

BRIGHTON & HOVE CITY COUNCIL

OLDER PEOPLE'S COUNCIL

10.15am 15 NOVEMBER 2016

ROOM G79, HOVE TOWN HALL, NORTON ROAD, HOVE, BN3 3BQ

MINUTES

Present: Colin Vincent (Chair), Penny Morley, Mike Bojczuk, John Eyles and Lynne Shields

Co-opted Members: Nick Goslett, John Cook and Jack Hazlegrove

Others Present:

PART ONE

253 UPDATE ON RESIDENTIAL AND DOMICILIARY CARE

253.1 Jane MacDonald began by explaining that she was the Commissioner for services for older people. The officer responsible for quality monitoring was Marnie Naylor and she had provided a link to her team's most recent report. There were 39 home care agencies in the city and the council worked with most of them, some more actively than others. There was a big undersupply of home care places and the council was seeking to increase the number of providers.

253.2 To develop the new home care contract which started on 5th September 2016, the service specifications had been written by the commissioners with the input of stakeholders such:

- BME and LGBT users
- younger people with physical disabilities
- people with learning disabilities
- current and future providers.

253.3 The contract covered all adults and was jointly managed by the council and the Brighton & Hove Clinical Commissioning Group (CCG). It will last for five years, with the option to extend for a further 2 years and has break clauses. The core work is being provided at a rate of £17.24 per hour (based on figures suggested by the UK Home Care Association to provide a fair and sustainable price). This rate takes into account the costs of:

- the council administering the collection of the client contribution
- compensation for non-starter assessment visits.

253.4 Then enhanced work will be paid for at £19.24. These rates will give a wage of £8.25 per hour, with higher levels at times such as weekends (compared to the living wage of £7.20) and it is hoped to attract more workers. If the work is not picked up by the provider, it will go to the back-up provider. If it is not taken up by the back-up, it will go to adam, a dynamic purchasing system which is used across a range of services such as learning disability services. The system collects a lot of key performance indicators which will be:

- Smart – not doubling up the CQC figures
- Monitored robustly
- Published and in time will be made public.

253.5 This was welcomed by the OPC who felt families would like as much data as possible, but they were concerned that the most vulnerable could be left to receive services from the least well performing organisations.

253.6 Jane Macdonald explained that the contract is outcome focussed rather than time and task. For example if a user receives £100 p.w of care, the home care agencies work with the user and provider on the best way to meet their assessed need. This could mean banking hours to keep for a special occasion e.g. family birthday. They are working with Parking, as this is a major issue for service providers especially in central Brighton.

253.7 The Commissioning team managed contract compliance and Impetus worked with users to gain feedback. The Quality Team work on projects and audit issues, and work with Healthwatch who collects soft data and RAG rates providers. Jane Macdonald explained that any package of care arranged through adam will be awarded 60% on quality and 40% of price. This serves the following purposes:

- To grow the market by enabling smaller providers to enter the care market
- Some packages are very complex and costly, needing individual negotiation and so it is fairer to have a bidding process
- Offer packages of care in a more timely manner.

253.7 At the moment the aim is to resolve 5% of packages this way, but intend to move to 15%. Quality is currently based on the CQC rating, but hoped to involve stakeholders. All providers have to be registered with the CQC and must not have a rating of 'inadequate'. The OPC asked about an organisation which had been referred to the ombudsman, and were reassured that they were working closely with the organisation to resolve this issue for next spring.

253.8 There was a protocol to deal with organisations which don't meet the performance standards, which included agreeing an improvement plan and the potential to lose ones 'lead' or 'back up' provider status. This would not be done lightly as it was hard to find an alternative provider to step in, but a provider could be suspended and incremental improvements sought.

253.9 Jane Macdonald then moved onto the issue of care homes. She explained that there were currently 77 care homes providing 1,213 beds. 26 of these homes provided

nursing (986 beds). While this was the level of need for this service in the city, there was a serious undersupply of beds as the council could not access all these beds, due to the higher rates attracted for self funders – who may be paying around 25% more for a superior room. The council was paying a rate of £543 per week, or £699 with nursing.

