

## **CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE**

Minutes of the meeting held at 7.00 pm on 9 October 2017

### **Present:**

Councillor Mary Cooke (Chairman)  
Councillor Pauline Tunnicliffe (Vice-Chairman)  
Councillors Ruth Bennett, Judi Ellis, Robert Evans,  
Will Harmer and Charles Rideout QPM CVO

Linda Gabriel

### **Also Present:**

Councillor Diane Smith, Portfolio Holder for Care Services (including Public Health)  
Councillor Angela Page, Executive Support Assistant to the Portfolio Holder for Care Services  
Councillor Keith Onslow

#### **40 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS**

Apologies for absence were received from Councillor David Jefferys and Councillor Terry Nathan.

Apologies for absence were also received from Justine Godbeer, Rosalind Luff and Lynn Sellwood.

The Chairman led the Committee in welcoming Naheed Chaudhry, Assistant Director: Strategic Business Support (ECHS) who had recently joined the Local Authority.

#### **41 DECLARATIONS OF INTEREST**

Councillor Robert Evans declared that he was a Member of the Council of Governors for King's College Hospital NHS Foundation Trust.

#### **42 UPDATE FROM THE DEPUTY CHIEF EXECUTIVE AND EXECUTIVE DIRECTOR: EDUCATION, CARE AND HEALTH SERVICE**

The Deputy Chief Executive and Executive Director: Education, Care and Health Services gave an update to Members on work being undertaken across the Education, Care and Health Services Department.

In response to a question from the Chairman regarding the proposals for the use of the Improved Better Care Fund, the Deputy Chief Executive confirmed that the principles for the use of the Improved Better Care Fund had been agreed by Health and Wellbeing Board, but that the agreement of the Council's Executive was required to drawdown the necessary funds. The Local Authority had also worked closely with the Bromley Clinical Commissioning Group to jointly develop the proposed Discharge to Assess pilot scheme.

**RESOLVED that the update be noted.**

**43 HOLDING THE PORTFOLIO HOLDER AND EXECUTIVE TO ACCOUNT**

**44 PRE-DECISION SCRUTINY OF EXECUTIVE REPORTS**

**A IMPROVED BETTER CARE FUND**

**Report CS18065**

The Committee considered an update on the Improved Better Care Fund (IBCF) summarising the national conditions for the use of the Improved Better Care Fund and making recommendations for the proposed use of the grant.

The Improved Better Care Fund was a time-limited grant provided to local authorities for investment in adult social care services including meeting current and future adult social care needs, ensuring that the local social care provider market was supported and reducing pressures on the NHS such as through timely discharge from hospital. In the Spring Budget 2017 the London Borough of Bromley was awarded an IBCF Grant of £4.2M in 2017/18, with additional grant funding of £3.4M and £1.7M to be provided in 2018/19 and 2019/20 respectively. A condition of the Improved Better Care Fund allowed this grant to be spent in advance of final NHS England approval of the Bromley Better Care Fund Plan following agreement of any spending plans by health and wellbeing partners. It was proposed that the Council's Executive agree that the IBCF grant for 2017/18 be utilised to stabilise and reduce pressures on the health and social care market, as well as provide opportunities for 'invest to save' projects across adult social care in the short to medium term.

The Interim Director of Programmes advised Members that the proposed investment of £100k to commission a specialist to carry out research into the housing and care needs of older people in Bromley to inform future commissioning and service strategies would partly be used to fund detailed research work into the housing needs of all Bromley residents, including a potential project to encourage existing tenants to release social housing where it was no longer required.

In considering the report the Chairman raised a concern that any recurring spending plans were based on the assumption that the Improved Better Care

Fund would continue to be available and that contingency planning would be needed if this was not the case. A Member also noted the proposed use of the Improved Better Care Fund for workforce development and queried whether this was too distant from the service user. The Interim Director of Programmes confirmed that there was a need to add workforce capacity to adult social care in the short term to review the social care pathway and enable a more efficient and seamless service to be delivered into the future.

