NOTTINGHAM CITY COUNCIL
CITY HEALTH AND SOCIAL CARE COMMISSIONING BOARD
MINUTES
of meeting held on 28 JANUARY 2011 at
Loxley House from 2.00 pm to 3.50 pm

Voting members
Nottingham City Council
✓ Councillor E Campbell (Vice-Chair)
✓ Councillor C Jones

NHS Nottingham City
Mr D Morrison (Chair) - Non-Executive member
✓ Dr I Trimble - Chair of Professional Executive Committee

Non-Voting members
Nottingham City Council
Mr K Foote - Acting Corporate Director for Communities
✓ Ms E Yardley - Director of Adult Social Care and Health
Ms C Brudenell - Director of Quality and Commissioning

NHS Nottingham City
Mr A Kenworthy - Chief Executive
Ms D Smith - Director of Delivery and Performance

Nottinghamshire Healthcare Trust
Mr J Walker - Associate Director, Performance and Partnerships

Nottingham University Hospitals Trust
Ms K Swinsco - Clinical Lead

✓ indicates present at meeting

Also in attendance
Councillor G Davie
Mr I Greatorex - Finance Service Partner
Ms M Harty - Head of Health and Disabilities
Mr M Leavesley - Constitutional Services Officer
Mr C Monkton - Head of Insight and Improvement
Ms C Routledge - Senior Health and Wellbeing Policy Officer

Nottingham City Council
In the absence of Mr Morrison, the Chair was taken by Councillor Campbell, the Vice-Chair.

29 APOLOGIES FOR ABSENCE

Apologies for absence were received from Mr Morrison, Ms Brudenell and Ms Smith.

30 DECLARATIONS OF INTERESTS

No declarations of interests were made.

31 MINUTES

RESOLVED that, subject in minute 19 to amending bullet point 1 to read ‘the integration of services into a single health and social care team, working across the City, had freed up nursing staff …….’, instead of ‘the integration of services into 10 health and social care teams across the City had freed up nursing staff ……’, the minutes of the last meeting held on 26 November 2010, copies of which had been circulated, be confirmed and signed by the Chair presiding at the meeting.

32 POOLED BUDGETS AND PARTNERSHIP ARRANGEMENTS – 2010/11 BUDGET MONITORING

Further to minute 18 dated 26 November 2010, consideration was given to a joint report of the Interim Corporate Director for Communities and the Chief Executive of NHS Nottingham City, copies of which had been circulated. Mr Greatorex, Finance Service Partner, Nottingham City Council, reported the following financial positions up to period 8:

<table>
<thead>
<tr>
<th>Service</th>
<th>Projected Spend</th>
<th>Expenditure to date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrated Community Equipment Services (ICES)</td>
<td>£4,208,285</td>
<td>£2,702,020</td>
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<tr>
<td>Learning Disability Development Fund</td>
<td>£753,260</td>
<td>£390,525</td>
</tr>
<tr>
<td>Community Neurological Service</td>
<td>£783,120</td>
<td>£390,525</td>
</tr>
<tr>
<td>Intermediate Care</td>
<td>£3,888,790</td>
<td>£2,387,150</td>
</tr>
<tr>
<td>Adult Safeguarding</td>
<td>£232,675</td>
<td>£42,220</td>
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The Board was informed that the City Council had published its Strategic Choices on the internet, with final budget recommendations being made by the Executive Board in February and final approval at Council in March 2011.
RESOLVED that the position of the pooled budgets as at period 8 be noted.

33 LEARNING DISABILITIES PARTNERSHIP BOARD (LDPB) – ANNUAL REPORT

Further to minute 52 dated 26 March 2010, consideration was given to a report of the Director for Adults’ Community Inclusion, copies of which had been circulated, highlighting key achievements and challenges during 2009/10, and detailing key priorities for 2010/11.

Ms Harty, Head of Health and Disabilities, Nottingham City Council, highlighted the following from the report:

Key achievements

- there had been a major focus on health improvement through promotion of the ‘Big Health Day’ in June 2009, Health Facilitation and Health Action Planning;
- the Board had:
  - funded a Person Centred Planning Co-ordinator and a citizen with learning disabilities to visit Sumero in Bosnia to advise on service development (the health professional was funded by Nottinghamshire Health Care Trust);
  - produced a DVD demonstrating the health benefits for people with learning disabilities of accessing sports and leisure opportunities;
  - produced an annual report for ‘Valuing People Now’, which was signed off by citizens with learning disabilities and carers;
  - continued to fund:
    - citizens with learning disabilities to help develop their skills as trainers, enabling them to obtain part time paid employment;
    - an Intensive Interaction project to train staff in provider units to better communicate with those with profound and multiple learning disabilities;
    - the ‘My Safe Home’ scheme, which enabled citizens with learning disabilities to part purchase their own homes;
- the ‘Smile, No Bullying’ project had worked with Nottingham City Transport to develop a learning disability awareness training programme for drivers;
- funded an Accessible Information Officer who had increased the range of leaflets and other publications in easy read format.

