

**ADULT SOCIAL CARE
& PUBLIC HEALTH SUB
COMMITTEE**

Agenda Item 18 (c)

Brighton & Hove City Council

Adult Social Care & Public Health Sub-Committee

4.00pm 14 June 2022

Hove Town Hall - Council Chamber

Minutes

Present: Councillor Nield (Chair) Shanks, Robins (Opposition Spokesperson), Barnett (Group Spokesperson) and Appich

Part One

1 PROCEDURAL BUSINESS

- 1.1 There were no apologies or substitutes for the meeting.
- 1.2 There were no declarations of interest.
- 1.3 **RESOLVED** – that the press & public be not excluded from the meeting.

2 MINUTES

- 2.1 **RESOLVED** – that the minutes of the 11 January 2022 committee meeting be agreed as an accurate record.

3 CHAIR'S COMMUNICATIONS

- 3.1 The Chair gave the following communications:

“The opening times of the vaccination centre at Churchill Square have changed. It’s now open:

- Monday and Wednesday, 10am – 6pm
- Saturday and Sunday, 9am – 5pm

1st, 2nd and booster doses are available for all ages 5+.

Appointments can be booked online or by calling 119. Or you can walk-in, no appointment needed.

Vaccinations are also still available every day across the city at mobile sessions.

For the latest info please check www.sussexhealthandcare.uk/get-my-jab

Have your say on physical activity, sport and exercise opportunities in the city

We've launched a citywide consultation to find out how we can better support people in the city to move more and enjoy being active for life. We want to find out people's attitudes, the types of opportunities you would like to see and what support you need to become more active. Your views will create a Sport & Physical Activity Strategy.

- Complete the survey by Sunday 31 July at www.brighton-hove.gov.uk/active-for-life

There's also opportunities to talk to the Healthy Lifestyles team at events across the city.

New members. Finally, I'd like to welcome two new members to the sub-committee: Cllrs Alan Robins and Dawn Barnett. Alan and Dawn replace Theresa Fowler and Mary Mears on the sub-committee, and I'd like to thank Theresa and Mary for their contributions.

RESOLVED – That the Chair's Communications be noted and received.

4 CALL-OVER

- 4.1 Items 7 (Fast Food & Energy Drink Advertising: Response to Notice of Motion) and 8 (Adult Social Care Budget Position) were called for debate.

5 PUBLIC INVOLVEMENT

- 5.1 There were no public involvement items.

6 MEMBER INVOLVEMENT

- 6.1 There were no member involvement items.

7 ITEMS REFERRED FROM COUNCIL

- 7.1 This item was introduced by Giles Rossington, Senior Policy, Partnerships & Scrutiny Officer. Alistair Hill, Director of Public Health; and Katie Cuming, Consultant in Public Health, also answered member questions.
- 7.2 Mr Rossington told sub-committee members that the report before them included information on the public health impact of obesity and the links between obesity and the advertising of fast food. The report also included limited information about the extent and nature of advertising on city council-owned properties. However, more information would be needed in order to review the Council's policy on fast food advertising; and it was consequently proposed that an officer project group be established, to undertake this work and to report back to the January 2023 sub-committee meeting with policy proposals.
- 7.3 In response to a question from Cllr Shanks on ways to combat child obesity, Ms Cuming told members that direct support to families is important, as is ensuring that healthy

eating options are available at school etc. and encouraging physical activity. However, there is abundant evidence to show that the advertising of fast food has a significant impact on behaviour.

- 7.4 In answer to a query from Cllr Nield on actions being taken in other cities, Ms Cuming told the sub-committee that Transport for London (TfL) has banned the advertising of high fat, salt and sugar foods on the London transport network. Evaluation of this shows that this has resulted in lower energy consumption. TfL has seen no loss in advertising revenue as a result of this move. Councils in Bristol and in Barnsley have also moved to restrict the advertising of certain foods. There are no findings available from these areas yet, but council officers will contact them to talk through their experiences.
- 7.5 Cllr Robins asked why the report referenced the potential for advertising revenue to be lost, when reducing obesity is a health imperative. Mr Hill responded that it is important for all impacts to be thoroughly explored when considering making changes to policy.
- 7.6 Cllr Appich stated that obesity can be as dangerous as smoking, and fast food advertising as damaging as tobacco advertising. It was disappointing that the Government's recently published Food Strategy rows back on previous commitments to restrict this type of advertising, but positive that steps to intervene locally will be explored.
- 7.7 Cllr Barnett noted that advertising was only one cause of childhood obesity, with other important factors including the decline of competitive sports; children spending less time playing outside and less time exercising; and the increasing availability of unhealthy takeaways.
- 7.8 Cllr Robins added that deprivation was also a key factor: it is much easier for people living comfortable lives to make healthy eating choices than for people in stressful situations with little time or money to spare.
- 7.9 Cllr Robins queried why the proposal was to bring a report to January 2023 ASCPH. Mr Hill responded that the next scheduled ASCPH meeting will be in September 2022, which would be too soon to report back, and that January 2023 is the next meeting following this. However, the project group will have finished its work well before January 2023.
- 7.10 Cllr Shanks noted that there is a Health & Wellbeing Board meeting scheduled for November 2022, and proposed an amendment to report recommendation (3): "Agrees that the project group will report back to the January 2023 ASCPH meeting" to be changed to: "Agrees that the project group will report back to the **November 2022 HWB meeting**". The amendment was unanimously agreed.
- 7.11 **RESOLVED** – that the Adult Social Care & Public Health Sub-Committee:
- (1) notes the information provided in the report.
- (2) Agrees that an officer project group be established, with representation from BHCC Public Health, Property & Design and Transport, and potentially other relevant services, to further explore the issue of fast food & energy drink advertising.

