

## Extraordinary Health & Wellbeing Board

Meeting of the Extraordinary Health and Wellbeing Board held on Thursday 15 December 2022  
at 10:08am in Bernard Weatherill House, Room 1.01 - 1.02, Croydon, CR0 1AE

### MINUTES

**Present:** Councillor Yvette Hopley (Chair);  
Councillor Margaret Bird (Vice-Chair);  
Councillor Janet Campbell  
Annette McPartland, Corporate Director Adult Social Care & Health (DASS)  
Rachel Flowers, Director of Public Health - Non-voting

#### Also

**Present:** Councillor Amy Foster  
Councillor Tamar Nwafor  
Debbie Jones (Corporate Director for Children, Young People and Education);  
Stephen Hopkins (Head of Adult Placement, Brokerage and Market Management)  
Richard Eyre (Head of Improvement in Adults Social Care)  
Helen Mason (Interim Head of Primary and Community Care)  
Daniele Serdoz (Deputy Director for Primary and Community Care Transformation for South West London ICB)  
Jack Bedeman (Public Health Consultant)  
Gordon Kay (Healthwatch Croydon)  
Stella Bolt (EMHIP Programme Manager, Croydon BME Forum)

**Apologies:** Councillor Maria Gatland,  
Edwina Morris, (Healthwatch) Steve Phaure, Croydon Voluntary Action;  
Michael Bell, Croydon Health Services NHS Trust - Non-voting; Hilary Williams, South London and Maudsley NHS Foundation Trust; and Matthew Kershaw, ICB.

### PART A

24/22 **Disclosure of Interests**

There were no disclosures at this meeting.

25/22 **Urgent Business (if any)**

There was none.

26/22 **Public Questions**

There were none.

## **Sign Off the Adult Social Care Discharge Fund Plan**

The Health and Wellbeing Board considered the Adult Social Care Discharge Fund Plan report, that was enabled using pooled budgets to support integration, governed by an agreement under section 75 of the NHS Act (2006).

The Board received a presentation from Helen Mason, Interim Head of Primary and Community Care, which highlighted:

- £500m was promised from the government to support discharge into the social care; 60% to ICB (Integrated Care Board) and 40% directly to local authorities. £2.687m was given to Croydon.
- Funding was to be used on activities that reduced flow pressure on hospitals by enabling more people to be discharged to appropriate settings.
- Fortnightly reports to NHSE to address specific criteria and monitor progress and metrics. Monitoring of impact was also addressed locally.
- All funds to be spent by March 31 2023, and activities must also end at that point.
- The Croydon Place Better Care Fund (BCF) working group worked with hospitals, CHS, adult social care, ICB, SLAM and primary care leads to develop potential schemes and addressed what was effective.

The Chair and Board Members congratulated officers for the immense work which demonstrated how the money was spent and the fortnightly monitoring of evidence which added a lot more work within the project.

In response to queries raised by the Board, Annette McPartland (Corporate Director Adult Social Care & Health), Stephen Hopkins (Head of Adult Placement, Brokerage and Market Management), Helen Mason (Interim Head of Primary and Community Care) and Daniele Serdoz (Deputy Director for Primary and Community Care Transformation for South West London ICB) clarified the following:

- In relation to sustainability and what would happen at the end of March, the Board heard that funding was a short-term development for the winter period.

Croydon was also successful in bidding for money from the Innovation fund which went to the voluntary sector as the BCF funding was targeted for the beds and hospital flow. The additional funding of Innovation, and the Age UK launching scheme to discharge and pathway zero, the proposal was to monitor to review success in the same light. Innovation fund and money for the voluntary sector needed to be more worked on with oversight on what was working within the community.

The Board heard that at present there were no commitment or clawback from NHSE to take back any money that was not spend by the end of March, though there was no additional funding at the end of March.

Further, the on-going pressures was to be reviewed as the metrics helped review the impact of the funding across the borough and all the schemes also had different start dates. With most of the schemes enhancing and bolstering, there were no new pathways or risks. Feasibility round staffing was the biggest risk, as there were significant challenges in recruitment. The scheme had investigated this to address skills and risks.

- In relation to bed discharge in paediatric wards and CAMHS, the Board heard that this particular BCF funding was not applicable to children's services, however, there was a proposal for a two-year plan through the main funding in 2023-24 to include children's services to also support children and discharge.
- In relation to staffing, the Board heard that work force was an issue which may result in what schemes would take off. There was willingness from staff across board to embark on the work over the winter, this included overtime of extra shifts which staff would be remunerated for. Skill mixes within in the system was also sought in recruiting more staff; this included gaining staff from private organisations to support and help local authorities and hospitals to avoid the pressure.
- In relation to what the two-weekly assessment would look like, the Board heard that 1% would be used for the administration of the report feeding in the data and information. There would be clear metrics for use.
- In relation to the role of the HWBB, the Chair requested for reports to return to the Board to address the progress and see the measures of success and what was not working, to understand the evaluation of what was happening with the money.
- In relation to the monitoring of the funds, the Board heard that the BCF Board were to review the schemes performance with any change in a scheme had to be passed by the BCF Board to gain agreement across with partners for this change. There was a clear governance around how to use the BCF. The BCF Board were also managing the metrics. However, the Innovation funds and how that fund was spent sat outside of the BCF Board. Alignment between the two would be monitored through the BCF working group as one programme.

During the consideration of the recommendations, the Board discussed the following:

- There were clear benchmarks on these projects, which were good to see what would be working well and better.
- Preventative measures in the community and understanding the social support through other avenues was welcomed for further discussion.

- What success looked like would come from a resident's perspective, therefore it was important to monitor success.

The Board **RESOLVED:**

To ratify the Adult Social Care Discharge Fund schemes as an addendum to the previously submitted 2022/23 Better Care Fund submission to NHS England.

28/22 **Exclusion of the Press and Public**

This was not required.

The meeting ended at 11.10 am

**Signed:**

**Date:**

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