In general discussion, Members were concerned at the proposed investment of £250k in the Care Homes Investment Options Appraisal. The Interim Director of Programmes reported that the Local Authority was facing increasing difficulty in securing local nursing home placements due to competition from self-funders and other local authorities. To address this it was proposed to explore the potential for the Local Authority to purchase but not manage a care home with full nomination rights on the placements by instructing the Local Authority's property surveyors to undertake a two-phased options appraisal on the purchase of suitable accommodation. This would comprise an initial high level options appraisal of available sites, which was not expected to be costly, followed by a full feasibility study on any preferred options which would identify capital investment opportunities for the Local Authority and be funded from within the agreed full-cost envelope of £250k. In considering this proposal, a Member emphasised the need for the Local Authority to review the level at which it funded care home placements as it was not financially viable for many care homes to accept Local Authority-funded service users. The Member also highlighted the unacceptable backlog in assessment for additional social care packages, and the Deputy Chief Executive noted that the proposed investment in workforce capacity in this area would allow the existing backlog to be cleared and processes to be reviewed across the four assessing organisations to ensure the assessment and property adaptation procedure was efficient and sustainable.

With regard to the proposal to invest £40k in a Direct Payments Lead Officer, the Director: Adult Social Care advised Members that there had been a low take-up of Direct Payments in Bromley due to the difficulties service users faced in managing their own care packages and a lack of choice within the local care market. The Direct Payments Lead Officer would drive forward the whole system response for Direct Payments which was expected to increase the uptake of Direct Payments by service users, enabling them greater choice and independent in managing their care as well as supporting the development of the local care market.

A Member was concerned at a proposal to invest £200k in a market development and support initiative. The Deputy Chief Executive outlined the aim of the proposed investment which was to improve the sustainability and performance of Bromley care homes, assist in staff training and provide emergency care funding for those providers in danger of failing financially, and that this would drive a general improvement in care home provision across Bromley as well as enabling the Local Authority to meet its obligations in terms of safeguarding vulnerable service users. It was also important for the Local Authority to understand the local care market in terms of existing

provision and current and future levels of need to ensure high quality social care was in place for Bromley residents.

The Vice-Chairman underlined the need to recruit and retain high quality adult social workers.

**RESOLVED that the Council's Executive be recommended to:**

- 1) Note the value of this IBCF grant in paragraph 3.3 and the conditions relating to the IBCF grant as identified in paragraph 3.2 of Report CS18065;**
- 2) Approve the principles of the areas identified for investment in adult social care as set out in section 4 of Report CS18065;**
- 3) Grant delegated authority to the Deputy Chief Executive and Executive Director for Education, Care and Health Services and the Portfolio Holder for Care Services (including Public Health) to draw down the value of the IBCF Grant for 2017/18 (£4.184m) and to determine detailed expenditure plans for the IBCF Grant proposals within the framework described within this report;**
- 4) Subject to the agreement above, the recurring costs of £1.7m in 2018/19 and £1.6m in 2019/20 identified in paragraph 8.2 of Report CS18065 be agreed; and,**
- 5) Request that a regular progress report on the impact of the investment of the Improved Better Care Fund be provided to Members.**

## **B INTEGRATED CARE NETWORKS UPDATE**

### **Report CS18067**

The Committee considered an update on the Integrated Care Networks (ICNs) which summarised the function and the impact of the Integrated Care Networks on adult social care and made recommendations relating to the Local Authority's future involvement in this initiative.

In October 2016, three Integrated Care Networks were established across Bromley with the aim of providing a Multi-Disciplinary Team (MDT) approach to ensure the most appropriate care and support was available to Bromley residents with complex care needs. Over 550 referrals had been made to the Integrated Care Networks during the first nine months of operation up to the end of June 2017 with an average service user age of 82 years. The Integrated Care Network Alliance Agreement initially consisted of six signatories to a Memorandum of Understanding that set out the objectives of the Integrated Care Networks, expected deliverables and the operational framework for the partners to work together. The six signatories comprised Bromley Healthcare, Oxleas NHS Foundation Trust, King's College Hospitals

NHS Foundation Trust, Bromley GP Alliance, St Christopher's Hospice and Bromley Third Sector Enterprise. The Local Authority had not signed up to the Memorandum of Understanding at that time, but participated in Multi-Disciplinary Team discussions where there was a service user who received or might require social care support. It was proposed that the Local Authority formally sign and join the Integrated Care Networks Alliance Agreement and that a number of drawdown requests be agreed to meet the costs of additional care packages and resource the Local Authority's involvement in the Integrated Care Networks.

The Head of Programme Design (Commissioning) reported that due to limitations on data sharing the Local Authority did not have the NHS numbers of 42% of service users referred to the Integrated Care Networks as at end of June 2017 which had limited its ability to track service users. A detailed data sharing agreement and robust data collection measures were in now in place and NHS numbers were registered for 90% of service users being referred to the Integrated Care Network.

