

## **ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE**

Minutes of the meeting held at 7.00 pm on 17 September 2019

### **Present:**

Councillor Mary Cooke (Chairman)  
Councillor Robert Mcilveen (Vice-Chairman)  
Councillors Gareth Allatt, Judi Ellis, Robert Evans,  
Christine Harris, Simon Jeal, David Jefferys and  
Angela Wilkins

Roger Chant and Lynn Sellwood

### **Also Present:**

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

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

Apologies for absence were received from Councillor Keith Onslow and Councillor Christine Harris attended as substitute. Apologies were also received from Justine Jones.

### **17 DECLARATIONS OF INTEREST**

Councillor Wilkins declared that she had a part-time contract with Hestia.

### **18 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING**

No questions had been received.

### **19 MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 25 JUNE 2019**

The minutes of the meeting held on 25<sup>th</sup> June 2019, were agreed and signed as a correct records.

### **20 WORK PROGRAMME AND MATTERS ARISING Report CSD19129**

The Committee considered a report setting out the forward work programme and matters outstanding from previous meetings.

The Chairman reported that work on securing a Co-opted Member to represent the mental health sector was progressing. Experts by Experience had recently established a Mental Health forum and once arrangements were firmly in place and when a Chairman had been elected efforts would be made to secure a nomination to the PDS Committee.

In response to a question from a Member concerning the action being taken in respect of inviting providers of high value contracts to the meeting, the Director of Adult Social Care explained that progress on this action had slowed as a result of the vacancy in the Director of Programmes position. The Department had been receiving some support from Corporate Procurement and the Director of Adult Social Care had been working with the Assistant Director for Governance and Contracts to identify suitable providers to attend a meeting. In terms of service user feedback, the Assistant Director for Strategy, Performance and Engagement reported that when contracts were let efforts were made to ensure that appropriate feedback from Service Users was sought. This work now needed to be fully reflected in the reports that were presented to Members. A Co-opted Member noted that often Bromley Healthwatch provided a function for Service User engagement however, there were currently gaps in the interface between Bromley Healthwatch and the PDS Committee. Following a discussion it was recognised that Committee meetings were not an appropriate forum for Members to receive feedback from Service users due to the vulnerability of some of the Service Users. There were other mechanisms in place such as service user surveys whereby Members could review feedback received from Service Users. Members also requested that more detailed information concerning service user engagement through the commissioning process be reflected in reports presented to Members. The Committee agreed that an explanation be provided detailing how the methodology for the 60/40 price quality split was used. It was stressed that the Committee needed assurances that due consideration was given to quality.

Members noted that a paper had been circulated concerning the work being developed around the day centre market. The Director of Adult Social Care explained to the Committee that the majority of day centers across the Borough were now privately run and this limited the information that was available to the Council. Members noted that the Council did not receive information arising from the Day Care User Survey on a regular basis.

Turning to the Work Plan the Committee noted that the following items had to be scheduled:

- Portfolio Holder Update (scheduled throughout the municipal year)
- Annual report from Bromley Healthwatch

**RESOLVED: That the report be noted.**

## **21 VERBAL UPDATE FROM THE INTERIM DIRECTOR: ADULT SOCIAL CARE**

The Interim Director of Adult Social Care gave an update to Members on work being undertaken across the Adult Social Care Department focusing on the following reflections from her first 6-months in post:

- There are lots of very committed staff who want to make a difference,
- One of Bromley's strengths in that many of its staff are loyal having worked for the Council for a long time and are proud of the fact and proud of Bromley,
- There is a very strong sense of place and identity,
- There is a very strong relationship with CCG and good working relationships with other health partners, and
- Bromley had a strong voluntary sector

The Director of Adult Social Care went on to identify Opportunities for change:

- There are a number of competing priorities that are not a result of the overall vision for the Directorate – this has started to be addressed through the roll out the roadmap and transformation plan,
- There is a lack of systems which impedes effective demand management,
- There are too many silos which results in staff knowing what they are doing but not necessarily what others do and how projects contribute to the overall vision,
- Some easy wins can be made by getting systems in place,
- Staff are, in the main, up for change,
- Opportunities exist to make efficiencies by putting in place better processes.

