

# **JOINT COMMISSIONING BOARD**

## **Agenda Item 33**

Brighton and Hove City NHS  
Teaching Primary Care Trust  
Brighton & Hove City Council

### **BRIGHTON & HOVE CITY COUNCIL**

#### **JOINT COMMISSIONING BOARD**

**5.00PM 8 DECEMBER 2008**

**COMMITTEE ROOM 3, HOVE TOWN HALL**

#### **MINUTES**

**Present:** Brighton & Hove City Primary Care Trust representatives:  
Julian Lee (Chairman), John Dearlove, Janice Robinson and Denise Stokoe;

Council representatives:  
Councillor Ken Norman, Cabinet Member for Adult Social Care & Health;

Co-opted Members:  
Councillor Keith Taylor, Brighton & Hove City Council  
Richard Ford, Sussex Partnership Trust  
John O'Sullivan, South Downs Health NHS Trust

Apologies: Councillor Maria Caulfield (Cabinet Member For Housing), Councillor Jeane Lepper (Brighton & Hove City Council) and Simon Turpitt (South Downs Health NHS Trust)

#### **PART ONE**

#### **24. PROCEDURAL BUSINESS**

##### **24 (a) Declarations of Substitutes**

24.1 Geraldine Hoban, Deputy of Strategic Commissioning PCT reported she was attending on behalf of Amanda Fadero, Director of Strategy PCT.

##### **24 (b) Declarations of Interests**

24.2 There were none.

**24 (c) Exclusion of Press and Public**

- 24.3 In accordance with section 100A of the Local Government Act 1972 ("the Act), the panel 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(l) of the Act).
- 24.4 **RESOLVED** - That the press and public be not excluded from the meeting.

**25. MINUTES OF THE PREVIOUS MEETING**

- 25.1 **RESOLVED** – That the minutes of the Joint Commissioning Board Meeting held on 15 September 2008 be agreed and signed by the Chairman subject to amendments to paragraph 20.3. (1) Second sentence of small type - *It is recommended* to read "it is agreed". Paragraph 20.3 (6) Second sentence of small type - *It is recommended* to read "it is approved".
- 25.2 Councillor Taylor referred to paragraph 19.2 of the minutes in which he had requested a report on Adult Social Care & Health funding. The Director of Adult Social Care & Housing replied that it had not been agreed to bring a report to this meeting. Details of the budget would be presented to the Joint Commissioning Board in February 2009.

**26. CHAIRMAN'S COMMUNICATIONS**

- 26.1 There were none.

**27. PUBLIC QUESTIONS**

- 27.1 There were none.

**28. FINANCIAL PERFORMANCE REPORT - MONTH 6**

- 28.1 The Director of Finance (PCT) presented a report which set out the financial position of the pooled budgets at the end of Month 6, and the forecast year-end outturn. It highlighted emerging pressures and set out measures to address these pressures. (for copy see minutes book).
- 28.2 Richard Ford reported that officers had been assertively managing the way people accessed care within substance misuse services. Meanwhile, all placements were being reviewed within adult mental health.
- 28.3 Janice Robinson noted the good progress made in a number of areas. She asked what had been done to get the Integrated Equipment Store back on course. John O'Sullivan explained that management arrangements had changed at South Downs. Rita Garner, Assistant Director, Community Care now managed this area. Improvements had been due to management focus and attention. However, this area would be closely monitored for the rest of this year and for the year 2009/10.

- 28.4 The Director of Community Care (Adult Social Care) stressed that a longer term solution was needed to decide what to do with the store. A focus group would meet next week. There was a need to look for a model for Brighton. The Lead Commissioner, Older People PCT reported that there had been a strong focus on the store this year. There was still some scope for further efficiencies.
- 28.5 **RESOLVED** - (1) That the financial position of the pooled budgets - forecast at breakeven – and the actions underway to manage the pressures within the system, be noted.
- (2) That the change in the underlying position on the budgets for working age mental health services, and the implications of the agreed risk share be particularly noted.
- (3) That the ongoing work to review the value for money of the Dementia at Home service be noted.
- (4) That the progress on the substance misuse and community alcohol services tender be noted.
- (5) That the arrangements for the transfer of PCT funds to Local Authorities in 2010/11 in respect of social care for adults with learning disabilities, and the proposed figure for transfer be noted.