253.10 The council was working to grow extra care housing, such as Brook meade opening next year, as well as homecare in the community. Concern was expressed about the costs of some of the care being arranged privately which could be much more than services commissioned by the council. Jane informed the OPC that self funders tended to go into care homes earlier. They would look next year into a new offer for those leaving hospital, such as urgent and rapid home care. There would be recommissioning to improve the offer with the aim of increasing the supply and addressing issues such as the correct numbers of staff and proper medication – which are also ‘systems’ issues. Organisations such as Age UK and the Red Cross were involved in this process. Jane agreed that the systems needed to be simplified and made more transparent, with increasing clarity about what services a user will be liable to pay for.

253.11 Arrangements saw the NHS paying the costs for the health need and the council paying for the adult social care, meaning the council pays the greater amount. She explained that they were working with the Head of Pharmacy at the CCG to resolve issues of concerns to service users and develop training packages for care homes. There were many improvements such as clearer systems and a fairer price being paid for care, but it was still a fragile market. Jane believed that the emphasis on providing services at the time wished by the client, freed up the provider to better programme their work. The OPC agreed that it may invite Marnie Naylor to speak to them about quality monitoring

254 MINUTES

253.1 The minutes of the previous meeting were agreed as a true record, if remove the words ‘when needed’ from para 249.1 and replace with ‘continue working as a member of the OPC.’

253.2 Matters arising:

Mike Bojczuk to provide Colin Vincent with the contacts list (32 people).

Grey Matters, still awaiting confirmation but informal indication.

Age UK looking for community volunteers.

To put on January agenda the election of a Vice-Chair.

Karen to find out comparable costs of meeting rooms in Hove Town Hall and public accessibility of the rooms.

255 PROCEDURAL BUSINESS

254.1 Apologies had been received from Francis Tonks.

256 BRIGHTON CITIZEN'S HEALTH SURVEY

255.1 Dr Carl Walker introduced himself as a psychologist, working in the field of community approaches to mental health at the University of Brighton. He explained that his

research began by hearing from users about their access to services and their struggles to get help from crisis teams. As a local resident he had noted that Optum had been awarded the contract for referral management services, whereby patients are referred through from their GP to the triage service. This service had previously been carried out by BICs, a social enterprise, whereas Optum is a subsidiary of US company Southern Health (which has been subject to a number of controversies).

255.2 Dr Walker raised his concerns about Optum in a public question to the Health & Wellbeing Board (HWB). He is concerned that the Health & Social Care Act meant that Clinical Commissioning Groups (CCGs) do not have the remit to consider whether a service is supplied by a public or private provider. For example, when the local CCG is consulting about GP services, it does not ask 'value' questions about who the public would prefer to tender for these services. To address this, he designed a survey which asked the public their views on:

- Current controversies such as Coperforma (Patient Transport Service)
- Value questions about the use of private providers and cuts to services
- What they would like to see in future service changes

255.3 This survey was sent to trade unions, universities, local groups and members of the public and gained 1,300 respondents. He submitted a deputation to the HWB about the survey results, where Cllr Yates the Chair described the results as 'strong & compelling.' He told the OPC that David Lilley, from Healthwatch, was setting up a learning community to enable the CCG commissioners and councillors to better reflect public concerns. He would be reporting the results of the second survey, in the form of a deputation, to the HWB on 22nd November 2016.

255.4 The findings included that people have very strong views about the recent closures of GP surgeries, such as its impact on travel times to new GP. The respondents reported finding it harder to see a GP in the last 12 months and called for a strategy to prevent further closures. 96% of respondents felt that the awarding of the PTS contract, to Coperforma a private sector company should never have happened. Dr Walker argued that better decisions would be made if these kinds of difficult questions were asked at the beginning of the process. 74% of respondents replied 'yes' that the due diligence process should have been part of the investigation.

255.5 Dr Walker explained that the PTS contract had been changed, attracting a different kind of bidder. He agreed that it was difficult to ask the public about healthcare changes such as the Sustainable Transformation Plan (STP) and it became more about public engagement than carrying out a survey. To help the public understand this issue, they were provided with online information from Michael Wilson (the STP footprint lead for Sussex and East Surrey) about the STP.

255.6 He was concerned that the do nothing savings for the locality represented an £580m deficit by 2021, but that the STP plans had been submitted without public consultation. This was due to national rules, however Birmingham and Camden had both gone against NHS England and published their plan – which could be done here. 97% of respondents to their survey were against the STP cuts in principle and 90% wanted public consultation before such changes. He stressed that the aim of these surveys was to provide useful information for commissioners.

