

APPENDIX 1

Extract of Executive Board and Executive Board Sub Committee Minutes Relevant to the Health Policy and Performance Board

EXECUTIVE BOARD MEETING HELD ON 3 MARCH 2011

EXB98 INVITATION TO BE AN EARLY IMPLEMENTER – HEALTH AND WELLBEING BOARDS

The Board received a report of the Strategic Director, Adults and Community on the Department of Health invitation to Local Authorities to become an Early Implementer for Health and Wellbeing Boards.

The Board was informed that, as part of the proposals for health reforms, the Government had recently announced the establishment of Health and Wellbeing Boards. The Boards would bring together Councils with NHS Commissioners, working to join up services across the NHS, Public Health, Social Care and Children's Services. Elected Members would have a statutory responsibility to be members of the Health and Wellbeing Board along with relevant GP Consortia and membership would also include Directors of Children's Services, Adult Social Services and Public Health as well as local HealthWatch.

Members were advised that Health and Wellbeing Boards would take the lead on developing a shared understanding of local needs (through the Joint Strategic Needs Assessment) and setting the priorities and strategy for health and wellbeing for the local community. The strategies would inform commissioning plans for NHS commissioners and councils, providing a basis for joint working and commissioning. It was noted that, subject to parliamentary approval, Health and Wellbeing Boards would be established from 2013, running in shadow form from 2012 with 2011/12 being a transitional year.

RESOLVED: That

- 1) the contents of the report be noted ;and
- 2) the application to become a Department of Health Early Implementer be approved

EXECUTIVE BOARD MEETING HELD ON 31 MARCH 2011

EXB110 NHS SUPPORT FOR SOCIAL CARE

The Board received a report of the Strategic Director, Adults and Community on recent announcements about NHS support for Social Care.

The report advised that, on 5th October 2010, the Department of Health announced that an additional £70m would be allocated to Primary Care Trusts (PCTs) for spending in 2010/2011 on services to promote better re-ablement services for patients upon discharge from hospital. The PCTs were requested to work in partnership with Local Authorities, community services and Acute Trust partners to develop plans on the best way to use this funding, to facilitate seamless care for patients on discharge from hospital and to prevent avoidable hospital readmissions. A proportion of the funding would be used to develop current re-ablement capacity in the community and the PCT was allocated £488,000 for Halton and St. Helens. For Halton, this funding provided additional Intermediate Care Beds and Community Re-ablement.

In addition, on the 4th January 2011, the Department of Health announced a further allocation of £162m to PCTs for immediate spending on social care services that benefit the NHS but which must be committed by 31st March 2011. It was noted that the allocation for Halton Council was £427,000.

Due to the short notice on this allocation, a meeting was arranged by the PCT to agree spending for this financial year, and details of the agreed allocation of funding, were incorporated in the Partnership agreement.

RESOLVED: That

- 1) the report be noted; and
- 2) on the basis of the National Guidance, the Adults and Communities Directorate be authorised to enter into a partnership agreement with NHS Halton and St Helens on behalf of Halton Borough Council

**EXB115 OUTCOME OF THE CONSULTATION TO MODERNISE
AND INTEGRATE DAY SERVICES AND OPPORTUNITIES
FOR ALL ADULTS**

The Board received a report of the Strategic Director, Adults and Community on the outcome of the consultation to modernise and integrate day services and opportunities for all adults.

The Board had received a report on 13 January 2011, which outlined the key issues and development plan for the modernisation and redesign of Day Opportunities for Older People and Adults, which sought approval to

begin formal consultation with key stakeholders, on the future provision of services. The focus was on:

- Integration of Sure Start To Later Life and Community Bridgebuilders to provide a single access point to all day opportunities and Early Intervention services- providing a service for all adults;
- Decommission Older People's Community Day Services, in its current format, and further develop alternative day opportunities within the community, ensuring these were utilised more effectively across all client groups;
- De-commission Pingot and the service be delivered in its entirety from within the community as the "Hub and Spoke" model; and
- Oakmeadow Day Centre- to develop as an alternative enablement model, integrated with Adult Day Service as a Community Resource Model.

Details of the consultation were outlined in the report for Members' consideration. It was noted that the Health Policy and Performance Board (PPB) had considered a report at its meeting on 8 March 2011, on the proposals and ongoing discussions had taken place with the Chair and Deputy Chair of the Health PPB as well as the Portfolio holder for Health and Adults.