## **29. REVIEW OF LEARNING DISABILITY COMMISSIONING STRATEGY AND 3-YEAR FINANCIAL PLAN**

- 29.1 The Board considered a report of the Director of Adult Social Care & Housing which presented an attached Learning Disability Commissioning Strategy for Brighton & Hove 2009-2012. The strategy set out how social care and specialist health services for people with learning disabilities that are funded through the Section 75 agreement would be commissioned over the next 3 years (for copy see minutes book).
- 29.2 The Director of Adult Social Care & Housing explained that the report had already been agreed at the Housing Cabinet Member Meeting. More detailed plans would be considered in a budget report in February 2009.
- 29.3 Councillor Norman considered that the strategy should be endorsed. He was particularly interested in the personalisation aspect to the strategy.
- 29.4 Janice Robinson considered the strategy to be excellent in terms of the broad direction of travel. She was pleased it focused on extra demand. She hoped that the Board would receive a more detailed strategy in due course, with more information on costs, and specifics on what would be done to meet these aims.
- 29.5 Denise Stokoe asked if there was going to be a financial strategy to move more provision to people with mild learning difficulties. Diana Bernhardt, Head of Supporting People & Lead Commissioner for Learning Disabilities replied that officers were looking at the services being provided at that low level. The services were being remodelled to be more responsive.

- 29.6 Richard Ford agreed with the idea of supporting people with autism disorders. The Sussex Partnership Trust had opened up a small scale assessment for people with autism disorders. Existing resources needed to be remodelled. Diana Bernhardt reported that there would be an autistic strategy.
- 29.7 The Deputy Director of Strategic Commissioning PCT welcomed the strategy but recognised that more work needed to be carried out regarding a holistic approach to health. There would be a much more detailed action plan in the future.
- 29.8 Councillor Taylor referred to paragraph 5.2 - Financial Implications. He asked what strategies were in place to make the £30 m stretch further taking account of inflation and an increased number of people using the service by 2011. What would be done to protect low level need from high level expensive needs?
- 29.9 Diana Bernhardt drew attention to the 3 year Financial Plan, Targets and Timescales set out in the Strategy. This showed the direction of travel for the following three years. The Director of Adult Social Care & Housing stressed that there was a shift from expensive acute care to targeted prevention.
- 29.10 Councillor Taylor referred to the 33% allocated for self directed support and asked how this figure was calculated. The Director of Adult Social Care & Housing explained that 33% of the budget was allocated for self directed support and this equated to roughly about 33% of people. She would like to see an increase in Self Directed support in future years.
- 29.11 The Head of Financial Services stated that when the budget was presented to the Board, it would detail the different costs.
- 29.12 Councillor Taylor stressed that by 2012, 60% to 70% would not have accepted self directed support. He asked for assurance that their needs would be met. Diana Bernhardt replied that there was a lot of emphasis in the strategy on continuing to improve work in existing services. There was no reason why people receiving existing services should not have their service personalised.
- 29.13 **RESOLVED** - (1) That the Learning Disability Commissioning Strategy for Brighton & Hove 2009-2012 attached as Appendix 1 be agreed.

(2) That it is noted that the amount estimated by the council for the transfer of learning disability social care funding and commissioning from Brighton & Hove City Teaching Primary Care Trust to Brighton & Hove City Council of £6,150,498 in 2007/8 (as set out on page 25 of Appendix 1) has been submitted to the Department of Health as required on 1 December 2008.

### **30. DEMENTIA CARE AT HOME - REVIEW OF PERFORMANCE AND SUGGESTED WAY FORWARD**

- 30.1 The Board considered a report of the Director of Strategy, Brighton & Hove City PCT which set out the Dementia Care at Home's performance to date, and outlined recommendations for the development of a more detailed options paper for the future of

the service, which would be presented to a future Joint Commissioning Board Meeting (for copy see minute book).

