

CABINET MEMBER FOR HEALTH, WELLBEING & SOCIAL CARE

RECORD OF DECISIONS of the Cabinet Member for Health, Wellbeing & Social Care 's meeting held on Thursday, 6 February 2020 at 2.00 pm at the Guildhall, Portsmouth

Present

Councillor Matthew Winnington (in the Chair)

Councillors Luke Stubbs
Graham Heaney

1. Apologies for absence

There were no apologies for absence.

2. Declaration of interests

There were no declarations of interest.

3. Funding for Residential Rehabilitation (Social Impact Bond)

Alan Knobel, Public Health Development Manager introduced the report. Individuals referred to the project will be those who are a high cost to the public sector, for example, because of their co-morbidities or offending behaviour. Other public sector bodies may be more willing to invest when the risk of funding treatment for more high cost individuals is shared and seen to be cost effective.

In response to questions officers clarified that

Big Issue Invest are the social investor who are providing the funding for treatment costs up front and taking the risk. The bond may in fact cost them more as the council are nominating up to 12 people. There are other social impact bond schemes but officers are only aware of this particular bond for substance misuse.

The council used to have well over 100 people in residential rehabilitation but have had to restrict access because of finances. In 2013/2014 the council spent around £1 million on inpatient detoxification and residential rehabilitation.

When the council's main substance misuse contract is re-tendered in November 2021 the bond's provider may revise the process and there may be an option on how the council purchases residential rehabilitation in the future.

Officers confirmed that unless the criteria is met then the council is not liable for payment and that the maximum payment is £100,000. The contract will specify what is deemed sustainable and meaningful employment; a job with

the service provider or a zero hours contract would not be considered suitable.

Councillor Winnington thanked Alan Knobel, his team and finance officers for their work in getting to the point where the council will only pay when outcomes are achieved. Even if a client does not get a job they may still benefit from the rehabilitation by getting clean or sober and needing fewer services. Officers could add a clause to the contract specifying that the service and budget can be reviewed depending on finances within the 24-month period.

Members noted that central government drug and alcohol services are not statutory so the financial burden falls on local authorities, though central government benefits from reduced substance misuse related crime. The council's general public health budget would be better if substance misuse was a statutory service and it received statutory ring-fenced funding. Councillor Winnington thought the proposal was a sensible idea as there is no risk and the council remains in control. It is the right service for people who need residential rehabilitation rather than treatment in the community. He accepted the recommendations subject to the second recommendation being amended to state that a longer term funding source would need to be considered in the re-tendering process of the main substance misuse contract due in November 2021.

DECISIONS

The Cabinet Member for Health, Wellbeing & Social Care

- 1. Approved a funding contribution towards the social impact bond of no more than £100,000.**
- 2. Approved that the funding source proposed for this pilot would be the Public Health reserve. At the end of this pilot a longer term funding source would need to be identified if the service is to be maintained and will be considered in the re-tendering process of the main substance misuse contract due in November 2021.**

4. Adult Social Care Older Persons Care Strategy

Angela Dyer, Director of Adult Services, introduced the report, noting that the Adult Social Care (ASC) Older Persons Care Strategy is anticipated to bring financial balance by the end of 2021/2022. Part of the long term strategy is for individuals to look at their own needs much earlier using resources available in their local communities to support them. Technology is used to enhance support rather than replace it, for example, the app used in domiciliary care to track carers' visits. The new Community Catalyst role aims to give more individuals more choice and control over what they would like. ASC is reasonably confident they can be financially sustainable by 2021-2022 and the financial budget plan shows the service as coming close to a balanced position by the end of the year, assuming savings are achieved but this has been mitigated against.

In response to questions from members the Director clarified

Much of the Transformation Fund money was for starting projects. The closure of Edinburgh House and Hilsea Lodge generated some income, Hilsea Lodge in particular as it closed earlier than anticipated. A reserve of up to £1 million was agreed with the S151 Officer so that some of the funds can be drawn on over the next 12 months for some of the new projects. Robust governance requires bids for projects to be considered by the Senior Management Team (including the Finance Manager). Bids have to be approved from a business and financial sustainability perspective by the ASC Director and Finance Manager respectively. Projects will be reviewed quarterly and if they are not delivering milestones they may stop. No projects will be agreed unless the exit or funding strategy is clear.

ASC did not want to ask for an unlimited pot of money as a reserve with a framework enables them to see where spending is successful. ASC do not know how much funding they will receive each year from central government. The projects enable ASC to be sustainable if no further government funding is given. Members thought it was prudent to set aside some money for upfront costs as sometimes managers cannot implement change as there is no funding to do so.

Councillor Winnington noted that everything ASC does has to focus on what is needed and whether it complies with the strategy rather than what is "nice to do." There will be a "refresh" of the December 2018 ASC conference next month with the same people to see how health and care can be improved city-wide. If the financial load is spread throughout the community then there is less financial impact on the council.

Councillor Winnington noted that joint ongoing work with the hospital on winter pressures was extended throughout the year. Despite difficulties, there are positive results such as Southern Health and Solent NHS working better together over discharges. The domiciliary care re-design is a "paragon" of how to work well with private providers and gain their support. The 2018 conference helped start engagement and conversations. The most important point is to look at gaps in provision; the right provision at the right time saves money.

Councillor Winnington thanked the ASC team and said he was looking forward to the conference and the wider work being done across Portsmouth. He hoped the next report would show how ASC was moving forwards.

The Cabinet Member for Health, Wellbeing & Social Care noted the report.

The meeting concluded at 2.40 pm.

Councillor Matthew Winnington
Chair