



**HEALTH AND WELLBEING BOARD: 5 DECEMBER 2013**

**JOINT REPORT OF LEICESTERSHIRE COUNTY COUNCIL,  
WEST LEICESTERSHIRE CLINICAL COMMISSIONING GROUP AND EAST  
LEICESTERSHIRE AND RUTLAND CLINICAL COMMISSIONING GROUP**

**NHS TRANSFERS FOR SOCIAL CARE AND THE  
INTEGRATION TRANSFORMATION FUND**

**Purpose**

1. The purpose of this report is to provide Board Members with an update of how the current NHS Transfer funding has been allocated and to advise on the progress made to date in the development of an Integration Transformation Fund (ITF) for Leicestershire.

**Background**

2. Since 2011/12, Leicestershire County Council has received funding from the NHS to invest in adult social care services. How this funding was committed is a local decision with the one condition, that any expenditure provides a benefit to health.
3. In previous financial years, the decision as to how the funds were utilised was made and agreed at the Integrated Commissioning Board (ICB). The guidance from NHS England for 2013/14 states that the financial plan for NHS Transfer monies requires agreement by the Health and Wellbeing Board.
4. In the June 2013 Spending Round, it was announced that from 2015/16, nationally £3.8 billion would be invested as, "a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and Local Authorities". The pooled budget will be known as the social care and health ITF.

**NHS Transfer for Social Care 2013/14**

5. The NHS Transfer for social care in Leicestershire in 2013/14 is £8.6m and has been allocated using the following principles:
  - To be used for adult social care where there is a health benefit;
  - To support:
    - Existing services;
    - New services and initiatives;
    - Transformation programmes.

6. During 2012/13, the programme was reviewed to establish 2013/14 priorities and funding requirements. These were presented to and agreed by members of the ICB on 15 February 2013.
7. NHS England requires that the Health and Wellbeing Board also agree to the use of funding and the monitoring arrangements in place for measuring outcomes.
8. The table below details the broad headings of where funding has been allocated with further detail provided in Appendix A.

No.	Area of Investment	2013/14 Agreed Allocation £000s
1	Telecare	963
2	Maintaining eligibility criteria	2,475
3	Mental health services	685
4	Other preventative services	1,253
5	Other - autism	258
6	Other – improving quality in care homes	469
7	Other – transformational programme	2,400
8	Other – programme support	138
		<b>8,641</b>

9. The governance for the reporting and monitoring of NHS Transfer funds takes place through the ICB and the Health Transfer Monies Sub-Group where regular updates are provided.
10. The use of the NHS Transfer funds has been approved by the Local Area Team. A Section 256 agreement has been signed and invoicing arrangements are in place for the funds to be transferred to Leicestershire County Council in December 2013 (£6.48m) and January 2014 (£2.16m).

### **Integration Transformation Fund**

11. The ITF is due to come into full effect in 2015/16, however localities are expected to develop a plan starting in 2014/15 which will help determine the performance related element of the allocation for the following year. The ITF has been created from the following funding streams:
  - Existing 2013/14 NHS Transfers for social care;
  - Additional NHS Transfer funds in 2014/15;
  - Clinical Commissioning Group (CCG) Carers' Breaks funding;
  - CCG Reablement funding;
  - Capital Grant Funding, including Disabled Facilities Grants;
  - Existing baseline allocations to CCGs (c3%).
12. Detailed allocations are not expected to be known until the NHS operating plan is delivered in December. For Leicestershire though, it is estimated that the fund will be in the region of £38m for 2015/16.
13. The ITF does not include any new money and is currently committed against existing core activities. There is an expectation and necessity to redirect these funds to invest

in services that deliver better outcomes for individuals and help to shape sustainable health and social care services for the future.

14. As part of the preparation for the ITF, Leicestershire County Council, West Leicestershire CCG and East Leicestershire and Rutland CCG have started to produce a plan detailing how the ITF will be developed. The plan will address the following national conditions:
  - Plan needs to be jointly agreed;
  - Protection for social care services (not spending);
  - Seven day services to support discharge and unnecessary admissions;
  - Better data sharing;
  - Joint approach to assessment and care planning;
  - Agreement on the consequential impact of changes in the acute sector;
15. The ICB has delegated the task of drawing up the plan to the Health Transfers Monies Subgroup with additional members to reflect the scope of the ITF.
16. An initial draft has been formulated based on feedback from the two development session of the Health and Wellbeing Board and focusing on the existing plans and priorities of the ICB.
17. The completed plan will be brought back to the Health and Wellbeing Board at its meeting on the 13 February 2014 before being submitted to NHS England by 15 February 2014. Before then, the plan will be approved by the respective CCG Governing Bodies.
18. The ITF provides the opportunity to develop our integration ambition over the next five years and transform health and social care arrangements in Leicestershire. In order to drive the development of the plan and oversee implementation, it is proposed that a new ITF Executive is created as a subgroup of the Health and Wellbeing Board. This would be a broader and more senior group than the ICB, which is officer and commissioner only, and include providers, GPs and Public Health.
19. Given the scale of the work to be done, the County Council and the CCGs have agreed to the appointment of a Joint Director post on a fixed term basis to help oversee health and social care integration work across the county.

