

INTEGRATED COMMISSIONING BOARD

MINUTES OF MEETING Tuesday, 25 August 2020

PRESENT: G. Burgess (Independent Chair); Rochdale Borough Council - Councillors Brett, Heakin and Rowbotham; HMRCCG – Dr Bodrul, D. Dawson, J. Newton, Dr York.

OFFICERS: S. Rumbelow (Chief Executive / Accountable Officer), S. McIvor (Director of Commissioning), G. Hopper (Director of Children’s Services), N. Thornton (Director of Resources), J. Murphy (Chief Finance Officer), T. Harrison (Assistant Director – Commissioning), N. Baig (Assistant Director – Commissioning), S. Croasdale (Director of Integrated Systems Development), K. Hurley (Director of Operations and Executive Nurse), P. Dickinson (Communications & Engagement Manager), G. Davies (Finance Manager - Adult Social Care & Public Health), M. Garraway (Committees & Constitutional Services Manager).

APOLOGIES FOR ABSENCE: Councillor Iftikhar Ahmed and Dr Duffy

27 MINUTES RESOLVED

That the minutes of the meeting of the Integrated Commissioning Board held on 28 July 2020 be approved as a correct record.

28 DECLARATIONS OF INTEREST

There were no declarations of interest in relation to the agenda items to be considered.

29 HEALTH AND SOCIAL CARE POOLED BUDGET MONITORING REPORT JULY 2020

Consideration was given to a report of the Chief Finance Officer – Health & Social Care Integration, updating the Integrated Commissioning Board on the financial position of the pooled budget for the financial year 2020/21 as at the end of July 2020.

Members were informed the Covid-19 pandemic has caused a change in funding arrangements for the Clinical Commissioning Group, and there is uncertainty around the impact will have on both partners.

The CCG opening pool gap on the Health & Social Care pooled budget for 2020/21 was £4.1m. As at the end of July 2020 a £0.5m pool pressure in relation to Adult Social Care budgets. This had reduced from a £2m pressure reported in May primarily due to a non-recurrent £1m additional contribution from the Clinical Commissioning Group towards the cost of expensive placements and a forecast £0.5m underspend due to a reduction in residential placements.

Alternatives considered

It is a requirement of the Local Authority and National Health Service England to monitor budgets. This report updates the monitoring against the 2020/21 budget which is a requirement of the Section 75 agreement. Therefore no alternatives were considered.

RESOLVED

That the Health and Social Care Pooled Budget Monitoring Report be noted.

Reason for resolution

To comply with budget monitoring requirements.

30 THIRD PHASE OF NHS RESPONSE TO COVID-19

Consideration was given to a report of the Director of Commissioning detailing changes to ways in which the NHS was required to work in response to the Covid-19 pandemic.

Specifically the NHS had been asked to

- Restore full operation of all cancer services
- Recover Maximum elective activity prior to winter
- Restore delivery in community services and primary care
- Improve and expand mental health services and services for people with learning disabilities and or autism

Preparation for winter is required with the understanding that there may be a resurgence in COVID activity including

- Maintaining NHS staffing beds and capacity
- Delivering and expanded flu programme
- Expanding the offer of 111 First to reduce the demand on the hospital system
- Continued work with Local Authorities to support resilient social care services.

Additionally, there was a requirement to ensure that lessons are learnt from the initial covid response including workforce. The new NHS People plan "We are the NHS people plan for 20/21- actions for us all" has been published with a range of expectations for NHS organisations

- Keeping staff well
- Actions to address inequalities experienced by some staff including BAME staff
- New ways of working
- Growing the workforce

Alternatives considered

No alternatives were considered.

RESOLVED

That the report be noted.

Reason for resolution

The actions and developments in health are due to direct guidance from NHS England and NHS improvement.

**31 EXCLUSION OF PRESS AND PUBLIC
RESOLVED**

That the Press and Public be excluded from the meeting during consideration of the following three items of business, in accordance with the provisions of Section 100A (4) of the Local Government Act 1972, as amended.

Reason for resolution

Should the press and public remain during the debate on these three items there may be a disclosure of information that is deemed to be exempt under Parts 1 and 4 of Schedule 12A of the Local Government Act 1972.

32 ADULT SOCIAL CARE FEES 2021/22 – OPTIONS FOR CONSULTATION

Consideration was given to a report of the Assistant Director (Commissioning) which sought approval for consultation of proposed fee rate structure for a range of Adult Social Care services delivered by externally commissioned providers in Rochdale Borough; along with proposals to ensure that all care workers in all settings will be paid the Real Living Wage by 2023/24.

It was discussed that the Integrated Commissioning Board supports proposals to ensure that all workers are paid the Real Living Wage by 2023/24, concerns were raised regarding the financial viability within the current climate.

Alternatives considered

The Integrated Commissioning Board could set out alternative options provided the Council is able to set a balanced budget and manage the Adult Social Care Market to ensure adequacy of services to meet needs and demands of citizens seeking care and support.

RESOLVED

That the report be deferred to a future meeting of the Integrate Commissioning Board to enable the Chief Executive /Accountable Officer explore further alternative options for the funding of the proposals.

Reason for resolution

To enable further consideration of the proposals.

33 PRESENTATION - URGENT CARE SYSTEM

Consideration was given to a report of the Assistant Director – Commissioning outlining the One Rochdale Health and Care approach to the development of Urgent care, which included

- The progress made against the urgent care strategy for Rochdale and the Urgent care 10 point plan with changes made as a result of the impact of the COVID 19 pandemic.
- The progress made with the development of the Urgent care by appointment model and the its constituent parts including

- The preferred delivery model
- Decisions that need to be made
- The timelines to have the model in place
- The risks benefits and financial implications of the changes.

RESOLVED

That the report be noted.