Birmingham City Council and Sandwell Metropolitan Borough Council

Minutes of the Joint Health Overview and Scrutiny Committee

23rd April, 2014, 3.00 pm at the Sandwell Council House, Oldbury

Present: Councillor Paul Sandars (Chair);

Councillor Ann Jarvis (Vice Chair);

Councillor Dr Trevor Crumpton (Sandwell MBC).

Councillors Susan Barnett and Karen McCarthy

(Birmingham City Council).

In Attendance: Saadia Ahmed (Birmingham City Council);

Sarah Sprung (Sandwell Metropolitan Borough

Council);

Jon Dicken, Therese McMahon and Mike Smith

(Sandwell and West Birmingham Clinical

Commissioning Group);

Dr Diana Webb (Sandwell and West Birmingham

NHS Hospitals Trust);

Deborah Harrold (Age Well); Andrew Whitehead (Marie Curie);

Ben Jupp (Social Finance).

Apologies: Councillors Sue Anderson and Lynn Colin

(Birmingham City Council).

1/14 **Minutes**

Resolved that the minutes of the meeting held on 5th March, 2014 be confirmed as a correct record.

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2/14 End of Life Care – Day Therapies Review and Proposal for the Use of a Social Impact Bond to Procure End of Life Care Services across Sandwell and West Birmingham Clinical Commissioning Group

The Committee considered research which had been conducted by Age Well, and commissioned by the Clinical Commissioning Group, to find out from current and future users of end of life care services what factors were important to them.

Members also considered a proposal from the Clinical Commissioning Group for the use of social impact bonds to procure end of life care services across the Sandwell and West Birmingham Clinical Commissioning Group area.

The Committee recalled that the item had previously been considered at a meeting on 15th November, 2013.

Representatives from the Clinical Commissioning Group advised that the information presented to members had been refreshed and gave an indication of the proposed next steps in the development of the project.

The representative from Age Well informed the Committee that the review of day therapies had been carried out by both Age Well staff and lay members, and that all hospices which the Clinical Commissioning Group commissioned services from had been visited. All end of life care services were generally well received by patients and findings from the research would be used to inform the development of end of life care services.

The Committee was advised that the use of a social impact bonds to fund projects had been developed with a view to public agencies having funds to commission preventative and community based services. In addition, social impact bonds allowed the development of innovative delivery models and could transfer implementation and delivery risks to socially motivated investors. It was noted that having an outcome based contract could drive improvement and rigor in the provision and delivery of services.

From questions by members of the Committee, the following responses were made and issues highlighted:-

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- i) of the 3,748 people who died each year in Sandwell and West Birmingham the Clinical Commissioning Group had estimated that around 1,000 of these individuals would have required end of life care services. A number of the 3,748 deaths would be a result of sudden illness and subsequent death, for example, heart attack or road traffic accident and would not require end of life care services;
- ii) because the use of social impact bonds was a pioneering approach, funding was available from the Cabinet Office and the Big Lottery Fund, which would reduce the element of risk involved for the Clinical Commissioning Group;
- iii) the proposed model for end of life care should result in a reduction in the number of secondary admissions to hospital;
- iv) the proposal from the Clinical Commissioning Group to use Social Impact Bonds to fund end of life care represented the first time this mechanism of funding had been utilised for this service area;
- v) most social minded funders would look to achieve a return on their investment of between 3 and 5 per cent;
- vi) existing providers of end of life care had been involved in the development of the new model;
- vii) the proposed new model for end of life care, together with funding supplied through Social Impact Bonds, represented a cost neutral situation for the Clinical Commissioning Group, however, the level of service would be enhanced;
- viii) support for carers would form part of the new model for end of life care, including training sessions for carers;
- ix) if patients felt supported, they were less likely to access emergency services at a point of crisis;
- x) the way in which the model had been designed was not something that would deliver the market rate of return for investors, and it was viewed that it would be more of a partnership with charitable foundations. However, it was felt that it hadn't been ruled out that the market rate of return could be delivered in the future.

Members felt that the provision of Social Impact Bonds through charitable funders represented an ethical way of securing funding for the provision of End of Life Care. This was on the basis that any funds invested would see a payment by results return for investors of between three and five per cent. Outcomes would be measured on the level of reduced admissions to hospitals and the number of patients who died at home.

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The Committee looked forward to receiving further information in relation to the development of the proposed model for End of Life Care.

Resolved:-

- (1) that the use of Social Impact Bonds to fund a Coordination Hub and Rapid Response Team for End of Life Care, and the application for funding to charitable foundations and the Cabinet Office be supported in principle;
- (2) that following the outcome of funding applications referred to in resolution (1) above, the Sandwell and West Birmingham Clinical Commissioning Group submit a further report to the Joint Health Overview and Scrutiny Committee on the development of the proposed model for End of Life Care;
- (3) that in the event that the Sandwell and West Birmingham Clinical Commissioning Group seek funding from private investors, this will be treated as a substantial variation by the Committee.

3/14 **Date of Next Meeting**

It was agreed that the next meeting of the Committee be held on 21 August, 2014 in Birmingham.

(Meeting ended at 4.31 pm)

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