### **Alignment across Leicestershire, Leicester and Rutland**

20. Collectively, the health and social care organisations in Leicester, Leicestershire and Rutland have a vision for a healthier future and better services for people in Leicester, Leicestershire and Rutland (LLR). This vision is supported by the Better Care Together Programme (BCT), which brings together key partners across health and social care.
21. With an estimated financial gap of around £370 million across health and social care in the next five years, significant population growth, increases in the number of people suffering with complex long term conditions and the need to provide high quality and accessible services for all, it is important we plan now to ensure we can deliver the best possible care for local people. Given the size of the challenges, this inevitably means doing things differently with a very clear focus on integration and partnership.

22. Over recent weeks, the BCT partners have greatly strengthened our joint working relationships and agreed to co-create a five year strategy which covers Leicester, Leicestershire and Rutland. Each organisation has committed to work as part of a single leadership community which will take responsibility for developing and implementing this strategy.
23. The strategy will define new models of care by looking at pathways, spanning all care settings, and focusing initially on the following:
  - Cardiovascular;
  - Respiratory;
  - Cancer;
  - Dementia;
  - Mental health: depression and substance misuse.
24. These are priority areas for us all and for our communities, selected as we believe they offer the greatest opportunities to improve outcomes for patients, address healthcare needs and reduce cost.
25. Each organisation has its own part to play in delivery of the BCT strategy and these responsibilities will be reflected in, and delivered through, our organisational plans. Across LLR, we have communities with specific health needs, and in order to respond to those needs effectively, each organisation's operational plans will also reflect the different approaches to delivery that may be required for some aspects of the pathways.
26. Three Integrated Transformation Funds are being developed through our local Health and Wellbeing Boards to aid integration and these will help us to achieve the BCT strategy.
27. Now that the overall approach is agreed, we will be working quickly to develop ways to bring key people together to help shape the BCT strategy and supporting plans. Details of the approach will be announced in the near future.

### **Recommendations**

28. Health and Wellbeing Board is asked to:
  - a) Agree the use of the 2013/14 NHS Funding Transfer;
  - b) Note the approval from the Local Area Team, and invoicing arrangements;
  - c) Agree to the continuation of existing reporting and monitoring arrangements;
  - d) Note the progress on developing the Integrated Transformation Fund plan for Leicestershire and agree to the implementation arrangements;
  - e) Note the approach being developed across Leicester, Leicestershire and Rutland to develop an integrated strategy and support the work required to achieve this.

**Officers to Contact**

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**Background papers**

Statement on the health and social care Integration Transformation Fund –  
[LGA & NHS England Statement](#)  
Next Steps on implementing the Integration Transformation Fund  
[LGA & NHS England Guidance - ITF Next Steps](#)

**Use of NHS Transfer Funds for Social Care 2013/14****1. Telecare (£963k)**

- Assistive Technology is playing an important role in the delivery of prevention programmes promoting a vision for greater patient involvement in their care plans. A comprehensive telecare service is one of the most important support services to have in place to enable people to remain in their own homes for longer in a cost effective way. The project ensures that the use of assistive technology is being mainstreamed across all customer groups and across the care pathway. AT is helping reduce risk for those living at home, providing prompt rapid and appropriate response to emergencies, helping management of specific conditions, delaying admission to residential or nursing care and enable safer discharge from hospital or care. Significant investment has been made in standalone and response services.

**2. Maintaining eligibility criteria (£2,475k)**

- Supported Living/Community Opportunities – funding is targeted at services for people with learning disabilities that would have been subject to service reduction
- Care provision – funding for a range of adult social care services across all vulnerable service user groups to ensure that services are maintained and appropriate care levels provided. Following the completion of eligibility reviews the need for the funding was identified to help support the increase in substantial and critical service users who had previously been moderate. The funding helps sustain a wide range of care packages to these vulnerable people preventing deterioration and the need for more extensive care and health services.

