

39 PRE-DECISION SCRUTINY OF PART 2 (EXEMPT) CARE SERVICES PORTFOLIO REPORTS

A UPDATE ON PROCUREMENT STRATEGY FOR DOMICILIARY CARE SERVICES

The Committee considered the report and supported the recommendations.

The Chairman requested that it be noted in the Part 1 (Public) minutes that the Local Authority commissioned 30, 45 and 60 minute Domiciliary Care visits, and that 15 minute visits were not commissioned for any reason. Service users with personal budgets could choose to fund 15 minute visits if it met their individual care needs.

The Meeting ended at 8.12 pm

Chairman