COMMISSIONING PARTNERSHIP BOARD 24/09/2020 at 1.00 pm



Present: Majid Hussain (Chair)

Councillors Chauhan, Fielding, Moores and Shah

Ben Galbraith Chief Finance Officer CCG

Dr. Ian Milnes Deputy Chief Clinical Officer CCG
Dr. John Patterson Clinical Commissioning Group

Also in Attendance:

Mike Barker Strategic Director of

Commissioning/Chief Operating

Officer

Graham Foulkes Lay Member for Patient and Public

involvement

Dr. Shelley Grumbridge GP Governing Body Member - East

Cluster

Nicola Hepburn Director of Commissioning
Lori Hughes Constitutional Services
Anne Ryans Director of Finance

Dr. Andrew Vance GP Governing Body Member -

North Cluster

Mark Warren Managing Director Community

Health and Adult Social Care

Dr. Carolyn Wilkins OBE Chief Executive / Accountable

Officer

1 **ELECTION OF CHAIR**

RESOLVED that Majid Hussain be elected Chair for the duration of the meeting.

2 APOLOGIES FOR ABSENCE

Apologies for absence were received from Claire Smith, Helen Lockwood, Rebekah Sutcliffe, Dr. Gopi and Gerard Jones.

3 URGENT BUSINESS

There were no items of urgent business received.

4 DECLARATIONS OF INTEREST

There were no declarations of interest received.

5 PUBLIC QUESTION TIME

There were no public questions received.

6 MINUTES OF PREVIOUS MEETING

RESOLVED that the minutes of the Commissioning Partnership Board held on 23rd July 2020 be approved as a correct record.

7 INTEGRATED HEALTH AND SOCIAL CARE BROKERAGE FRAMEWORK

The Board gave consideration to a report which requested approval to tender and implement an integrated Health and Social Care Brokerage Framework. The report provided an

outline for the requirements of a brokerage framework, provided some content regarding historic attempts to implement such a framework and provided assurance that full consultation had taken place with all stakeholders.



As there were no current framework agreements in place, it was very difficult to monitor and manage funds related to brokerage services and there was potential risk for the Council in regard to being accountable for public funds. As more areas of health were delivered via a personal health budget, costs may increase, however it was unsure which of the health products would be delivered via a direct payment as yet. The introduction of the framework was more apparent than ever, especially following the implementation of other project workstreams, such as the Care at Home contract which resulted in an increase in brokerage services.

This framework would cover the administration of direct payments in line with the specification for adults and children's services and personal health budgets. As a consequence of the Care Act, local authorities were required to undertake assessments where people were in need. If residents were eligible for care needs and required support, there was a legal duty to determine how the individual would be supported through a support plan. When the support plan was agreed, a financial determined and the local authority or CCG would commission services. If the individual wished to commission their own support, from an employment point of view this could be quite difficult and would include the establishment of payroll and terms and conditions for the provider. If a brokerage service was in place, this could assist residents. Oldham currently had between 900 to 1,100 residents who chose to take direct payment. Since 2012, Oldham had progressed the personalised agenda.

A previous Cabinet report which had requested approval to tender for a brokerage service had technical difficulties and did not continue.

Members commented that the service needed to make sure it did not have a direct impact on service users and a framework created still giving residents choices where possible and ensuring they received the care they needed.

Members asked if there would be disruption to the broker being used currently or that would there be no disruption to care. Members were informed that there shouldn't be disruption and brokers would be recommended who were currently on the framework.

Members sought and received clarification on the direct payments and hourly rates, the move toward the Resource Allocation System and algorithms used to calculate the value of personal budgets. Members sought and received clarification on the payments made via direct payment and those payments through a contracted commissioned provider which would include overhead payments.



Options/Alternatives Considered:

Option 1: Retain the status quo.

Option 2: Cease Funding Brokerage Services Option 3: Tender for an approved framework

RESOLVED that the Commissioning Partnership Board would consider the commercially sensitive information contained at Item 9 of the agenda before making a decision.

NOTES:

- The Chair and Board offered congratulations to Councillor Chauhan and Dr.Grumbridge who had been recognised as being in the top 50 doctors in the who had made significant improvements during the Covid-19 pandemic.
- 2. The Board noted the appointment of Nicola Hepburn as Director of Commissioning.

8 EXCLUSION OF THE PRESS AND PUBLIC

RESOLVED that, in accordance with Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they contain exempt information under paragraph 3 of Part 1 of Schedule 12A of the Act, and it would not, on balance, be in the public interest to disclose the reports.

9 INTEGRATED HEALTH AND SOCIAL CARE BROKERAGE FRAMEWORK

Consideration was given to the commercially sensitive information in relation to Item 7 – Integrated Health and Social Care Brokerage Framework.

RESOLVED that the recommendations as contained in the commercially sensitive report be approved.

The meeting started at 1.00 pm and ended at 1.30 pm