Challenges

- the Council’s Strategic Choices budget was of concern to the Board and a significant amount of Board time had been spent consulting over the following proposals:
  - a reduction in local authority day service provision provided for those living in independent residential care, with the residential providers meeting daytime needs;
to close Bestwood Day Service and re-develop Aspley Wood School as a replacement and to close Riverside residential unit and re-develop Oakdene residential service to offer more short breaks.

Key priorities

- a continued improvement to access to healthcare for people with learning disabilities;
- an increased range of housing options available for people with learning disabilities;
- an increase in employment opportunities for people with learning disabilities.

RESOLVED

(1) that the Board supported the use of the £193,099.78 balance of the PCT provided funds to support Learning Disability Services to fund schemes jointly agreed by health and adult services colleagues;

(2) that the report be noted and the Director for Adults’ Community Inclusion be requested to submit an update report to the July 2011 meeting.

34 NOTTINGHAM CITY STROKE STRATEGY - PROGRESS

Further to minute 62 dated 28 May 2010, consideration was given to a joint report of the Interim Corporate Director of Communities and the Chief Executive, NHS Nottingham City, copies of which had been circulated, updating the Board on progress against the 8 commissioning intentions within the Nottingham City Stroke Strategy following development of a patient pathway and analysis of the 20 quality markers within the National Stroke Strategy 2007.

Ms Brown, Commissioning Manager, NHS Nottingham City, highlighted the following from the report:

- the National Stroke Strategy grant (of £297,000 over 3 years) issued to local authorities, to pump prime and incentivise new service delivery, was due to end by April 2011. This currently funded a family and carer information service for Nottingham City, a Social Worker post and two Reviewing Officer posts within the Community Stroke Services and ensured that both health and social care needs were considered in the management of stroke patients and their carers;

  Pick-up funding had been identified by the PCT for the Social Worker post within the existing Community Stroke Services to support the sustainability of this service;

  For the remaining services affected, evaluations were currently underway until decisions were made regarding continuation.

- specific targets relating to community services, against a national set of improvement targets, included by April 2011:
  o 60% of all patients discharged from acute care would be supported by an Early Supported Discharge team;
  o 95% of all patients would be reviewed six months after leaving hospital;
40% of all patients would be assessed for psychological support six months after suffering a stroke.

- in December 2009, the Care Quality Commission (CQC) announced that it would be undertaking a national Special Review of Stroke Services in order to assess how well NHS and local authority communities were implementing the national Stroke Strategy’s Quality Marker objectives, with the review collating NHS and local authority data on performance as at June 2010.

NHS Nottingham City responded positively to the majority of questions addressed by the review and, where gaps were identified, the planned implementation of the Nottingham City Stroke Strategy would need to include improvements in the following:

- secondary prevention awareness;
- information resources for stroke patients and their carers;
- carer respite support.

- in 12 out of the 15 National Stroke Strategy indicators measured, Nottingham City achieved scores higher than the national expectation and, in Early Supported Discharge, Outcomes at one year (reduced mortality and re-admission rates) and effective Transient Ischemic Attack (TIA) pathways, achieved the highest score possible.

Achievements in 2010-11 included:

- the Early Supported Discharge Team had maintained the reduction of in-patient stays from 22.8 days to 14.25 days;
- a further roll out of the Strokeability programme, in partnership with local stroke survivors, to 6 courses per year;
- the development of the Social Worker and Reviewing Officer roles to support the ongoing review of need;
- the commissioning of a public awareness campaign and of a stroke-specific education programme for care homes;
- the further integration of the Early Supported Discharge and Community Stroke Teams into one joint service specification;
- local and national presentations and workshops regarding the successful implementation of Early Supported Discharge in Nottingham City.

Commissioning priorities for 2011-12 included:

- scoping the patient need and provider market for community respite and step up/down in-patient beds;
- improved carer respite support;
- an improved community TIA follow up service;
- raising public awareness of prevention and recognition of stroke;
- implementation of the recommendations from the CQC report and creation of a revised Joint Strategic Needs Assessment chapter on stroke.
RESOLVED

(1) that the continued implementation of the Nottingham City Stroke Strategy, the progress and achievements to date and the outcomes from the CQC review, all as detailed in the report, be noted;

(2) that the thanks of the Board to Ms Brown for the work undertaken on the Stroke Strategy be recorded;

(3) that it was agreed that Stroke should be a priority to be picked up by the shadow Health and Wellbeing Board.

