

HEALTH & WELLBEING BOARD

Subject Heading:	Joint Commissioning Review of the NHS Support for Social Care programme
Board Lead:	Joy Hollister, Group Director - Children's, Adults & Housing, LB of Havering and Alon Stoward, Chief Operating Officer
Poport Author and contact datails:	Alan Steward, Chief Operating Officer, Havering CCG Julie Brown
Report Author and contact details:	Julie.Brown@havering.gov.uk 01708 432496

The subject matter of this report deals with the following priorities of the Health and Wellbeing Strategy

- Priority 1: Early help for vulnerable people
- Priority 2: Improved identification and support for people with dementia
- Priority 3: Earlier detection of cancer
- Priority 4: Tackling obesity
- Priority 5: Better integrated care for the 'frail elderly' population
- Priority 6: Better integrated care for vulnerable children
- Priority 7: Reducing avoidable hospital admissions
- Priority 8: Improve the quality of services to ensure that patient experience and long-term health outcomes are the best they can be

The NHS Support for Social Care programme was approved in March 2011. Through a series of pilot services it sought to deliver benefits to patients and service users and to provide financial savings through reduced service demand for Health and Adult Social Care (ASC) services.

The projects to establish these pilot services were initiated at various times since October 2011, the most recent being the Help Not Hospital service which became operational in October 2012. Progress reports and benefits realisation reports have been presented to this Board on a number of occasions over the past two years.

At the request of the Board, Joy Hollister, Group Director, Children's, Adults & Housing and Alan Steward, Chief Operating Officer of Havering CCG have initiated a joint commissioning review to provide a focused review of progress and the benefits that these services have delivered.

This report outlines the joint commissioning review process, the outcomes of which will inform future commissioning intentions and enable evidence based decision to be made on whether to:

- Mainstream the service, as a prelude to subsequent discussions on how it is funded and from when this will take place
- Continue with the existing service until the end of the current contract and then review again
- Continue the service with adjustments until the end of the current contract and then review again
- De-commission the service in line with contractual terms

RECOMMENDATIONS

- i. To approve the joint commissioning review process.
- ii. To advise if the Board wishes to receive a report on the outcomes of the review at its July 2013 meeting.

REPORT DETAIL

- In March 2011, the shadow Health and Wellbeing Board (HWB) agreed to use the Reablement and NHS Support for Social Care funding for the two financial years 2011/12 and 2012/13 to deliver a programme of pilot services with the aim of delivering benefits to patients and service users and providing financial savings to Health and Adult Social Care (ASC).
- 2. As a series of pilot services, the need for evaluation was always envisaged in order to determine the benefits that were achieved and to inform future commissioning intentions across both health and social care services.

- 3. The joint commissioning review will require the providers of each of the pilot services, alongside the transformation team project managers involved in establishing the services, to present to a panel using a consistent framework.
- 4. The panel members are:
 - Councillor Steven Kelly
 - Dr Gurdev Saini (Clinical Director)
 - Alan Steward (CCG)
 - Paul Grubic (interim Head of Adults Social Care)
- 5. Julie Brown (Transformation Programme Manager) will also be present in an advisory capacity to the panel.
- 6. The panel will take place on the 23rd May at Mercury House in Romford. The review will consider the service costs, and the potential savings and non financial benefits that the service provides.

The pilot services to be reviewed are:

Dementia services: Peer Support Information & Advice Additional Support for Carers Training and Development

Chronic Obstructive Pulmonary Disease (COPD) services: Pulmonary Rehabilitation Telehealth

Falls Prevention services: Training in Care Homes Outreach Programme Exercise Programme

Telecare services: On Track Learning Disabilities Rapid Response

Integrated Case Management

Help not Hospital service

- 7. Ultimately the review panel will make recommendations on the future commissioning of these pilot services to either:
 - Mainstream the service, as a prelude to subsequent discussions on how it is funded and from when this will take place

- Continue with the existing service until the end of the current contract and then review again
- Continue the service with adjustments until the end of the current contract and then review again
- De-commission the service in line with contractual terms
- 8. The recommendations will be accompanied by a rationale for the decision as elicited from the panel process and any decisions will then be taken by the Council in line with normal contractual procedures
- 9. Though there are a few exceptions, most of the pilot services are underpinned by contracts that run until 30th September 2013 with a minimum 3-month notice period. Therefore future commissioning intentions need to be clear and communicated to the provider organisations by 30th June.
- 10. A report on the outcomes of the joint commissioning review could be produced for the July meeting of the Board if this is the Board's wish.

IMPLICATIONS AND RISKS

Financial implications and risks:

The joint commissioning review does not itself entail any financial implications as it will be supported within existing resources, or risks, as the recommendations will be subject to a further decision process as necessary. The outcome of the review (which will inform future commissioning intentions) could have potential financial implications which can only be determined and considered once the review is complete.

Caroline May – Strategic Finance Business Partner

Legal implications and risks:

The outcomes of the review may result in the decommissioning of some services. As long as any service decommissioning is carried out in line with agreed contract terms at the stated contract end date the likelihood of any legal risk is limited.

Stephen Doye – Legal Services Manager

Human Resources implications and risks:

There are no direct HR implications or risks to the Council that can be identified at this time where delivery of the services under review is undertaken by an external provider. Any HR issues that may arise will be dealt with appropriately, in line with Council policy or employment legislation, once the outcome of the review is known.

Eve Anderson – Strategic HR Business Partner (Children's, Adults & Housing and Public Health)

Equalities implications and risks:

As part of the commissioning of the pilot services, equalities impact assessments were undertaken. The review process itself does not have any equalities implications and risks. The outcome of the review which will inform future commissioning intentions will need to take into account any potential equalities implications but these can only be determined once the review is complete.

BACKGROUND PAPERS

Previous reports on the NHS Support for Social Care programme to the shadow HWB during the period March 2011 to March 2013.