The Director of Adult Social Care went on to give Members an overview of the current budget position:

- As agreed the budget position would continue to be formally reported to Members on a quarterly basis'
- There was still pressure caused by some of the savings put in last year,
- The number of people needing support was increasing as was the complexity of need'
- The Directorate was working on a number of management actions including:
  - Stemming demand from D2A – Reviews had been reduced from 6 weeks to 5 days meaning higher cost intensive packages of care did not continue longer than necessary,
  - The directorate was keeping on top of reviews in a timely way and the impact of reviews on the budget position was tracked,

- Increasing use of Occupational Therapy to support people who need 1:1 support,
- Concentrating on young people coming through transition
- Dealing with complaints and issues quickly and honestly.

In relation to the Transformation Programme for the Directorate, the Director of Adult Social Care reported that the following areas were the current focus:

- Workforce – work continued to reduce use of agency staff and get the senior management structure in place
- Front door – ensuring appropriate screening of clients, diverting people where appropriate with the effect of reducing waiting times
- Assessment – new more simple forms had been implemented which reduced the time taken to complete the forms.
- Commissioning – actions that were transformational not just business as usual were being prioritised.
- Finance and performance data was being used to track the impact of the changes being implemented.
- A new ‘Transformation Lead’ had been appointed to provide support to the programme.

In response to a question from the Chairman, the Director of Adult Social Care explained that much of the Transformation was about culture change and would therefore take time to embed. However, there were already some green shoots with evidence of improvement in some areas.

The Director of Adult Social Care confirmed that some good work had been done in partnership with the CCG in terms of reaching agreement around funding for individual packages of care. Discussions with the CCG around joint commissioning of services were ongoing. The aim of these discussions was to secure the same or a very similar price of care for both the Council and the CCG.

In relation to planning in the event of a no-deal Brexit, the Director of Adult Social Care confirmed that there were ongoing discussions with the provider market and the Government Guidance had been passed on. In terms of any impact arising from EU nationals working for care homes, no major concerns had been raised by providers. Dialogue with providers would remain open to ensure that any issues were identified and picked up early.

**RESOLVED that the update be noted.**

**22 PORTFOLIO PLAN 2019/2020**  
**Report ACH19007**

The Committee considered a report presenting the 2019/20 refresh of the Adult Care and Health Portfolio Plan 2018-2022 which had been aligned with the Council’s Transformation Programme.

Noting the structural changes which were currently taken place in the CCG, a Member suggested that a footnote should be added to clarify that changes were taking place and would be reflected in the Portfolio Plan once decisions had been taken. The Member also suggested that the report should have reflected in more detail the progress that had been made on some of the priorities.

In response to a question, the Assistant Director for Strategy, Performance and Engagement confirmed that an update concerning the pilot of the multidisciplinary approach to substance misuse attenders in A&E would be reported in the 6-monthly update presented to the next meeting.

In response to a question from a Member, the Director of Adult Social Care reported that management of the Disabled Facilities Grant sat within the Housing directorate. A report on the Disabled Facilities Grant would be presented to the Renewal, Recreation and Housing PDS Committee and a request would need to be made to the Director of Housing, Planning and Regeneration for the report to also be considered by the Adult Care and Health PDS Committee.

The Assistant Director for Strategy, Performance and Engagement confirmed that both the Ageing Well Strategy and the Mental Health Strategy would be launched imminently and implementation would then be monitored through action plans.

In relation to appropriate accommodation for vulnerable adults, the Assistant Director for Strategy, Performance and Engagement clarified that the action focused on planning to meet future need by adopting a more strategic approach to the provision of accommodation.