RESOLVED: That

- 1) the contents of the report be noted; and
- 2) approval be given to implement the following proposals:
 - i) to integrate the staffing groups for Sure Start To Later Life and Community Bridge Building Service;
 - ii) to de-commission Older People's Day Services within the current format and work in partnership with the Third Sector;
 - iii) redesign the current provision of Day Care within Oakmeadow, and implement the Business Plan for Oakmeadow Community Resource Centre; and
 - iv) to de-commission Pingot Day Centre as a base for the delivery of Day Services.

**EXECUTIVE BOARD SUB COMMITTEE MEETING HELD ON 12
FEBRUARY 2011**

**ES72 INVITATION TO TENDER FOR A COMMUNITY BASED
RECOVERY ORIENTED SUBSTANCE MISUSE SERVICE**

The Sub-Committee considered a report of the Strategic Director, Adults and Community which sought authority to carry out all the necessary steps in relation to the open tendering and commissioning of a community based recovery oriented substance misuse service.

Currently, there were four organisations co-located at Ashley House providing a range of drug and alcohol services; 5 Boroughs Partnership NHS Foundation Trust, ARCH Initiatives, Addaction and Trust The Process Counselling. Whilst performance from each of the current providers was good and many of the building blocks required to produce a recovery orientated substance misuse service were in place, it was anticipated that the following benefits would accrue from a re-commissioning of services:

- a more streamlined and integrated service;
- an improved response to the changing patterns of substance misuse;
- efficiency savings both in terms of operational delivery and performance management;
- improved support for families and those individuals who achieved abstinence;
- a greater awareness in communities of the issues around recovering from addiction; and
- an improved access to services for those individuals whose alcohol use is problematic.

It was proposed that Halton Borough Council and Halton and St. Helens PCT would jointly commission the new substance misuse service, bringing together the resources that currently separately fund the alcohol and drug services. Children and Young People services and in-patient detoxification would not be included in the tender.

It was anticipated that the new contract would commence on 1st September for a two year period, and whilst current funding allocations for drug services were not currently known, it was anticipated that the yearly contract value for a substance misuse service (drugs and alcohol) would be in the region of £3.4m. In addition it was noted that Ashley House was rented by the 5 Boroughs Partnership Trust from a private landlord. Alternative arrangements would need to be established if they ceased to be the service provider from the 1st September 2011.

RESOLVED: That

- (1) the Strategic Director Adults and Community proceeds with the open tendering and Procurement of a community based recovery orientated substance misuse service and proceeds with the award of the necessary contract; and
- (2) the Strategic Director, in consultation with the appropriate portfolio holder, be authorised to take such actions as are necessary to give effect to the above decision.

EXECUTIVE BOARD SUB COMMITTEE MEETING HELD ON 3 MARCH 2011

ES78 EXTEND SUPPORTING PEOPLE CONTRACTS

The Board considered a report by the Strategic Director Adults and Community which sought a suspension of relevant standing orders in order to extend existing Supporting People contracts to the dates outlined in the report.

Members noted that due to the late notification of the financial settlement and the subsequent uncertainty about budget setting for individual service areas it was decided to minimise the risk to Halton Borough Council by not entering into tender processes for services which were due to expire on 31st March 2011. It was requested Supporting People contracts be extended until the dates outlined subject to budget provision.

An extension to existing contracts would enable the proposed efficiencies for 2011/2012 to be realised, and give the opportunity for further efficiencies to be identified and achieved in 2012/2013 as follows:

- following the remodelling of floating support services, it was proposed to tender for floating support services and homeless services in September 2011/2012 to be implemented in 2012/2013; and
- a strategic review of sheltered services would be undertaken in 2011/2012 with a view to re-tender those services in 2012/2013 with contracts to be awarded for 2013/14.

RESOLVED: That

1. in the exceptional circumstances set out below (namely to avoid long term funding commitment when external funding uncertain) for the purpose of Procurement Standing Order 1.8.2, procurement standing orders 2.1 to 2.15 be waived on this occasion because compliance with these Standing Orders is not practicable for reasons of urgency which could not reasonably have been anticipated to permit the extension of the existing Supporting People contracts

(listed at Appendix A) to the dates indicated, subject to variations with regard to contract price and contract capacity as agreed by the Operational Director (Prevention and Commissioning) at an estimated price of £3,797,200;

2. subject to the expiry of full Supporting People contracts granted under a waiver due to the exceptional circumstances set out in section 3 and 4.1 of this report, Supporting People services will be procured through a competitive tendering process detailed in section 3.7 and 4.1 of this report; and
3. the Strategic Director, Adults and Community, in conjunction with the Portfolio Holder for Health & Adults, be authorised to take such action as necessary to implement the above recommendation.

