BRIGHTON & HOVE CITY COUNCIL

JOINT COMMISSIONING BOARD

5.00PM 25 MARCH 2013

COUNCIL CHAMBER, HOVE TOWN HALL

MINUTES

Brighton & Hove City Primary Care Trust representatives: Denise Stokoe (Chair) and Dr George Mack;

Council representatives: Councillor Rob Jarrett (Deputy Chair);

Co-opted Members: Colin Vincent, LINk

Apologies: Janice Robinson (Brighton & Hove CCG), Councillor Ken Norman and Councillor Anne Meadows

PART ONE

- 33. PROCEDURAL BUSINESS
- 33 (a) Declarations of Substitutes
- 33.1 There were none.
- 33 (b) Declarations of Interests
- 33.2 There were none.
- 33 (c) Exclusion of Press and Public
- 33.3 In accordance with section 100A of the Local Government Act 1972 ("the Act), the Board considered whether the press and public should be excluded from the meeting during an item of business on the grounds that 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 during that item, there would be disclosure to them of confidential information (as defined in section 100A (3) of the Act) or exempt information (as defined in section 100I(I) of the Act).
- 33.4 **RESOLVED** That the press and public be not excluded from the meeting.

34. MINUTES OF THE PREVIOUS MEETING

- 34.1 George Mack drew attention to some typing errors. Paragraph 27.6 should have referred to a *peer* review. Paragraph 28.3 third line should read "...people *with* learning disabilities."
- 34.2 Colin Vincent referred to paragraph 24.6 relating to the NHS 111 service and stated that he had not yet received a briefing sheet on this service. The Chief Operating Officer informed Mr Vincent that she had sent him a briefing sheet via the LINk office. She would send another copy direct to his home address.
- 34.3 Mr Vincent mentioned that there had been a media report that had reported some confusion about the NHS 111 service. He asked for an update on how the service was operating in the city.
- 34.4 The Chief Operating Officer reported that the NHS 111 service went live about 10 days ago. There were teething problems around the technical ability to share information amongst organisations. There had also been a concern about capacity in call centres. The technical problems had been resolved and extra capacity had been added to call centres. The service was now running very smoothly. The national launch of the service would take place in a couple of weeks. There would be some focused work locally to ensure people were made aware of NHS 111. A full report on the service could be produced for a future meeting.
- 34.5 **RESOLVED** That the minutes of the Joint Commissioning Board Meeting held on 28 January 2013 be agreed and signed as a correct record subject to the amendments detailed in paragraph 34.1 above.

35. CHAIR'S COMMUNICATIONS

Clinical Commissioning Group Authorisation

35.1 The Chief Operating Officer informed the Board that officers had provided additional information to the NHS Commissioning Board to demonstrate that five areas of concern had been addressed. Four out of the five concerns had been cleared by the NHS Commissioning Board. Only one condition remained outstanding relating to a shared finance officer role. This matter would be resolved. The CCG had already been formally authorised by the NHS Commissioning Board and were in place to go live on 1 April 2013.

HealthWatch

35.2 Colin Vincent informed the Board that the LINk would be superseded by HealthWatch on 1 April 2013. HealthWatch would carry on the work of the LINk with a few additions. The successor organisation was keen to continue to have a representative on the Joint Commissioning Board. Mr Vincent was advised to inform the Community and Voluntary Sector Forum that they should contact the Democratic Services Officer with regard to the HealthWatch representative.

36. PUBLIC QUESTIONS

36.1 There were none.

37. FINANCIAL PERFORMANCE REPORT MONTH 10

- 37.1 The Board considered a report of the Director of Finance, NHS Sussex and Director of Finance, BHCC which set out the financial position and forecast for the partnership budgets at the end of month 10.
- 37.2 The Head of Finance, Business Engagement, BHCC drew attention the table in 3.1 of the report which showed the forecast outturn variance by client group.
- 37.3 The Senior Lawyer asked the Board to note that the two councillors not present at the meeting had been sent the agenda and were able to note the content of the report.
- 37.4 **RESOLVED -** (1) That the forecast outturns for the s75 budgets as at month 10 be noted.
- (2) That the update on budget planning for 2013/14 for the health and social care arrangements agreed by Budget Council and NHS Sussex Board be noted.

38. SUSSEX INTEGRATED END OF LIFE AND DEMENTIA CARE SUSSEX PATHWAY

38.1 The Board noted that this item had been withdrawn from the agenda. The Adult Care & Health Committee held on 18 March 2013 had agreed to defer consideration of the proposals to the next meeting of the Committee on 17 June 2013 in order for a revised report to be submitted which reflected the concerns expressed by Members.

39. DAY ACTIVITIES REVIEW

- 39.1 The Board considered a report of the Director of Adult Social Services that provided an update of progress on the Day Activities Review which included day activities for all vulnerable adults. The report highlighted the need to make the best use of all day centre buildings, resources and staff in order to offer effective and responsive day services across the City and also offer value for money. The report also provided an update on the future of the Buckingham Road and Connaught Day Centres.
- 39.2 The Chair observed that many aspects of the service were being reviewed but there remained some uncertainty particularly with regard to the Connaught and Buckingham Road Day Centres.
- 39.3 The Commissioner, Learning Disabilities and Older People acknowledged that there had been anxiety about the future of these services. There had been regular newsletters and day centre workers are working with current service users to identify alternative locations for activities. At the moment it was known that Education required the Connaught Road building from January 2014. In house staff were working on a specification for an alternative building and are working with carers and service users to ensure that any alternative sites meet the needs of the service users.