**RESOLVED: That the report be noted.**

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

The Committee considered the following report(s) where the Adult Care and Health Portfolio Holder was recommended to take a decision:

### **A CAPITAL PROGRAMME MONITORING Q1 2019/20 Report FSD19078**

On 10<sup>th</sup> July 2019, the Executive received a report summarising the current position on capital expenditure and receipts following the 1<sup>st</sup> quarter of 2019/20, and presenting for approval the new capital schemes in the annual capital review process. The Executive agreed a revised Capital Programme for the four year period 2019/20 to 2022/23. The Committee considered a report highlighting changes agreed by the Executive in respect of the Capital Programme for the Adult Care and Health Portfolio.

A Member expressed disappointment in the delays in implementing the Social Care Case Management system and questioned whether the delays would impact on the initial timeframe that had been indicated. In response, the Assistant Director of Strategy, Performance and Engagement explained that the delays were a result of two issues. Firstly, there had been difficulties in identifying the right appointee to the key post of Programme Manager. An appointment had now been made and the new post holder brought with them lots of valuable experience which will assist the smooth implementation of the system. Secondly, agreement had been sought to use the Regional Framework Agreement. Despite going live in April 2019 it had taken time to ensure that key suppliers were on the framework. It was anticipated that the experience of the new Programme Manager would mitigate against the earlier drift and delay with Officers aiming for procurement by the end of the year.

**RESOLVED: That the Portfolio Holder be recommended to note and confirm the changes approved by the Executive on 10<sup>th</sup> July 2019.**

**B MEMBERS GATEWAY REPORT - PERMISSION TO EXTEND THE VOLUNTARY, COMMUNITY AND SOCIAL ENTERPRISE SUPPORT (VCSE) CONTRACT  
Report ECHS19028**

The Committee considered a report seeking to further extend the VSCO contract for a six month period, via an exemption, to align with the Bromley Well contract which would support a cohesive approach to the commissioning of this requirement from September 2020. Following Member approval on 7 March 2019 to apply the one year extension (ECHS19028), the contract had a current end date of 31 March 2020 with a cumulative value of £120k. The VSCO and BTSE contracts provided similar support and the Bromley Well contract was due to end in September 2020, with an option to extend for up to a further two years. Future commissioning options were currently being considered for both services.

In response to concerns raised by a Member surrounding the previous poor performance of the contractor, the Head of Early Intervention, Prevention and Community Services Commissioning confirmed that the provider had a new Chief Executive who had implemented an improvement plan. Regular monitoring visits took place and there was evidence that progress was being made.

**RESOLVED: That the Portfolio Holder be recommended to extend the current VSCO contract, via an exemption to competitive tendering, for a six month period commencing 1 April 2020 and ending on 30 September 2020 at a cost of £24k (cumulative value of £144k).**

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

The Committee considered the following reports on the Part 1 agenda for the meeting of the Executive on 18<sup>th</sup> September 2019:

**A EXTENSION TO THE DIRECT PAYMENTS SUPPORT AND PAYROLL SERVICE CONTRACT WITH VIBRANCE - AND APPROVAL TO COMMENCE TENDER FOR A DIRECT PAYMENTS SUPPORT AND PAYROLL SERVICE CONTRACT  
Report ACH19003**

The Committee considered a gateway report seeking agreement to apply the second and final formal 1 year extension of the Direct Payments Support and Payroll Service Contract, from 8 April 2020 to 7 April 2021 and approval to commence a full tender exercise for a new Direct Payments Support and Payroll Service Contract by end 2019. The current contract was awarded following a competitive tender and commenced in April 2017 for a period of two years with the option to extend up to a further two years on a 1 year +1 year basis. The 2<sup>nd</sup> extension from 8 April 2020 would allow time for the implementation of the Pre-Payment Cards in Bromley as outlined in Option 1 detailed in the report. The additional rationale for the extension is that the provider was delivering a good service and was operating in accordance with the current contract and service specification. Additionally the service was reviewed with a satisfactory outcome in April 2018 and again in June 2018. In summary there was compelling justification and benefits from the contract extension, which also guaranteed no increase in the budget for a further year (retaining the 2017 price). It was proposed that following a competitive tender the new contract would commence in April 2021 for a period of five years with the option to extend up to a further two years on a 1 year +1 year basis.