In considering the report, a Member was concerned at the possible increase in the cost of adult social care packages as a result of referrals by the Integrated Care Networks, as the Improved Better Care Fund was resourced for a limited three year period after which the Local Authority would have to fund any additional costs. The Head of Programme Design (Commissioning) advised Members that the three year funding period would provide an opportunity to consider how costs in this area could be managed sustainably. As the Integrated Care Networks had already been established within the Borough, it was advisable for the Local Authority to be represented by a Senior Social Worker at Multi-Disciplinary Team discussions to ensure that social care referrals and packages were appropriate and reflected the level of need, as well as ensuring that the coordination of care continued to have a multi-agency focus. The use of early intervention was also expected to reduce escalation of care needs and support service users to remain independent for longer.

**RESOLVED that the Council's Executive be recommended to:**

- 1) Approve the Council formerly signing and joining the Integrated Care Network Alliance Agreement as set out in Paragraph 4.8 to Report CS18067;**
- 2) Agree to the in-year drawdown of £365k from the Improved Better Care Fund, increasing to £629k in a full year for the next 3 years, as a result of additional care packages costs as set out in para 6.1-6.7 to Report CS18067; and,**
- 3) Agree the drawdown of £150k per annum from the Improved Better Care Fund for 3 years to resource the Council's involvement in the Integrated Care Networks.**

## **C DISCHARGE TO ASSESS (D2A) PILOT**

### **Report CS18068**

The Committee considered a report seeking the approval of the Council's Executive to establish a pilot scheme implementing the Discharge to Assess model within Bromley Adult Social Care, utilising £818k from the Better Care Fund.

Successfully tested by a number of recent national pilot schemes, the Discharge to Assess model supported people to leave hospital as soon as they were medically ready to be assessed for their long term care and support needs. The assessment process took place outside of hospitals in a more familiar, community-based setting, and was focused on enabling people to return home wherever possible and reducing the amount of time people remained in a hospital bed unnecessarily which could lead to a decline in their levels of functioning, independence and wellbeing as well as having a significant cost implication. It was proposed that a Discharge to Assess pilot scheme be implemented in Bromley to provide a temporary, community-based joint team of health and social care officers to support prompt hospital discharge and deliver a multidisciplinary enablement and assessment function alongside the existing hospital-based Care Management Team, with a view to establishing a permanent local Discharge to Assess model should the pilot scheme be successful. The proposed pilot scheme would test three pathways comprising returning home, an interim placement at a 'step-down' facility and a long-term nursing home placement depending on people's care and support needs.

In considering how the scheme would operate, the Head of Discharge Commissioning reported that it was planned to establish the community-based joint team whilst working to transform existing hospital-based discharge and assessment processes. Hospital staff would continue to be closely involved in the discharge of patients, and this would be supported by a 'patient passport' providing details of service user's hospital treatment from the point of pre-admission that could be carried through their hospital stay and into the discharge and assessment process. Service users would be supported to understand the potential costs of their longer term support needs at the point of discharge from hospital. Existing staff had expressed a high level of interest in the innovative Discharge to Assess pilot scheme and it was not envisioned that there would be any difficulty with recruitment. A Member underlined the need to ensure sufficient capacity for the 'step-down' pathway and the Head of Discharge Commissioning confirmed that sufficient resources had been built into the pilot scheme to enable spot-purchasing of step-down beds.

A Member queried the impact of not implementing the Discharge to Assess model. The Head of Discharge Commissioning advised that sign-off of the Improved Better Care Fund was dependent on clear plans to implement the 'High Impact Change' model, and that failure to achieve the Discharge to Assess target set by NHS England could result in a financial penalty applied

against the Improved Better Care Fund allocation. The Director: Adult Social Care noted that there was also a risk to the Local Authority in relation to fines for delayed transfer of care attributable to social care and that if this fine had been levied by the Princess Royal University Hospital for 2016/17, the Local Authority would have been liable for a £653k penalty charge.

A Member was pleased to note that best practice from other local authorities had been utilised in developing the pilot scheme.

**RESOLVED that the Council's Executive be recommended to:**

- 1) Agree the drawdown of £818k from the Better Care Fund to support the implementation of a Discharge to Assess pilot in adult social care; and,**
- 2) Note that an evaluation of the Discharge to Access pilot will be reported back to Members in May 2018.**

The Meeting ended at 8.28 pm

Chairman