EXECUTIVE BOARD SUB COMMITTEE MEETING HELD ON 17 MARCH 2011

ES84 WAIVER OF STANDING ORDERS: EXTENSION OF RESIDENTIAL CARE CONTRACTS FOR PEOPLE WITH LEARNING DISABILITIES AND MENTAL HEALTH

The Sub Committee considered a report which sought approval for a suspension of the relevant procurement standing orders 3.1-3.7 and to authorise the Strategic Director Adults and Community in conjunction with the portfolio holder for Health to enter into a contract with the providers of residential care at Wide Cove, Smithy Forge, Leahurst and Woodcroft on a spot purchase basis from April 2011 to the end of March 2012.

In addition, the report sought approval to waive procurement standing orders 2.1-2.11 and to authorise the Strategic Director Adults and Community in conjunction with the portfolio holder for Health to enter into a contract with the providers of residential care at Holmdale, Glenwood and Bankfield, on a spot purchase basis, with an option to extend for a period of up to a further three years from April 2012 to the end of March 2015.

It was noted that at a previous meeting of the Committee held on 19th November 2009, the Strategic Director, Adults and Community in conjunction with the portfolio holder for Health was authorised to enter into “spot purchase” contracts to 31st March 2011.

Members were advised that the proposed rates set out in the report were competitive when compared with regional and national averages. Ongoing monitoring of services would ensure the standard of quality achieved by these providers was maintained. In addition a full cost analysis would be conducted to ensure any opportunities for efficiency savings were being explored by the provider.

It was also reported that a review of the accommodation and support being offered had been undertaken throughout 2010 with the residents and provider.

RESOLVED: That

- 1) In the exceptional circumstances set out below, for the purpose of standing order 1.8.2, procurement standing orders 3.1 – 3.7 be waived on this occasion to permit the Strategic Director, Adults and Community to enter into contracts on an individual 'spot purchase' basis with the providers of registered Residential Establishments at:

Wide cove, Smithy Forge, Leahurst and Woodcroft which meet the Council's quality criteria on the basis that the review of services has concluded that no remodelling is required at this time;

- 2) in the exceptional circumstances set out below, for the purpose of standing order 1.8.2, procurement standing orders 2.1-2.11 be waived on this occasion to permit the Strategic Director Adults and Community to enter into contracts on an individual 'spot purchase' basis with the providers of registered Residential Establishments at:

Glenwood, Holmdale and Bankfield on the basis that these non-health services for which commissioning responsibility transferred from NHS Halton and St Helens to the Council in April 2009, meet the Councils' quality requirements; and

- 3) the strategic director, adults and community be authorised, in consultation with the portfolio holder for health, to enter into 'spot purchase' contract arrangements at the rates set out in section 6.1 of this report, for the contract period in line with other residential contracts in the borough which is one year from April 2011 to the end of march 2012, with an option to extend for a period of up to a further three years from April 2012 to the end of march 2015: and that these purchasing arrangements be reviewed on an annual basis by the strategic director, adult and community, in

consultation with the portfolio holder for health. fee levels initially to be in line with current rates paid and uplifted by 2% as agreed by the council in setting its budget for 2011/12 and to then be reviewed following actions in 4.1 to ensure ongoing value for money is secured.

ES85 INFLATIONARY UPLIFT FOR ADULT SOCIAL CARE CONTRACTS

The Sub-Committee considered a report of the Strategic Director Health and Community which sought approval for the inflationary increases for the Adult Social Care Contract. The Council had approved a 2% Inflationary Uplift on Social Care Budgets for 2011-12, therefore it was proposed that contracts for the provision of domiciliary care, residential and nursing placements were awarded an equivalent inflationary uplift of 2%.

With regard to Out of Borough Placements, it was proposed that the inflationary increase applied to Out of Borough Placements be decided on a case by case basis as follows:

- providers to be informed that inflationary increase would be subject to submission of a written request to HBC Contracts Department within a specific timeframe; and
- any increase within the agreed HBC rate of 2% to be approved and applied.

Any increase above 2% would be approved by a relevant Operational Director, based on the information submitted by the provider, confirmation of the host authority's approved inflationary rate and the knowledge of the on-going need for the specific service.

RESOLVED: That

1. an inflationary uplift for providers of Domiciliary, Residential & Nursing contracts of up to 2%, which is within the inflationary allowance by the Council to Social Services for 2011/12 be approved; and
2. inflationary uplifts for out of borough Placements are awarded on a case by case basis, limited to the 2% HBC inflationary increase or the prevailing Local Authority rate be approved.