Noting the comments that had been made earlier in the meeting, the Chairman suggested that it would be helpful to Members if future reports concerning contract award and contract extension provide further information surrounding the involvement of service users in the process.

The Committee noted the detailed financial information contained in the Part 2 report on the agenda.

**RESOLVED: That:**

- 1. The Portfolio Holder is recommended to agree that the contract with Vibrance be extended for a period of 1 year, from 8 April 2020 – 7 April 2021. To run continuously from the current contract to enable the Council to have arrangements in place to fulfil its statutory duties.**
- 2. The Executive be recommended to agree the commencement of a formal tender process for a Direct Payments Support and Payroll Service Contract, by the end of 2019 to ensure a new service is commissioned at the end of this extension. The new service will commence on 8 April 2021 for a period of 5 year with an option to extend by a period of up to but not exceeding 1 year followed by a further period of up to one year.**

**B DEMENTIA POST DIAGNOSIS SUPPORT SERVICE**  
**Report ACH19001**

The Committee considered a report summarising options as to how the commissioning process for the dementia post diagnosis support service should be undertaken. The contract for Dementia Post Diagnosis Support Service was due to expire on 30<sup>th</sup> June 2020. There were no further options to extend the current contract which had an annual value of £451k and cumulative spend over the life of the contract was £1.8m. The approval of the Executive was being sought to enable the commencement of the procurement of services in alignment with LBB Commissioning Plans, Bromley Clinical Commissioning Group (CCG) Commissioning Plans and the Health and Wellbeing Strategy 2019 to 2023.

The Vice-Chairman noted the positive performance of the service, noting that the total number of new cases in 2017/18 (669) had significantly exceeded the target that had been set (195), and that over a three year period performance against this target had improved year-on-year.

Noting that Option 2 (bringing the service in-house) was not being recommended a Member sought information around the work that had been undertaken to assess the cost to the Council of this option. In response, the Integrated Strategic Commissioner reported that a Service Review had been completed in July 2019 and as part of this there had been a review of the current contracts. In addition the anticipated costs over the next 5 years in terms of the estimated increases in the number of service users with dementia were reviewed. A Member suggested that it would be helpful to include further detail of these estimated costs within future reports. The Chairman asked that, in addition, information be provided surrounding an estimation of on-costs such as management costs, recruitment costs etc. in order to give Members an accurate picture.

Noting that there was no inflationary uplift, a Member expressed concern that this could lead to issues with the financial viability of providers in the future. The Head of Complex and Long-Term Commissioning reported that a level playing field for all providers had been ensured. There was an expectation that any providers who submitted tender bids would factor in inflation and the forecasts that had been provided in relation to increased demand. If any financial pressures were to arise in the future in relation to work volumes, it was possible that such pressures could lead to contract renegotiation.

Members noted that a number of helpful ideas and suggestions had arisen out of the stakeholder engagement sessions and questioned how some of the suggestions would be taken forward. The Head of Complex and Long-Term Commissioning reported that these would be built into the Tender Specification. Members noted that there would also be market engagement events prior to the tender process.

Following a discussion it was agreed that the action taken to address the feedback received from stakeholder engagement should be reported back to

the Committee in terms of: (i) what was being done; (ii) how it was being done; (iii) reducing waiting lists; (iv) the befriending service; and (v) when it was being done. The Chairman requested that a timely update be provided to ensure the positive suggestions put forward by service users did not get overlooked with the passage of time.

