

STRATEGIC COMMISSIONING BOARD

27 April 2022

Comm: 1.00pm

Term: 1.45pm

Present:

- Dr Asad Ali – Tameside & Glossop CCG (In the Chair)
- Councillor Brenda Warrington – Tameside MBC
- Councillor Warren Bray – Tameside MBC
- Councillor Gerald P Cooney – Tameside MBC (part meeting)
- Councillor Bill Fairfoull – Tameside MBC
- Councillor Allison Gwynne – Tameside MBC
- Councillor Leanne Feeley – Tameside MBC
- Councillor Joe Kitchen – Tameside MBC
- Councillor Eleanor Wills – Tameside MBC
- Steven Pleasant – Tameside MBC Chief Executive & Accountable Officer
- Dr Christine Ahmed – NHS Tameside & Glossop CCG
- Dr Kate Hebden – NHS Tameside & Glossop CCG
- Dr Vinny Khunger – NHS Tameside & Glossop CCG
- Carol Prowse – Tameside & Glossop CCG

In Attendance:

Sandra Stewart	Director of Governance & Pensions
Kathy Roe	Director of Finance
Ian Saxon	Director of Place
Jess Williams	Director of Commissioning
Debbie Watson	Interim Director of Population Health
Sarah Threlfall	Director of Transformation
Tracey Harrison	Assistant Director, Adults Services
Caroline Barlow	Assistant Director of Finance
Catherine Moseley	Head of Access Services
Lorraine Hopkins	Head of Service, Neighbourhoods and Early Years
Samantha Jury-Dada	Strategic Domestic Abuse Manager

Apologies for absence:

- Dr Ashwin Ramachandra – Tameside & Glossop CCG
- Councillor Oliver Ryan – Tameside MBC

Further to the decision of Tameside Metropolitan Borough Council (Meeting of 25 May 2021), to enable the Clinical Commissioning General Practitioners to take part in decisions of the Strategic Commissioning Board, whilst they continue to support the NHS in dealing with the pandemic that all future meetings of the SCB remain virtual until further notice with any formal decisions arising from the published agenda being delegated to the chair of the SCB taking into the account the prevailing view of the virtual meeting and these minutes reflect those decisions.

96. CHAIR'S INTRODUCTORY REMARKS

The Chair welcomed everyone to the meeting and explained that to enable the Clinical Commissioning General Practitioner to take part in decisions of the Strategic Commissioning Board, whilst they continued to support the NHS in dealing with the pandemic, the meeting would be a hybrid of remote and physical presence.

As a physical presence was required to formally take decisions, any formal decisions arising from the published agenda have been delegated to the Chair, taking into the account the prevailing view of the virtual meeting.

The only people in the room were the Executive Members, the Chief Executive and Accountable Officer, Monitoring Officer, Democratic Services Officer and the Chair.

97. DECLARATIONS OF INTEREST

There were no declarations of interest submitted by Board members.

98. MINUTES OF THE PREVIOUS MEETING

RESOLVED

That the minutes of the meeting of the Strategic Commissioning Board held on 23 March 2022 be approved as a correct record.

99. MINUTES OF THE EXECUTIVE BOARD

RESOLVED

That the Minutes of the meeting of the Executive Board held on 9 March 2022 be noted.

100. DOMESTIC ABUSE FUNDING

Consideration was given to a report of the Executive Member for Adult Social Care and Population Health / Executive Member for Neighbourhoods, Community Safety and Environment / Clinical Lead / Interim Director of Population Health / Assistant Director of Operations and Neighbourhoods setting out the proposal for the Domestic Abuse Funding Commissioning Intentions 2022-23.

It was explained that in 21/22 TMBC was awarded £547,627 in additional grant funding to meet new duties under the 2021 Domestic Abuse Act (DA Act 2021). This year the Council would receive £549,143 to meet statutory obligations under the DA Act 2021. The funding should be spent on the delivery of accommodation-based support duties and expenditure related to compliance with these new duties. The funding was to be spent in-year and was recurrent, however the grant determination for future years would follow the annual spending review.

Additionally, there had been £72,813 allocated to programmes tackling domestic abuse through the Public Health Investment Fund.