- 39.4 Councillor Jarrett informed the Board that he had spoken to the Chair of the Children and Young People Committee about the Connaught Centre. A timetable regarding Education's move to the Connaught Centre would be available as soon as possible.
- 39.5 Councillor Jarrett mentioned the "It's Local Actually" service. This was a recognised service for anyone referring people for activities. It was a useful resource and Councillor Jarrett recommended that Board members looked at the Fed Website.

 http://www.thefedonline.org.uk/services/out-and-about/its-local-actually
- 39.6 The Senior Lawyer informed the Board that the Day Activities Review report had been fully debated and noted at the Adult Care & Health Committee, on 18 March 2013. Members of the committee in attendance on 18 March included Councillors Meadows and Norman who were unable to attend the Board meeting today.
- 39.7 **RESOLVED –** (1) That the progress of the Day Activities Review and the next steps proposed be noted.
- (1) That it be noted that there will be a presentation of a further progress report to the next meeting.

40. BRIGHTON AND HOVE CCG COMMISSIONING PLANS 2013/14

- 40.1 The Board considered a presentation from Geraldine Hoban, Chief Operating Officer, Clinical Commissioning Group. The presentation explained that the CCG had three key commissioning plans. The Joint Health and Wellbeing Strategy (JHWS), the Strategic Commissioning Plan (SCP) and the Annual Operating Plan (AOP).
- 40.2 The presentation set out the background to developing the plans, challenges facing the NHS and details of local budget and spend.
- 40.3 The Chief Operating Officer set out the local challenge in saving £10.3m from existing services and budgets, whilst increasing the quality of services, driving up the use of innovation, increasing productivity and focusing on prevention of ill health and promotion of wellbeing.
- 40.4 The Chief Operating Officer informed the Board of an amendment in the presentation. The CCG had a budget of £350m not £400m.
- 40.5 The presentation detailed the clinical priorities identified in the JSNA. These were cancer, diabetes, musculoskeletal conditions, dermatology, dementia, healthy weight & good nutrition, and emotional health & wellbeing, including mental health.
- 40.6 The Chief Operating Officer explained that in addition to the specific clinical pathways there were also a number of service areas identified as priorities. These were community care, integrating physical and mental health, primary care, urgent care and care for vulnerable groups.
- 40.7 The Chief Operating officer stressed that there would be a focus on Quality and outcomes and concluded that the CCG plans were aligned to the Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy, were clinically led, balanced

- financially, and were delivered through joint working with local partners with strengthened Section 75 Agreements and a continued focus on quality and outcomes.
- 40.8 Councillor Jarrett mentioned that he would be interested in seeing the result of a pilot at the Royal Sussex County Hospital. He thought that having liaison nurses was a wonderful idea. They had recently introduced themselves to the Learning Disability Partnership Board. This was a very positive step.
- 40.9 Colin Vincent asked for clarification regarding the CCG budget. The Chief Operating Officer explained that the NHS Commissioning Board budget for Brighton & Hove would be £150m. The CCG budget was £350m. There had been an increase of £7m not a cut in the budget. However, it was felt that a further £8m was required for the CCG's plans for services. The CCG would look to make the £8m through the efficiency programme.
- 40.10 Colin Vincent referred to the recent government announcement that in 2013/14 the total budget for local public health services would be just under £2.7 billion. He asked if the CCG would benefit from this money. The Chief Operating Officer replied that the CCG and Local Authority would benefit from the funding and would be working closely together.
- 40.11 The Head of Assessment Services concurred and informed the Board that the council were working on plans for using the transfer of funds.
- 40.12 **RESOLVED** That the presentation be noted.

41. ADULTS SECTION 75 REVIEW

- 41.1 The Board considered a report of the Chief Operating Officer, Clinical Commissioning Group which outlined revisions to the Adults Section 75 Agreement between the Council and the Clinical Commissioning Group which needed to come into effect on 1 April 2013 in order to reflect the changes in law.
- 41.2 The report explained that from 1 April 2013 the Clinical Commissioning Group would become the accountable body for commissioning the majority of healthcare provision in the City. Joint Commissioning agreements with the Council therefore needed to be revised in order to reflect the new commissioning landscape and changes to legal responsibility for Public Health functions that transfer solely to the Council.
- 41.3 The Chief Operating Officer stated that schedules for the jointly commissioned areas had been updated. A new 3 year agreement had been drawn up. There would be a non pooled fund.
- 41.4 The Senior Lawyer explained that there would be an amendment to the council's constitution that would propose that the timing of the Joint Commissioning Board and Adult Care and Health Committee coincide. The Joint Commissioning Board would meet first to consider the Section 75 business. The proposal was being made to avoid the situation whereby reports were being considered on several occasions by the same people and would make the decision making process more efficient. The report had been agreed by the Adult Care and Health Committee and would be submitted to full Council for approval. The terms of reference for the Joint Commissioning Board would

be updated. The CCG and the local authority members would continue to each have one block vote.

- 41.5 George Mack referred to Schedule 4 Excluded Functions. Paragraph 3.1 should refer to Schedule 2 not 4.
- 41.6 The Senior Lawyer informed the Board that in her opinion the Local Authority single vote on this item had been taken by the whole of the Adult Care & Health Committee on 18 March. The Committee had approved the recommendations.
- 41.7 **RESOLVED** That the requirement to revise the Section 75 Agreement to reflect changes in the law, be noted.
- (1) That the revisions to the Section 75 Agreement be agreed in order to comply with the changes in the law.
- (2) That the proposals for amendments to the arrangements for future meetings of the Joint Commissioning Board be noted.

The meeting concluded a	t 6.05pm		
Signed		Chair	
Dated this	day of		