**RESOLVED: That the Executive be recommended to approve the commencement of a procurement process for a new Dementia Post Diagnosis Support Service (thereafter referred to as the Dementia Hub) from October 2019, subject also to CCG agreement . The new contract would commence on 1<sup>st</sup> July 2020 for a period of 5 years with the option to extend for up to a further two years at an estimated annual value of £490k (whole life value estimated at £3.43m).**

## **C AGING WELL STRATEGY Report ACH19004**

The Ageing Well in Bromley Strategy was a joint LBB and Bromley Clinical Commissioning Group endeavour, and a joint commitment to Bromley residents. The aim of the Ageing Well in Bromley Strategy was to set out how partners would work together (LBB, Bromley CCG and the third sector) to ensure that older people retained their independence for as long as possible with the assistance of family, friends, faith and community groups, the voluntary sector and, where necessary, the Council and Health services. In order to deliver this vision four key outcomes had been coproduced which signified the community priorities: Outcome 1: I socialise, participate and make my own choices; Outcome 2: I feel healthy and can get the health and care service I need when I need; Outcome 3: My home meets my aspirations and needs; and Outcome 4: I am safe and I feel safe and I trust people around me. The strategy illustrated the actions that were already being taken to deliver on the outcomes and their corresponding Priorities. The Strategy also provided an insight into the future actions that would be initiated in order to deliver the overriding aims.

Opening the discussion, the Chairman commended Officers on an excellently written Ageing Well in Bromley Strategy.

During discussion Members noted that one thing that was missing from the Strategy was any form of sign-posting as to how readers may be able to access services. A Member suggested that the Strategy needed to be a user friendly web-based document that contained hyperlinks to further information and the Assistant Director for Strategy, Performance and Engagement agreed to take away the challenge of publishing a dynamic strategy on the website. The Committee, recognising that not everyone had internet access, noted that a Care Services Directory had also been developed and would signpost to services.

Members noted that once the Strategy had been endorsed by the Executive an action plan, which was currently in the development stage, would be

published. A Member suggested that the Action Plan needed to provide the link concerning the services available in the Borough.

A Member suggested that it may be helpful to have a more long-term, visionary strategy setting out where the Council was going and how it planned to get there. In response, the Assistant Director for Strategy, Performance and Engagement highlighted that the purpose of the Strategy was to enable the Local Authority to plan for the next 5 years by setting out high level strategic priorities. The Action Plan that was being developed would serve a different purpose and would be refreshed every year. In developing the 4 key outcome priorities Officers had engaged with residents in order to identify and respond to their priorities. It was right and proper that the Strategy before Members celebrated much of the good work that was already in place and being implemented and benchmarking against other local authorities had demonstrated that Bromley was not unique in adopting this approach.

A Co-opted Member suggested that the Strategy should not give the impression by omission that all services would be free. There needed to be a growing acceptance around what the public purse should realistically be expected to provide and further work needed to be done around changing the perception of what individuals should be funding for themselves.

A Member expressed concern at the wording of the third aim under Priority One:

*“Enable the voluntary and community sector **to compete** to offer people high quality services, promoting independence and self-management.”*

Officers explained that the words “to compete” was a reference to the fact that Bromley was a commissioning authority. It was intended to be an acknowledgement that the Local Authority wanted to engage with the local voluntary sector. Voluntary sector organisations were actively encouraged to participate in the competitive tendering process. Following a discussion it was agreed that the words “to compete” could be removed from this particular aim and as such a recommendation should be made to the Executive.

Noting a couple of minor typing errors, Members suggested that the Strategy should be proof read prior to publication.

**RESOLVED: That the Executive be recommended to endorse the Ageing Well in Bromley Strategy subject to the deletion of the words “to compete” as outlined above.**

## **D HEALTH AND SOCIAL CARE INTEGRATION Report ACH19008**

The Committee considered a report setting out further information on proposed changes to the NHS commissioning system in Bromley, and seeking support to progress with arrangements to better integrate health and social care commissioning, including the appointment of a joint senior post to

manage commissioning, contract management and brokerage for Adult and Children's Services and for NHS community services. The report also provided information on the progress made on 'One Bromley'; the local health and care partnership.

The Chairman welcomed Dr Angela Bhan, Managing Director Bromley CCG, to the meeting.

