

**Minutes of the meeting of the JOINT HEALTH AND SOCIAL CARE BOARD
held on THURSDAY 22 JANUARY 2004 at 7.00 pm in Room 4, Civic
Offices, Central Milton Keynes**

Present: Milton Keynes Council (MKC)

Councillor I Henderson
Councillor Box
Councillor Saunders

Milton Keynes Primary Care Trust (MKPCT)

M Brighton (Chair)
B Kennedy (Chief Executive)
Dr S Murthy (Executive Committee Chair)

Milton Keynes General Hospital Trust (MKGHT)

M Rowlands (Chair)
R Baird (substitute for J Rodney)

Officers: K Page (Strategic Director, Neighbourhood Services)- MKC
D Moore (Head of Commissioning and Customer Care)-MKC
J Moffoot (Head of Democratic Services)- MKC
S Yapp (Senior Commissioning Manager- Integrated
Commissioning) – MKC/PCT
J Ablett (Director of Strategic Development and
Commissioning/Chief Nurse)- MKPCT
P Wharfe (Head of Housing Strategy and Needs)- MKC
R Flowers (Head of Health Development)- MKPCT
A Angeli (Committee Manager)- MKC

Apologies: J Rodney (Chief Executive)- MKGHT
E Wogan (Non-Executive Director)- MKGHT

Observers: S Taylor (Joint Commissioning Manager)- MKC/PCT
N Oldring (Director of Primary Care)- MKPCT
C Moody (Joint Service Manager- Mental Health)- MKC/PCT
G Hawks- (Family Group Conference Co-ordinator)-MKC
H Kirkwood – M K Crossroads
H Brown (Manager) – M K Carers Project
2 members of the public

The meeting was chaired by Malcolm Brighton

1 Minutes

RESOLVED –

That the Minutes of the meeting held on 13 November 2003 be approved as a correct record.

2 Questions from Members of the Public

The following question was received from Mr H Brown:

“The Government has announced that, from April 2004, all ringfencing for the £125 million Carers Grant is being removed. Research by Carers UK in 2003 found that few Carers were getting the support that they need. What steps will Milton Keynes Council be taking to ensure that their allocation for 2004/05, likely to be £477,000, will be allocated to support local Carers?”

Kate Page, Strategic Director, Neighbourhood Services, replied that there were no plans to remove ringfencing from the funds that Milton Keynes Council received from the Carers Grant and that she would investigate further to produce a full written reply.

Mr P Bromley asked whether a structure existed by which local partnership boards fed into the Joint Health and Social Care Board.

Malcolm Brighton, Chairman of the Primary Care Trust, responded that work was currently being undertaken to clarify relationships between the Joint Health and Social Care Board and those groups reporting to it.

Mr P White asked if the PCT was planning to cut the mental health services budget for the 2004/05 financial year.

Barbara Kennedy, Chief Executive of the Primary Care Trust, advised that the budget process had not yet been completed, but there were no plans for budget cuts in that service.

3 Development of Joint Performance Indicators

The Board received a presentation from Jeannie Ablett, Director of Strategic Development and Commissioning/Chief Nurse of the Primary Care Trust, on the development of Joint Performance Indicators.

The Board was advised that representatives from the four key local health organisations, the Council, PCT, Hospital Trust and

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Ambulance Trust, met earlier in the week to produce joint performance indicators. A joint performance indicator was defined as an indicator that affected the service of a least two of the organisations. The list of joint performance indicators was more comprehensive than was originally thought, but it had been agreed that there was no room for complacency or inaccuracy.

The Board noted that there was a large amount of interdependence between the organisations.

RESOLVED-

That the Joint Performance Indicators be presented to the next meeting of the Board.

J Ablett

4 Local Delivery Vehicle to Oversee the Growth of Milton Keynes

The Board received an update from Barbara Kennedy on the development of a Local Delivery Vehicle (LDV) to oversee growth in Milton Keynes.

The Board was advised that the LDV board would consist of three representatives from the Council, two from English Partnerships (EP), three from the Local Strategic Partnership (LSP) representing the health, business and community sectors and two independent representatives, one of whom would be selected by the Office of the Deputy Prime Minister (ODPM) to chair the LDV board. The LDV board would deal with long-term, strategic issues and have power over major planning issues. Buckinghamshire County Council and Aylesbury Vale District Council would have observer status at LDV board meetings.

The Board noted the importance of promoting a vision for, and model of, health and social care in Milton Keynes in the context of the proposed expansion. The Board was advised that there had been initial exploratory meetings with EP to formulate a model for health and social care.

The Board was advised that Barbara Kennedy or Paul Robinson, Policy Manager, Chief Executive's Department at the Council, could provide further information on the nomination process if it was desired. The LSP would forward two names for each nomination, and the final nomination would be subject to ministerial choice. The closing date for nominations was 13 February 2004. The ODPM's decision was expected around 11 March 2004, after which would follow a short consultation period, with the LDV board set to be established 1 April 2004. The Board noted the importance of a strong LDV with input from local partners.

The Board also noted the importance of continuing to advocate the underfunding argument, and was advised that the Department of Health was considering amendments to the funding formula. An example of underfunding was that Milton Keynes was receiving funding to provide health care for a population of 208,000, whilst the PCT argued that there were 230,000 currently registered with local GPs. Due to intense lobbying, the Treasury has asked the Office of National Statistics to meet with Dr Nick Hicks, Director of Public Health, to review Milton Keynes' population figures.

The Board was advised that the Health and Social Care Sub Group of the Milton Keynes and South Midlands study had had its first meeting. The group incorporated delegates from Northamptonshire, Bedfordshire, Buckinghamshire and Milton Keynes and represented a variety of interests, including the Department of Health, the Government Office for the South East, Directors of Social Services and PCTs. Kate Page and Dr Nick Hicks attended the meeting on behalf of Milton Keynes.