(3) Agrees that the project group will report back to the November 2022 Health & Wellbeing Board meeting with a paper which will include:

- Detailed information on the extent of fast food & energy drink advertising on BHCC estates
- An evaluation of the success of initiatives in other cities to restrict fast food advertising (e.g. Bristol/Transport for London)
- A proposal to refresh the Council's policy on advertising, including updating or extending restrictions, specifically including energy drinks in restrictions etc.

8 PRESENTATION - HEALTH AND ADULT SOCIAL CARE BUDGET POSITION

8.1 This item was presented by Rob Persey, Executive Director, Health & Adult Social Care; Michelle Jenkins, Assistant Director, Resources, Safeguarding & Performance (HASC); and Andy Witham, Assistant Direct, Commissioning (HASC).

8.2 Mr Persey told members that this presentation was in response to a request from Cllr Mears for ASCPH to be better sighted on the use of the HASC budget.

8.3 Mr Persey outlined HASC's priorities and explained that the Joint Health & Wellbeing Strategy was the main strategic document for the directorate. Ms Jenkins added that the HASC net budget 22-23 is £71.7M. This does not include adult Learning Disability funding, which is included in the Families, Children & Learning (FCL) directorate budget rather than HASC's. The HASC budget pays for a range of services across adult social care, mental health (via a Section 75 arrangement with Sussex Partnership NHS Foundation Trust), and integrated commissioning.

8.4 The majority of the HASC budget (69%) is used to fund externally provided services, such as residential care beds and domiciliary care packages. Around 21% is used for staffing (e.g. social workers); and around 10% for in-house services.

8.5 Residential care accounts for around 32% of the HASC budget, nursing care 31%, homecare 16%, and direct payments 12%.

8.6 Mr Persey outlined challenges and pressures, including:

- Increased life expectancy coupled with lower healthy life expectancy, meaning people are living longer with multiple health conditions, and potentially with a need for social care.
- Health system capacity (in particular the reduced number of beds available at the Royal Sussex County Hospital whilst the 3Ts revamp is ongoing).
- The continuing impacts of Covid.
- Workforce shortages.
- Increased acuity of need in people receiving services.
- Forthcoming statutory changes, including the cost of care cap, which will fundamentally change the relationship between the council and self-funders.
- The development of the ICS.

- The need to fund more prevention, while at the same time continuing to meet statutory duties to support people with acute care needs.
- 8.7 In response to a question from Cllr Appich about the Section 75 agreement with Sussex Partnership NHS Foundation Trust (SPFT), Mr Persey responded that this was currently being rewritten and would come for decision soon. The new model will be less medicalised than the current one, and will recognise that there are a range of providers other than SPFT in the city. Ms Jenkins added that the S75 budget has grown in recent years in response to increasing demand. It is important to view this increase in the broad context of health and care funding: e.g. CCG contributions to Section 117 funding.
- 8.8 In answer to a query from Cllr Appich about young people's mental health, Mr Persey told members that there was a good deal of work in this area, with the HWB and the Brighton & Hove Health & Care Partnership set to assume oversight of city services under new ICS arrangements. A focus will be on more preventative work and on targeting particular cohorts for support, such as young people struggling post-Covid.
- 8.9 Cllr Shanks asked when the council would receive Government funding to support the coming changes in care. Mr Persey responded that the Government has announced a series of funds which local areas can bid for, although guidance in a number of areas has yet to be released. The council has been allocated £800K over three years to support transition to the new care arrangements, although 75% of this must be passported to providers (details of this are included in the Fair Cost of Care report also on the June 2022 ASCPH agenda). There is potentially a large funding gap in terms of paying for increased assessment activity, although there may be some potential here to charge self-funders for their care assessments. In the near future, the rates paid by self-funders for their care will need to match rates charged to local authorities. This is likely to lead to providers increasing their rates for local authorities.
- 8.10 In response to a question from Cllr Robins on plans to reduce the carbon impact of homecare services, Mr Persey told members that this was something being explored as part of the homecare procurement process. The council is looking at innovative ways to reduce carbon emissions from car use, e.g. by more use of electric vehicles, or by requiring providers to focus on serving specific geographies in order to reduce the distance carers are required to travel between calls. Mr Witham added that the current inflationary pressures being felt by homecare workers (e.g. rising petrol prices) were being addressed through additional Fair Cost of Care funding.

9 FAIR COST OF CARE AND FEE UPLIFT IMPLICATIONS REPORT 2022/23

9.1 This item was agreed without discussion.

9.2 **RESOLVED** - That the Adult Social Care & Public Health Sub Committee agrees to the recommended fee increase of an additional 5% to Home Care providers hourly Set Rates and an additional 2% to Care Home providers charging Set Rates by making use of the Council's allocation of the 'Market Sustainability and Fair Cost of Care Fund' for 2022-23. The underpinning background to this proposed fee change is contained in the main body of the report. These increases will apply from 4 July 2022.

10 ITEMS REFERRED FOR COUNCIL

The meeting concluded at Time Not Specified

Signed

Chair

Dated this

day of