255.7 The OPC raised their concern about the qualifications of the commissioners that are making these decisions. Dr Walker responded that there was a Commissioning College but there were large variables with some commissioners having support units and others where GPs undertake their own commissioning. It was hard to know how one's own locality worked, particularly as this could breach commercial confidentiality.

255.8 The OPC emphasised the need for community involvement in commissioning decisions, and wanted to know if this survey had been distributed in Patcham? While Dr Walker had put out the survey as widely as possible (using resources such as Community Works), given his lack of resources, he would be extremely obtain more contact information for areas such as Patcham for his third survey. Suggestions from the OPC included; Possability People (has a good network of groups working with older people in the city), the East Central North and West Hubs, churches, the council's Senior Housing Service – Peter Huntbach and Healthwatch.

255.9 The OPC expressed concern about the recent situation with SECAMB and Coperforma, and Dr Walker compared this to the concerns about deliverability of the contract for a reduced cost raised about the transfer from BICs to Optum.

255.10 The OPC mentioned a recent survey conducted by Healthwatch which had found 80% of people were happy with the Coperforma service. Dr Walker explained that the service had improved, but significant resources had been needed to get it better. His survey asked whether this service change should have happened in the first place. The OPC commented that NICE recommend that there should be community involvement, so wondered if they could fund the survey work being carried out. Dr Walker expressed a concern that this could limit the kind of questions included in their surveys. He confirmed that he had not quantified the costs of undertaking the first two surveys, but was currently putting together a bid for funding. This was because although costs to date had been that of staff and student time (based in spending three days each week lecturing and two days researching with students), but funding was going to be needed for this work to continue. The OPC felt that he should seek funding from the £5.4bn given to the voluntary sector each year in the UK.

255.11 The OPC welcomed these kinds of value questions being asked, which were the questions that should be asked by Healthwatch. Dr Walker was seeking funding to set up sites in six locations and would email the OPC about this. He felt that while Healthwatch sat on the HWB they did not have the freedom to ask challenging questions, which is why the university needed to. Healthwatch have asked the university to have a co-ordinated look with the CCG and HWB at the difficult questions. This process is just beginning. The OPC finished by saying that the setting up the STPs had shown flaws in the commissioning process and thanking Dr Walker for his valuable work.

Actions arising:

- The OPC to stay in touch with Dr Walker about his third survey and Mike Bojczuk to put the survey results supplied on the OPC website.
- John Cook to email Carl Walker with LAT and CAT contact information.

257 OPC WORK PROGRAMME

257.1 OPC members to come back to the December meeting with suggested speakers and meeting dates for 2017. Suggestions could include Impetus and GP clustering.

258 SECRETARY'S UPDATE

OLDER PEOPLE'S COUNCIL - SECRETARIAL REPORT - NOVEMBER 2016

- **City Parks Consultation** - letter sent to Councillor Mitchell outlining OPC concerns about the value of parks & open spaces to older people & the impact of budget cuts. Response received and circulated.
- **City Wide Connect** - information about Access & Transport discussion from Central Hub meeting circulated with details of safe handling for wheelchairs. Seeking to co-ordinate Transport in vol sector with need for more volunteer drivers & also investigating training for wheelchair handling.
- **CCG** - Caring Together Engagement event on 16th & 24th November about integrated care in Brighton & Hove. Details circulated & OPC members attending.
- **OPC Officers** - met on the 31st October to discuss progressing business re: speakers, meetings & correspondence & xmas lunch. Secretary also met with new OPC member John Cook.
- **Fairness Commission** - letter sent to Councillor Daniel subsequent to our meeting identifying our 3 priorities - social isolation, age friendly city & access and digital exclusion. Currently awaiting a response.
- **Possability People (previously the Fed)** - meeting held with Geraldine Des Moulins, Chief Officer on November 8th, to discuss a bid they were considering which included lay assessors. In the end they did not bid for this contract. Secondly, discussed their response to the Fairness Commission & in particular the recommendation that BHCC be fully accessible by 2020. Useful meeting, sent them our letter to Councillor Daniel & they are undertaking a survey with ex-Tower House users and they will keep us informed about results.
- **Age Friendly City Steering Group** - The next meeting will be on the 14th December at Hove Town Hall which will consider Healthy Ageing, Food & Nutrition. Circulated draft action plan, attached to the agenda, which outlines all of the past areas & actions covered by the steering group & is asking for comments. Any views/comments?
- **Age Friendly City Forum** - The next meeting is scheduled for the 12th December at Age UK at 10.30. The draft action plan will be circulated for discussion.
- **Palliative Care** - study by Kings College & Sussex Community NHS Foundation which OPC members participated in. Details & full report circulated.
- **Dementia Alliance** - details circulated about how to join the forum to gain information about activities and organisations within the alliance.