The Board was advised that Kate Page and Dr Nick Hicks had made representations to the sub group after its last meeting that it needed to represent all interests and that all partners should be involved in the decision making process. There had been a historic problem of Milton Keynes' interests not being fully represented and there was a need to ensure that it would not happen again.

RESOLVED-

That the Board be informed of the progress of the Health and Social Care Sub Group of the Milton Keynes and South Midlands Study.

5 Joint Health and Social Care Board 'Awayday' 16 January 2004

The Board received a verbal update from Susie Yapp, Senior Commissioning Manager Integrated Commissioning, on the Joint Health and Social Care Board 'Awayday.' The Board was advised that the Awayday was attended by a sub group of the Joint Health and Social Care Board. A vision statement was produced with the support of all partner organisations, and is attached as **Annex A** to these minutes.

The Board was advised that the mental health pooled budget, set to go live on 1 April 2004, was discussed, and that the integration of older people's services was debated and discussed at length as it covered an enormous service area. The Board noted that

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the key issues for older people's services integration were accountability, governance arrangements and strategic planning. The establishment of a joint senior management structure was considered, with a joint strategic management board, which would report directly to the Joint Health and Social Care Board, the preferred option. The Board was advised that Susie Yapp and David Moore would explore the legal framework for the partnership board.

The Board was advised that an incremental approach to integration had been adopted and that older people's mental health and intermediate care had been identified as key strands for early integration.

The Board was advised that it was recommended that older people's mental health services would be managed in the same way as adult mental health services, and therefore the PCT would be the lead agency. However as other services were developed towards integration, the lead agency would be decided on a case-by-case basis.

6 Budget Planning 2004/05

The Board received an update from Kate Page on the Council's budget for the 2004/05 General Fund of the Neighbourhood Services Directorate, which included Adult Social Care and Housing Strategy and Needs.

The Board was advised that the budget for 2003/04 was approximately £30.5 million. Added to this base were £2.054 million of inflation costs, and £2.37 million of growth. Growth items included an external homecare overspend, the growth of the over 65 population, increased demand for bed and breakfast accommodation, funding for the Monkston Project, and Equality Works, a programme aimed at helping the learning disabled find and retain employment. A fairer charging policy had been introduced as a government requirement, and this had resulted in a loss of income. There was also £0.82 million of savings and income, which included a reduction in placements in residential care.

The Board noted that the projected 2004/05 Neighbourhood Services Directorate General Fund budget was £34.173 million, which was a significant increase on last year's budget. The Board was reminded that this was a proposal and was currently out for consultation.

The Board was advised that in the context of the entire Council budget, the Social Care budget had received the largest increase, which reflected its priority in the Council's objectives.

The Board was advised that comments on the budget proposals should be directed to Paul Robinson in the Chief Executive's Department. The Board was also advised that Cabinet would be considering the final 2004/05 budget proposals on 16 February 2004, and that responses would need to be received before that date.

The Board then received an update from Jeannie Ablett on the Local Delivery Plan (LDP).

The Board was advised that the PCT was submitting a revised LDP to the Thames Valley Health Authority (TVHA) on 23 January 2004. Guidance received from the TVHA included several key messages to inform the revised LDP. The TVHA did not expect to see a significant increase in funding activity to meet targets; it expected an increase in productivity.

The Board was advised that the PCT was investigating admission avoidance methods and that alternative ways of working needed to be identified and implemented to ease the pressure on certain areas of the health service.

The Board was advised that financial balance must be achieved. All organisations were also expected to implement a specific IT system, the new consultants contract and the Agenda for Change, all of which had cost implications for the PCT. The new GMS contract meant that GPs must be paid for the enhanced services that they provide, such as looking after IV patients in the community. A new funding system would also be implemented, which introduced cost and volume contracts rather than block contracts.

The Board was advised that the target for the percentage of patients seen in A&E within four hours would be increased to 98%, and that this would be a significant pressure on the PCT and Hospital Trust. There was a need to investigate other pathways of care to reduce pressure on A&E.

The Board noted that the deficit was forecast in excess of £13 million and that the PCT had also been instructed to make an efficiency saving of 1%.

The Board recognised that this was a formidable challenge, and that the PCT would continue to do its best to provide local services while negotiating for fairer funding. The Board was advised that the Health Authority did recognise that the Milton Keynes health economy was underfunded. It had been accepted that there was a general funding problem, and the PCT was investigating methods of alternative provision.

The Board recognised the value of the excellent working relationship between the partner organisations in these times of financial difficulty.

7 Any Other Business

Malcolm Brighton advised the Board that the Patients' Forums had now been established.

Harvey Brown, as a member of one of the Forums, advised that all members had gone through their induction and that the first meeting had already taken place. Another meeting was scheduled for the week commencing 26 January 2004, at which the Chair would be elected. Meetings would be open to the public by late February.

RESOLVED-

That the Board receive feedback from the Patients' Forum at its next meeting.

8 Informal Discussion

Rachel Flowers, Head of Health Development of the Primary Care Trust, and Pam Wharfe, Head of Housing Strategy and Needs, led a discussion on links between housing and health. Following a short presentation, the Board was asked what future housing and health needs would be.

The Board was invited to write down comments relating to existing and new settlements, which were then discussed, grouped under relevant headings and voted upon. Comments and results are attached as **Annex B**.

The Board was advised that all comments would be fed into community strategy work and would be part of the housing strategy.

9 Date of Next Meeting

It was noted that the next meeting was scheduled for 11 March 2004 at 7.00 pm in Room 2 at Civic Offices.