The report proposed that the 22/23 funding be spent on consolidating and continuing the domestic abuse transformation programme initiated in 2021/22, informed by needs assessment and additional supporting domestic abuse improvement activity. Primarily:

- A perpetrator intervention programme pilot;
- Workforce development, training and practice improvement;
- Domestic abuse specialist officers within the local authority;
- Specialist domestic abuse provision in homelessness and accommodation based support services for children and adult victim-survivors of domestic abuse;
- Accommodation-based recovery and transition service for survivors of domestic abuse in safe accommodation; and
- A domestic abuse community grants scheme.

RESOLVED

That permission be granted for domestic abuse funds in 2022/23 to be allocated as follows:

<i>Total Funding Sources for Domestic Abuse in 2022/23</i>	
Jointly commissioned Bridges contract	£506,818

DA Act 2021 grant funding	£549,143
GMCA funding for DA roles	£61,099
Children's Services (CHIDVA)	£80,000
Public Health Investment Fund	£72,564
Total 2021/22 funding for Domestic Abuse	£ 1,269,624
<i>Funding committed 2022/23 to date</i>	
Bridges contract - outreach and CHIDVAs	£358,682
Bridges contract – accommodation based support	£228,136
Total 2022/23 committed for DA	£586,818
Total 2022/23 funds still available	£682,806
<i>Proposed further spend 2022/23</i>	
DA Act duties	£140,500
DA internal staffing in TMBC	£157,678
DA transformation activity	£283,667
GMCA funded IDVA posts	£61,099
Total 2022/23 proposed further spend for DA	£642,944
Discretionary DA Budget (Population Health)	£39,862
Total spend on DA 2022/23 if permission granted	£1,269,624

101. CONSOLIDATED 2021/22 REVENUE MONITORING STATEMENT AT 28 FEBRUARY 2022

Consideration was given to a report of the Executive Member, Finance and Economic Growth / Lead Clinical GP / Director of Finance, which detailed actual expenditure to 28 February 2022 (Month 11) and forecasts to 31 March 2022.

It was reported that at month 11 the CCG was reporting an overspend of £2.285m, all of which was reimbursable through national schemes, meaning that once month 12 allocations had been transacted the position with balanced on an in year, non-recurrent basis. The same was true of the ICFT position where the trust was forecasting a breakeven position for 2021/22.

For the Council budgets an overspend of £0.622m was currently forecast. This represented an improvement of £0.079m compared to month 10, but more work was required to balance the position before year end.

The Council budget included a small contingency which was released throughout the year to offset expected pressures. A further £0.327m of contingency had been released at month 11, leaving an unallocated contingency budget of £0.100m, which would be released in month 12 if not required.

Looking forward, the long term financial position within the locality remained a cause for concern as the Council contended with the aftermath of the pandemic at the same time as addressing an underlying financial deficit and implementing comprehensive organisation change across the NHS.

2022/23 financial plans for the Council had been agreed, whilst the new ICB was in the final stages of planning for health budgets. This would be discussed in more detail in the months to come, but significant work would be required in order to recurrently balance budgets across the system in 2022/23 and beyond.

RESOLVED

That the forecast outturn position and associated risks for 2021/22, as set out in Appendix 1 to the report, be noted.

102. ADULT SOCIAL CARE REFORM WHITE PAPER IMPLICATIONS

Consideration was given to a report of the Executive Member for Adult Social Care and Health / Clinical Lead for Living Well / Director of Adult Services. Members were advised that the Government published its adult social care system reform white paper, 'People at the Heart of Care' on 1 December. The white paper set out a 10-year vision for care and support in England and was based around three key objectives:

- People had choice, control and support to live independent lives
- People could access outstanding quality and tailored care and support
- People find adult social care fair and accessible

It was explained that proposals were backed by the new Health and Social Care Levy announced in September this year, of which £5.4 billion was being invested into adult social care over the next 3 years. Beyond the next 3 years, an increasing share of funding raised by the levy would be spent on social care in England.