- 30.2 The Deputy Director of Strategic Commissioning PCT presented the report. The Board were asked to support interim arrangements for the service whilst options for future commissioning, within the community care funding allocation, were explored.
- 30.3 John Dearlove asked whether the £873,865 allocated for DCAH had already been spent on the 11 people receiving care. Richard Ford replied that the money had been spent on very intensive care for people. There were a reduced number of people receiving the service but the numbers would be increased to 20. This year there had been a 3% reduction in nursing care. This was part of a radical change in Older Peoples Services. There was a need to ensure the continuation of the Dementia at Home Service with revised criteria in place for an interim period whilst the options paper was being developed.
- 30.4 Colin Lindridge, Associate Director, Older Peoples Mental Health, SPT reported that officers had reviewed the eligibility criteria for dementia care at home. They were also looking at ways of being more proactive in helping carers cope, for example by providing short term breaks. Some service users had received costly 24 hour care at first. One service user was still receiving 24 hour care. This was being reviewed.
- 30.5 Denise Stokoe stressed that the Board required an all options report about the future of the service with the possibility of decommissioning the service. There also needed to be an update on care places in the city. Janice Robinson concurred. She suggested that the review should consider whether there is evidence of advocacy in providing services in the home. With regard to equity issues, she asked if a person without a carer would receive help. She further asked about the unit cost of the service. How did this compare with other service users such as people with learning difficulties?
- 30.6 Colin Lindridge replied that not having a carer did not stop people accessing the service. John O'Sullivan stated that it would be helpful to have a future paper on the impact of DCAH on the acute trust or the local authority service. There was a need to learn lessons and apply them to a range of services.
- 30.7 Geraldine Hoban, Deputy Director of Strategic Commissioning PCT reported that the feed back from service users had been very supportive for this type of care. However, she agreed that officers must see if the service could be made cost effective.
- 30.8 The Director of Adult Social Care & Housing reported that a National Dementia Strategy was being launched on 16 December 2008. There would be some remodelling as a result of the strategy.
- 30.9 **RESOLVED** - (1) That the interim service model be approved whilst future commissioning options are determined.
- (2) That a Joint Commissioning Board meeting be convened in February 2009 to ensure that there is an agreed way forward prior to the start of the new financial year. This will enable the development of future commissioning arrangements within the community care allocation.

**31. CAMHS (CHILD AND ADOLESCENT MENTAL HEALTH SERVICE)  
COMMISSIONING AND SERVICE DEVELOPMENTS**

- 31.1 The Board considered a report of the Director of Children's Services and the Director of Adult Social Care & Housing concerning proposed service development for 14-25 year olds, Child and Adolescent Mental Health Service (for copy see minute book).
- 31.2 The Commissioning & Partnership Manager reported that a national CAMHS review had been published on 18 November 2008. Many authorities struggled with the transition from CAMHS services to adult services. The proposals addressed these issues. At the heart of the proposals was an additional resource of 5 young peoples mental health workers, based in youth hubs in the city (Blatchington Road, Ship Street and the 67 Centre). This would ensure young people could access a whole range of support.
- 31.3 John Dearlove asked about the current arrangements; why would the new service centres make it quicker to access services and how many people were aware of the centres? The Commissioning & Partnership Manager reported that at the moment young people were referred within 13 weeks. Young people did not find it easy to use normal referral routes. They were not accessible or easy to use. The service centres would have young people's mental health workers working alongside colleagues. Officers would be publicising the service centres.
- 31.4 Denise Stokoe asked how officers could ensure equity in the service. There was a danger that there would be a two tier service. The Commissioning & Partnership Manager explained that if a young person presented at a GP's surgery, officers would not want to stop that option. Once the referral was made, it would be passed to the Child and Adolescent Mental Health Service. The young people's mental health worker would take on the referral and provide individual support. It was emphasised that the 5 mental health workers could not carry the work load of all the young people. They would need to ensure that young people were linked to the appropriate services.
- 31.5 Richard Ford stressed that it was crucial to develop a more systematic way of working. Teenagers and young adults currently received poor access to services. He was encouraged by the proposals.
- 31.6 The Commissioning & Partnership Manager reported that there was a need to measure outcomes for young people. There had been a response from young people about how they feel about the service now. This should be compared with how they feel about the service in a year's time.
- 31.7 The Chairman requested an update in due course, in order for the Board to judge the success of the proposals.
- 31.8 **RESOLVED** - (1) That the model of service for 14-25 year olds with mental health needs be agreed.

The meeting concluded at 6.31pm

Signed

Chair

Dated this

day of