Invitations

- **Sussex Get Ready for Winter Event** - On the 14th November at Brighthelm at 9.30 for community groups.

- **HIV 50+** - Range of events during October & November linked with the Terence Higgins Trust.
- **Sussex University Students** - Seeking to observe OPC as part of an "Empowering Society" Project. Contacted & agreed for them to attend meeting.
- **Ageing Without Children (AWOC)** - Seeking to set up a local network. Meeting 15th November at 4.30 in Friends House, Ship Street contact 01258-440995. See www.awoc.org.
- **First Aid, Health & Well Being 50+** - free courses at The Bridge, Moulsecoomb throughout November covering a range of topics. Call 01273-687053.
- **Shop mobility Service** - Details circulated to hire scooter or wheelchair for Churchill Square, London Road or Montague House. Call 01273-323239 for details.
- **National Pensioners Convention** - Parliamentary Lobby on 2nd November with briefing circulated re State Pensions, Social Care & Universal Benefits.
- **City Wide Connect** - Improving Lives, Saving Money - 9th November at Sussex County Cricket Ground.
- **Positive Dementia Care** - Training for 2 days at cost of £130 at Jubilee Library. See creativityincare.org
- **Dementia Friendly Cookery Course** - & ongoing gardening sessions. Free, aimed at those with early stage dementia starting 16th November. Call 01273-431700 or jess@bhfood.org.uk for details.
- **Sussex Police & Crime Commissioner** - Public Consultation until the end of November about the Police & Crime Plan.
- **International Men's Day** - event with local volunteering organisations at the Friends Centre on Saturday the 19th November from 10.30. Call Chris Martin 01273-688117 for more information. Hot food & drinks.
- **Community Works** - voting for posts received after closure date.

Newsletters

- **CQC** - Reports on Caring Across Generations & State of Care & Deprivation of Liberty.
- **Age Action Alliance** - newsletters including info re designing communities for ageing societies.
- **DWP** - Christians Against Poverty - Freephone 0800-328006 for debt counsellor.
- **Fabrica** - Arts events in BHCC during October & November.
- **National Pensioners Convention** - Campaign bulletin for November showing large differences in life expectancy between London areas.
- **PPG** - notes from an event for PPG's on 3rd October circulated includes Q&A with John Childs CCG & details of grants for Community Health Fund.
- **Portslade LAT** - agenda & minutes from September meeting with local issues.
- **Healthwatch** - Newsletter with new online feedback centre Brighton Pulse. Press release re: departure of Coperforma.

- **Making our Communities Ready for Ageing** - a joint report in 2014 by Age UK & ILC UK circulated for information
- **Digital Brighton & Hove** - newsletter referencing our own OPC Digital Champion Mike
- **Community Works** - November newsletter with range of information & links.
- **Time to Talk Befriending** - Newsletter covering activities in the City

259 MEMBERS' UPDATE

Colin Vincent

- Health Overview & Scrutiny Committee (HOSC) – items raised included the Acute Stroke Service which will now be housed at the Sussex County. Committee informed that no-one will be impacted e.g. no one in an ambulance for more than 30 minutes. HOSC to monitor. Also the reports on SEACAMB and CQC.
- To Maidstone for the SENPC AGM where STP was raised and agreed that the National Pensioners Association should make it a campaigning issue.
- Also attended the Possability People meeting
- Went to the Resilience Forum and the OPC could invite them to a meeting. The Co-ordinator is Kevin Caxstone.

Mike Bojczuk

- Attended a couple of Albion in the Community meetings re: Cancer awareness
- SEEFA – London meeting on age friendly businesses. Older people people may be treated unfairly in shops and unmet needs in the market e.g. Ableware who produce women's clothes designed for ease of access.
- SHAG meeting where the main topics were the laundry and converting bedsits to one bedroom accommodation
- Digital Strategy Group meeting – the second round of reaching out to visit sheltered schemes and weekly sessions at Age UK
- Attended a planning meeting for the Homeless Night Shelter and inviting members of the OPC to volunteer for this scheme which offers shelter and feeds 20 homeless people, chosen as they are close to being rehomed in the community (e.g. by Brighton Housing Trust)
- Awaiting a quote with John Cook for the printing costs for the OPC leaflet, anticipated to be £70-80 for 1,000 leaflets.