The spending review in October 2021 confirmed the investment would be used for the following areas and duties were outlined in the white paper:

- £3.6 billion to pay for the cap on care costs, the extension to means test, and support progress towards local authorities paying a fair cost of care, which together would remove unpredictable care costs; and
- £1.7 billion to improve social care in England, including at least £500 million investment in the workforce

The key elements of the White Paper were outlined, including:

- Providing the right care, in the right place, at the right time (Chapter 4);
- Empowering those who draw on care and support;
- Strategy for the social care workforce;
- Supporting Local Authorities to deliver social care reform; and
- Local context.

Financial implications and next steps were also detailed.

The report concluded that the introduction of a 10 year strategy for Adult Care was welcome and also reflected many of the challenges that were exacerbated by the pandemic. However, there was a risk to the local authority that the funding indicated to meet the new burdens placed on the local authority was likely to be insufficient and this would need to be built into a review of the medium term financial strategy. Preparation for implementing the new burdens and new inspection regime would begin immediately to ensure the local authority was able to meet the required timescales in line with the steps identified.

Members were advised that there were significant elements of the white paper to be fully confirmed and as such, there would be a series of reports presented to Strategic Commissioning Board over the next three years.

RESOLVED

- (a) It be noted that the People at the Heart of Care: Adult Social Care Reform White Paper places new burdens on the Council that are far reaching and will affect a number of functions across the council as outlined in sections 2 - 6 of the report;**
- (b) The indicative funding allocations for 2022-2025 for Tameside Adult Care be noted as outlined in section 8 of the report;**

- (c) That the key priorities for implementation of the Adult Social Care Reform in Tameside as identified in section 9 of the report, be agreed;
- (d) That the allocation of £779,000 implementation support fund for 2022/23 be accepted and it be approved that this allocation be utilised in full for the preparatory work as described in section 9 of the report, subject to the business case and necessary internal governance required; and
- (e) That the development of an Adult Care Strategy and associated medium term financial strategy (MTFS) for 2022-2025 aligned to the white paper and recovery of local activity following the pandemic, be agreed.

103. SENDIASS REVIEW UPDATE

A report was submitted by the Deputy Executive Leader (Children and Families) / Assistant Director, Children's Services setting out proposals for the future delivery of SENDIASS service in Tameside.

It was explained that options had been explored to identify if any efficiency saving could be made with regard to the delivery of the service. This included benchmarking across North West & GM, to look at how other LA's delivered the service and compared delivery/costs and outcomes against the in-house model.

Members were advised that work with STAR and commissioning colleagues was undertaken to explore how neighbouring LA's delivered their SENDIASS service. Models of delivery across GM was variable within authorities aligned to STAR - Oldham and Stockport currently commissioning the service externally with good outcomes.

Identification of savings where appropriate, were explored, building on discussions with other LA's, to see if this would be a viable option for Tameside. Discussions with Tameside's finance and HR services were maintained throughout the process to assess and manage any identified risks against the options explored.

An options appraisal, as appended to the report, was completed by STAR, which outlined the procurement routes available for the various requirements in order to deliver the council's SENDIASS service effectively and in a timely manner.

The following four options were considered.

- Open Procurement;
- Deliver In-House Service;
- Modify Stockport Agreement with Together Trust; or
- Direct award following soft market test. This would be procured via an Exemption – '*The ASO can demonstrate that there is no genuine completion can be obtained of the purchase of particular Supplies, Services or execution of Works*'

Having undertaken an analysis on the variety of options as detailed above, STAR procurement recommended that the preferred option was to modify the Stockport Council agreement with Together Trust to include Tameside Council for one year with the ambition to procure a joint service from 1 April 2023.

RESOLVED

- (i) That the commissioning out of the SENDIASS to the Together Trust by way of a modification of Stockport Council's existing contract with the Together Trust for one year and thereafter for Tameside and Stockport Councils to procure a joint recommissioning from 1 April 2023, be agreed;
- (ii) It be agreed that Stockport Council be the lead authority in relation to the contract; and
- (iii) That the necessary steps be undertaken in relation to the transfer of affected staff.

104. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

105. DATE OF NEXT MEETING

RESOLVED

It be noted that the next meeting of the Strategic Commissioning Board is scheduled to take place on 22 June 2022.

CHAIR