**3. Mental Health (£685k)**

- Care Pathway - Development of the dementia care pathway, ensuring people with dementia and their carers are at the centre.
- Memory Advisor Service - Provision of a single point of access within a primary care setting, for those with, or seeking a diagnosis of dementia, to provide information, advice and support in accessing appropriate support/services.
- Dementia Training - Procurement of three tiered training to support individuals and organisations, from basic awareness, to specialist training for professionals.
- Adult Mental Health – This proposal has increased the AMHP workforce to be better positioned to meet demand. The proposal is to provide Adult Social Care (ASC) input for inpatient areas to facilitate early discharges and avoid delayed discharge.
- ASC Support Team Implementation – this proposal funds an AMHP to add capacity /experience in the area of mental health/learning disability including developing specialist skills in forensic work elements, especially around the Mental Health Act

**4. Other Preventative Services (£1,253k)**

- Carers' checks - Pilot service based within the primary care setting in order to identify carers early on, provide advice, information and support in accessing relevant services for Carers.
- Respite - Increase capacity for respite provision for those caring for someone with mental health issues/ dementia, in order to prevent carer breakdown
- Carer Support Fund - Increase the number of carers accessing the fund in order to take a break from caring

- Carer Training - Develop a three tiered model of training accessible to carers themselves.
- Champions Network - Develop a carers' champion network as a forum for discussing issues relating to carers, to further develop knowledge and skills and to identify key actions required across organisations.
- Information and advice – this project provides a robust model to manage, publicise and deliver information and advice services about adult social care services to enhance self care and shared care planning in line with QIPP.
- First Contact – First Contact is a multi-agency referral scheme across Leicestershire for vulnerable adults aged 18+, co-ordinating referrals for low level preventative services. Key developments for 2013/14 are targeted at health colleagues including CCG and hospital staff. In addition a 6 month pilot across Parish Councils commences Feb 2013.
- Housing related support - funding supports a range of housing related support services including low level support to enable older people to remain independent, a hospital to home scheme and the innovation challenge programme which funds organisations to develop innovative ideas and personalised projects that deliver improved and sustainable health and social care outcomes.
- Hospital to Home Scheme – This project is an enhancement to the pre-existing hospital to home scheme whereby delivery of food parcels to service user's homes is arranged to support timely discharge from hospital care.

#### 5. Other – Autism (£258k)

- Raising awareness and increasing expertise - Experts employed to support the care pathway, particularly in relation to Asperger syndrome. Work with primary care to increase understanding of autism and begin to address capacity for diagnosis.
- Champions Network - Develop an Autism Champions network as a forum for discussing relevant issues across Leicester, Leicestershire and Rutland, to further develop knowledge and skills and to identify key actions required across organisations to deliver the National Autism Strategy
- Increasing access to services - Development of an autism information hub, firstly to provide information and advice suitable to those with autism and secondly to map services equipped to provide services to those with autism. Overview of issues relating to access to services to be developed.
- Autism Training - Procurement of three tiered training to support individuals and organisations, from basic awareness, to specialist training for professionals

#### 6. Other – Improving Quality in Care Homes (£469k)

- Integrated Support Team – The proposal has created an integrated social care and health team to improve quality in residential care homes, responding quickly and proactively to any breaches and reducing the number of safeguarding incidents. Improving quality will enable homes to support individuals better and avoid unnecessary primary care and hospital involvement.

#### 7. Other – Transformational projects (£2,400k)

- Effective Support – this is a key part of the Adults and Communities Efficiencies and Service Reduction Programme. The Effective Support project has been created to build on the success of the eligibility reviews which were completed in 2012. This has shown the savings that can be achieved by a robust review process which focuses on the wider identification of sources of effective support, including alternative services within the community, in addition to the social care offer. Each review will be completed with proper consideration of individual needs and any transition requirements, with the work

being carried out by three review teams. The project will also consider alternative models for review to establish if this would increase the Department's capacity for review work. The target saving is c£6.5m for 2013/14 and there is considerable risk around firstly achieving this within the planned timescale but also to delivering the overall saving as it is a sizeable amount. The £2.4m investment will initially address the risk around delivering within 13/14 but it should be noted that it maybe required on-going to deal with the risk of not achieving the overall target; this is because of concern over the impact of delivering it without having a profound and detrimental impact on the care and health of vulnerable service users.

**8. Other – Programme Support (£138k)**

- Project and administration staff to support the overall programme of activities.