Nick Goslett

Attended:

- A communicating in times of crisis meeting
- Community Works awards

Took a coachload of people to Portsmouth.

Jack Hazlegrove

Last month I:

- Took part in interviewing for a new Community Transport post
- Completed a falls prevention programme and would recommend it
- Attended the Community Works AGM
- Became a Director of Grey Matters

Lynne Shields

31st October 2016 OPC Officers Meeting at Brighthelm.

09/11/2016. OPC Meeting with Possibility People.

This will be covered in Penny Morleys Secretary's Report.

09/11/2016 Citywide Connect Report " Improving Lives : Saving Money 2014 - 2016"

The report outlined the work undertaken by CC in the last two years and an assessment of the positive outcomes achieved by the organisations involved in Citywide Connect.

The Report makes interesting reading. Those who contributed are people I admire for the work they carry out on behalf of the older residents of Brighton. The assessment is largely about the improvements in service provision as perceived by those delivering the service.

There has indeed been a beneficial change in the cultural working practices in these various organisations and the scheme was always about getting a variety of service providers to work better together. It was anticipated that a natural corollary of this improved cooperation would be an improved service delivery.

The sites My Life (a Council developed website intended as a "one stop" solution provider) and It's Local Actually (a Possibility People developed - and developing - site for information about activities and business solutions) are very useful and go a long way to providing the information that can improve the lot of older residents in Brighton and Hove.

As we know however this information and support is denied to the computer illiterate or those who do not have access to a computer. Those who probably need the services most. There are still many people falling through the "safety net". Far too many people are still unaware of the services that are available to them, and there is still some confusion about who delivers what to whom at what cost.

I applaud the work of Citywide Connect for making the best of the resources available (organisations, committed staff and limited funding) - but resources are still stretched and becoming more so.

09/ 11/ 2016 Age of Choice "Rethinking Life After 50"

This was an interactive event. Part of the Festival of Social Science. There were 3 presentations

- Jayne Raisborough - Challenging stereotypes of Ageing.
- David Lain - The Value (economic and emotional) of Grandparents as Carers.
- Andrea Jones - Living with Friends in Later years.

All celebrating the ageing process and outlining creative ways in which older people can value to their lives and the lives of others.

10/11/2016 GP Clusters; Supporting Health Priorities for People in Brighton and Hove

This was a three hour work shop organised by The CCG and run by Community Works. The most useful information shared was a map of the GP Clusters that were being proposed and information about the strategy and implementation plans for the project.

There were representatives of voluntary organisations, PPGs, clinical staff, Practice Managers, patients and those delivering alternative medicine treatment. The working groups collated information regarding services and activities available in the various "Cluster" areas and completed a "mapping" exercise.

My Life was again recommended as the best source for "One Stop" referral. Again it was acknowledge that this left a whole trench of people (those most in need!) marginalised if they had no digital access. Many of the voluntary attendees highlighted their services were very stretched and referrals were in unfeasibly high numbers.

I have requested the presentation be sent to me by email so that I can share the information with the rest of the OPC members.

I will share the report at The OPC Meeting to be held on the 15th November.

14/11/2016 Get Ready For Winter. Sussex Resilience Forum

Organisations include.

- Fire and Rescue
- Public Health England
- UK Power Networks
- National Energy Networks
- Ministry of Defence Support
- MoneyMatters
- Brighton and Hove Council

Interesting presentations. I did raise a question "The Resilience Team is calling on the general public to support services to overcome problems associated with limited funding. What support can be offered to the general public in carrying out these supportive actions" (an example had been given about the support the public could give in clearing drains of leaves - which I do on a regular basis - but where do I put the leaves? I can ask for the waste to be collected - but at my cost! I asked if compost boxes could be built at the end of road)

15/11/2016

OPC Meeting in the morning.

Falls Steering Group Meeting in the afternoon.

Adults Without Children Meeting late afternoon.

John Eyles explained that he had experienced mobility problems this month which had limited his activities.

260 ANY OTHER BUSINESS

260.1 The OPC were concerned whether the proposed boundary changes would mean that they should also alter their boundaries for their election. To wait and see the outcome.

The meeting concluded at 1pm

Signed

Chair

Dated this

day of