In response to a question from the Vice-Chairman, the Managing Director (Bromley CCG), confirmed that the Level 2 model that was being recommended for Bromley would ensure that budgets would be kept separate and ensure that the Council was not exposed to the risks of NHS budgets. The purpose of the proposals was building on the positive relationships that were already in place and continue to build a consensus. A Place Based Board with joint chairmen was being proposed and protections had been built in around any votes that would be necessary concerning budgets (i.e. if a proposal had implications for only Local Authority budgets then only local authority representatives would be able to vote – the reverse would be true in the case of proposals affecting only NHS budgets).

A Member suggested that the proposals before the Committee represented a pragmatic way forward which minimised risk by allowing project based co-production and co-development. Scrutiny processes would remain the same and the Place Based Board represented an additional interface with existing structure with 3 representatives of the CCG having seats on the Place Based Board.

In response to a question from the Chairman, the Managing Director (Bromley CCG) confirmed that the new joint commission post that was being proposed would be entirely dedicated to Bromley and it was proposed that the Place Based Director would jointly accountable to the CCG Accountable Officer and the Council Chief Executive. A Member expressed concern that the proposed Place Based Director for Commissioning could have a conflict of interest as they would be employed by the CCG yet accountable to the Council. In response, the Managing Director (Bromley CCG) highlighted that 'One Bromley' was about developing a joint approach to shaping services. The aim of the current proposal was to try to ensure that strategy and plans were integrated without any financial exposure. The Committee received assurances that the Council's commissioning processes would remain the same.

Members discussed engagement with Bromley Healthwatch, noting that Healthwatch was part of the Governing Body of the CCG. It was noted that there were some interim issues with Healthwatch which would require a collective approach.

A Member highlighted that there was a great deal of good practice in other Local Authorities and that there needed to be a mechanism to ensure that reports detailing this good practice were brought back to Members. Going

forward it would be important for Members to fully utilise the scrutiny powers that were available.

Following a discussion it was agreed that the Managing Director (Bromley CCG) would provide further clarification around the possible phasing out of Level 1 in March 2021.

In response to a concern raised by a Member concerning the open ended salary package outlined in recommendation 3, the Managing Director (Bromley CCG) and the Director of Adult Social Care provided assurances that Director-level salary bands were clearly defined and there was a maximum level that could be paid.

Tying to the recommendations, a Member suggested the following amendment to recommendation one:

“That the Executive be recommended to support the development of a borough based structure that would better integrate health and social care commissioning”

The amendment was agreed.

**RESOLVED: That the Executive be recommended to:**

- 1. Support the development of a borough based structure that would better integrate health and social care commissioning;**
- 2. Progress with integrated commissioning at level 2 for Bromley – Aligned Commissioning; and**
- 3. Recommend to Full Council the recruitment and selection of a joint role between the Council and the CCG to lead commissioning on a salary package higher than £100k, pursuant to the Localism Act 2011. Previously, the plan was that this should be a Director level role but the current intention is that the post holder reports to the Director of Adult Services and to the Place Based Director who will have delegated authority and budget from the new proposed SEL CCG. The role of this post will be to:**
  - Manage the commissioning, contract management and brokerage functions for Adult and Children’s services.**
  - Manage the commissioning and contracting function for the NHS in Bromley.**
  - Seek to gain efficiencies and improved productivity in a joint commissioning, contract management and brokerage team, thereby releasing resources for health and social care**
  - Ensure that commissioning, contract management and brokerage functions are aligned to gain maximum efficiency and productivity, eg in the merging of two teams.**

- **Ensure that NHS and social care processes are aligned to achieve maximum value for money for the population of Bromley and commissioning organisations.**
- **Seek to gain efficiencies and improved productivity in a joint commissioning, contract management and brokerage team, thereby releasing resources for health and social care**
- **Ensure that commissioning, contract management and brokerage functions are aligned to gain maximum efficiency and productivity, eg in the merging of two teams.**
- **Ensure that NHS and social care processes are aligned to achieve maximum value for money for the population of Bromley and commissioning organisations.**

## **25 JOINT MENTAL HEALTH STRATEGY VERBAL UPDATE**

Councillor Jeal reported that the Task and Finish Group had continued to meet and a significant amount of work had been completed and the majority of the views expressed by the PDS Committee had been incorporated into the Strategy. The Task and Finish Group had not yet seen the action plan.