35 NHS PERSONAL HEALTH PILOT - PROGRESS

Further to minute 8 dated 30 July 2010, consideration was given to a report of the Chief Executive, NHS Nottingham City, copies of which had been circulated, updating the Board on progress against the Nottingham City Personal Health Budget (PHB) pilot.

Ms Newbery, PHB Project Manager, NHS Nottingham City, highlighted the following from the report:

- NHS PHB offered choice and control to patients above what NHS would traditionally have paid for in respect of health improvement and gain;

- to date, 40 patients had been recruited to the pilot test group and 31 patients had been recruited to the pilot comparison group;

- one of the patients on the test group was currently in receipt of a healthcare direct payment, with a further 6 patients being considered in the next couple of months;

- currently, 26 of the patients recruited to the test group had an approved support plan, with eight of those deciding to continue to receive traditional services, despite being offered a PHB. All other patients recruited to the test group were currently going through the support planning process, during which they would develop a support plan detailing what they would like to spend their PHB on;

- patients that had spent their PHB on non-traditional services had bought the following goods or services:
  - personal assistants (through healthcare direct payment and via an agency);
  - training for existing personal assistants to enable them to perform clinical tasks;
  - physiotherapy;
  - hypnotherapy;
  - a light box;
  - Evergreen gym membership;
  - repairs to an exercise bike;
  - transport;
  - Parkinson’s exercise class;

- while it was too early in the process to say whether or not the goods and services that patients had bought with their PHB had led to better outcomes and improved quality of life, one clinician had reported that following receipt of a PHB for gym membership, one of her patients with Multiple Sclerosis was able to get up and downstairs again and had ‘never felt happier’. This was particularly important for this patient as she looked after her two young children on her own;
• recruitment to the pilot would continue to April 2011, with 212 patients randomised to either the test or comparison group, and all patients recruited to the pilot would be evaluated for at least one year;

• in order to reach the recruitment target of 75 patients in both the test and comparison group, around 10 patients would have to be recruited to each group each month and it should be noted that although this target was challenging, it was achievable. NHS Nottingham City was also amongst only 5 pilot sites nationally that had recruited over 20 people to the pilot test group so far and also led in recruitment to the comparison group;

• a final evaluation paper, which would include recommendations for national policy regarding the provision of PHBs, would be published at the end of October 2012;

• the Board congratulated Ms Newbery on the recruitment of patients.

RESOLVED that the report be noted.

36 INTEGRATED COMMUNITY EQUIPMENT SERVICES (ICES)

Further to minute 68 dated 28 May 2010, Ms Godden, Head of Continuing Care, NHS Nottingham City, updated the Board regarding ICES.

It was reported that following a tender exercise, the service had been awarded to the British Red Cross (who currently serviced North Notts, Leicestershire and Lincolnshire) and would be county-wide from 1 April 2011, with training of staff a priority to ensure a smooth transition. It was also stated that the bid received was within budget and the Council and NHS Nottingham City were currently looking at possible savings resulting from the new provision by the Red Cross.

RESOLVED that the latest position be noted

GREATERNOTTINGHAM
EMERGENCY CARE NETWORK – NOVEMBER AND DECEMBER 2010

The Board was informed the 111 service within NHS Nottingham City had been launched in November 2010. The service aimed to direct patients to the right service when they had an urgent health need, in an effort to reduce the inappropriate use of 999 and the Emergency Department.

RESOLVED that the communiqués of NHS Nottingham City published in November and December 2010, copies of which had been circulated, be noted.

38 FORWARD PLAN AND DATES OF FUTURE MEETINGS

Further to minute 24 dated 26 November 2010, consideration was given to the Forward Plan for the City Health and Social Care Commissioning Board, copies of which had been circulated.

RESOLVED

(1) that the meeting scheduled for 25 March 2011 be cancelled;

(2) that it be noted that, due to there being a local election, there would be no meeting held in May 2011;
(3) that in light of the decisions at resolutions (1) and (2) above and the resolution at minute 38 above, the following amendments and addition to the forward plan be agreed:

(note: amendments shown in *italics*)

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<td>E Yardley S Smith</td>
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<td>Carers JCG and Budget – Progress Report</td>
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<td>July 2011</td>
<td>Learning Disabilities Partnership Board – Update</td>
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