

Adult Social Care, Health and Wellbeing Sub-Committee

Thursday, 29 September 2022

Present: Councillor J Kirwin (Chair)
Councillors M Fox, T Hallway, J Montague, J Mudzingwa,
T Mulvenna, T Neira, R O'Keefe, P Richardson,
O Scargill and J Shaw

Apologies: None

ASCH15/21 Appointment of Substitute Members

There were no substitute members.

ASCH16/21 Declarations of Interest

There were no declarations of interest.

ASCH17/21 Minutes

Resolved: That the minutes of the meeting held on 14 July 2022 be confirmed and signed by the Chair.

ASCH18/21 Commissioning of Dentistry Services in North Tyneside

It was noted that a representative of NHS England had been due to attend the meeting to provide information on the commissioning of dentistry services in North Tyneside. Unfortunately, the representative had been unable to attend at short notice and this item was therefore postponed to the next meeting in November.

ASCH19/21 Better Care Fund Update

Sue Graham, Health and Social Care Integration Manager, attended the meeting to provide an update on the activity of the Better Care Fund (BCF) in 2022/23.

It was noted that the BCF is a component of government policy to improve integration between health and social care. It creates a pooled fund, operated jointly by Local Authorities and the new established Integrated Care Boards (ICBs) with this duty transferred during 2022/23 from the former NHS Clinical Commissioning Groups. The use of the pooled fund is agreed locally with joint development of the individual schemes and services that are part of the fund. The BCF arrangements commenced in 2015/16.

It was noted that the BCF objectives for 2022/23 are:

- Enable people to stay well, safe and independent at home for longer;
- Provide the right care in the right place at the right time.

It was noted that the arrangements for the BCF and its component parts are set out annually by the NHS in its BCF Planning Guidance. There have been minimal changes to the BCF from 2021/22. The policy objectives are:

- i. A jointly agreed plan between local health and social care commissioners, signed off by the Health and Wellbeing Board (HWB)
- ii. NHS contribution to adult social care at HWB level to be maintained in line with the uplift to NHS minimum contribution
- iii. Invest in NHS commissioned out-of-hospital services
- iv. Implementing the BCF policy objectives.

It was noted that there had been an overall increase in the BCF in 2022/23 of 4.47%. This is in line with national framework and planning guidance. The table at Appendix 1 to the report set the BCF services and expenditure for 2022/23.

Members raised some concern about the carryover of funds in relation to the Disabled Facilities Grant which for 2022/23 was £1,157,668. It was noted that this money was ring-fenced to be spent on specific capital schemes and had quite narrow eligibility criteria. The underspend had resulted from a national increase in the allocation, but spend was demand-led and means-tested and could be used for capital spending only. There was some discussion about whether this Grant needs to be more widely publicised to encourage eligible people to come forward. It was suggested by offers that they return to a future meeting to provide more detailed information on this grant and the eligibility criteria and restrictions of the grant.

There was some discussion about the reporting mechanism. It was noted that the ICB and Local Authority had submitted the plan to the Health and Wellbeing Board before being submitted to NHS England. The BCF Board meets every other month to monitor the plan and targets.

There was some discussion about support available for unpaid carers. It was noted that some support for carers is funded via the BCF, but this is part of wider support available via the Council. There was also some discussion about work on prevention of falls and it was noted that the BCF does partially cover some of this work but that the falls prevention service is delivered by health.

There was some discussion about the list of projects that has changed over time. For example, the intermediate care set up has changed with a move away from in-house bed provision and a move towards supporting people in their own homes through the reablement service.

At the end of this item an issue was raised by a member about the recording of the meeting by other members. The Chair highlighted the Council's protocol for members of the public wishing to report on meetings of the Council which confirmed that those attending meetings as members of the public are entitled to report on meetings, including by filming, photographing or making an audio recording of the proceeds of the meeting. This protocol is available on the Council's website.