The Chairman confirmed that when the Strategy came back to the PDS Committee it would simply be for noting as a great deal of work had been completed by the Task and Finish Group on behalf of the Committee. The Chairman thanked the Members of that group for their time and effort in reviewing the draft strategy.

## **26 UPDATE ON CHANGES TO DIRECT PAYMENTS Report ACH19002**

At its meeting on 25<sup>th</sup> June 2019, the Committee requested an update on changes to direct payments. Consequently the Committee considered a report providing an update on the actions that had been undertaken to increase the number of Direct Payments and ensure progress towards attaining the 30% target. Additionally the report illustrated the heightened profile of direct payments, whereby service users had choice and control regarding the way they received care and support.

In response to concerns raised by a Member around safeguarding and the use of pre-payment cards by vulnerable young people, the Head of Early Intervention, Prevention and Community Services Commissioning explained that there was considerably more risk in giving young people cash payments. There was less risk associated with pre-paid cards as the card afforded more scrutiny and oversight. The cards could also be restricted to prevent young people spending the funds on inappropriate purchases and any purchases could be monitored.

**RESOLVED: That the report be noted.**

**27 ANNUAL ECHS COMPLAINTS REPORT**  
**Report ACH19009**

The Committee considered a report presenting the 2018/19 Complaints Report setting out the complaints received by the Council. The report also provided an oversight of the Annual Local Government and Social Care Ombudsman (LG&SCO) letter which summarised LG&SCO complaints/enquiries received and the decisions made about the London Borough of Bromley for the year ending 31 March 2019.

Members noted that in relation to complaints within the Adult Care and Health Portfolio there had been a 22% drop in the number of complaints in the last year. There had also been a significant drop in the financial outlay arising from complaints.

The Head of Customer Engagement and Complaints highlighted that there had been significant improvement in managing ombudsman complaints and this had resulted in a more positive letter from the Local Government and Social Care Ombudsman. Compliance for complaints from the Ombudsman is in the high 90%s. This now needed to be translated into complaints sent directly to the Council.

The Executive Assistant to the Adult Care and Health Portfolio reported that she received and analysed a weekly update on complaints that had been received. Serious complaints or particular concerns were discussed with the Director of Adult Social Care on a fortnightly basis or more frequently if necessary. Members also noted that the Head of Customer Engagement & Complaints was about to introduce a quarterly analysis of complaints for the Director of Adult Social Care and her senior management team.

The Director of Adult Social Care confirmed that any compliments received by the Directorate were also fed back to staff.

**RESOLVED: That the report be noted.**

**28 CONTRACTS REGISTER AND CONTRACTS DATABASE**  
**Report ACH19006**

The Committee considered an extract from the July 2019 contracts Register for detailed scrutiny. 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. Members noted that subsequent to the extract being taken in July 2019, the Council's Contracts Database had been updated and currently no contracts were flagged for concern.

A Member highlighted that Members needed to ensure a close watch was kept on contracts that were due for renewal to ensure that procurement processes were started in good time. The Head of Complex and Long-Term Commissioning confirmed that there was an action plan for contracts that were coming up for expiry.

**RESOLVED: That the report be noted.**

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

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

- Minutes of the Health Sub-Committee held on 2<sup>nd</sup> July 2019

**RESOLVED that the Information Briefing be noted.**

**30 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.**

**31 EXEMPT MINUTES OF ADULT CARE AND HEALTH PDS  
COMMITTEE MEETING HELD ON 25 JUNE 2019**

The exempt (Part 2) minutes of the Adult Care and Health PDS Committee held on 25<sup>th</sup> June 2019, we agreed and signed as a correct record.

The Meeting ended at 9.40 pm

Chairman