

## **Cabinet – 25 October 2017**

### **Integrated Intermediate Care Service (Discharge to Assess)**

**Portfolio:** Councillor Diane Coughlan – Social Care  
Councillor Ian Robertson - Health

**Related portfolios:** None

**Service:** Adult Social Care

**Wards:** All

**Key decision:** No

**Forward plan:** Yes

#### **1. Summary**

1.1 Report purpose to provide Cabinet with an overview of the development of an Integrated Intermediate Care Service and seek approval to progress and develop a Section 75 Partnership Agreement between Walsall MBC and Walsall Healthcare Trust to govern the new integrated arrangements.

#### **2. Recommendations**

2.1 To note the development of an Integrated Intermediate Care Service in partnership with Walsall Health Care Trust.

2.2 To agree to the development of a Section 75 Partnership Agreement and Partnership Board between Walsall MBC and Walsall Healthcare Trust to govern the partnership between the two organisations.

2.3 Delegate authority to the Executive Director of Adult Social Care in consultation with the Portfolio holder for Adult Social Care to oversee arrangements for the development of the s75 partnership agreement.

#### **3. Report detail**

3.1 Intermediate Care provides a range of services to patients that require additional social and / or health care, post-acute care to enable timely discharge to a safe environment, with the necessary support to regain function and / or confidence. This support is provided in the patient's own home (or usual residence) or transitional residence, until long-term arrangements are in place (this could include no further social / health care support required).

- 3.2 A review of the current Intermediate Care Pathways, supporting both discharge from hospital and admissions avoidance, has highlighted numerous weaknesses. In essence, the current 'System' does not consistently support timely and responsive discharge of patients that require additional health and / or social care support needs, this in turn has an impact on the individual and on system resilience.
- 3.3 The new model is detailed in **Appendix 1**, in summary, the proposal is to implement a reconfigured Intermediate Care Service (ICS), that makes discharge home with timely access to the appropriate health and social care support as the default pathway. The reconfigured ICS is underpinned by consolidating disparate health and social care functions into a combined health and social care team that will provide a single service with responsibility for patients who require support to facilitate discharge from hospitals both within Walsall and outside of the borough.
- 3.4 The new model of delivery will demand greater integration through a new shared culture, mind-set, values, performance objectives, working processes and practice are key to the refreshed model with a single line management structure accountable to both Walsall MBC and Walsall Healthcare Trust.
- 3.6 The new model of delivery will require more integrated governance and management arrangements as detailed in the Management and Governance framework at **Appendix 2**. The proposal is that the governance arrangements will be underpinned by the development of a Section 75 Partnership Agreement, which in summary will set out, amongst other things:
- Budget
  - Staff Profile
  - Governance arrangements
  - Risk Share Agreements
  - Dispute resolution procedures

#### **4.0 Council priorities**

- 4.1 The development of a new model of integrated intermediate care contributes to the Council priority – make a positive difference to the lives of Walsall People: increasing independence and improving healthy lifestyles so all can positively contribute to their communities. The way it does this is through providing support to patients to discharge home with access to the appropriate health and social care support in a more timely manner than is currently experienced.

#### **5. Risk management**

- 5.1 The risks relating to both the partnership and the delivery of the Intermediate Care service will be actively assessed and managed through the partnership governance arrangements and detailed within the Section 75 Partnership Agreement.

## **6. Financial implications**

- 6.1 The Intermediate Care Service is funded through the Better Care Fund (CCG Minimum Contribution & Protecting Social Care allocations). For 2017/18 the total allocation of £8.831m across Adult Social Care and Walsall CCG, are currently funded as follows;
- BCF - £5.869m (ongoing funding)
  - iBCF2 - £2.731m (one-off funding)
  - Walsall Council mainstream - £0.231m (ongoing funding)
- 6.2 The draft budget profile for the reconfigured Intermediate Care service is set out on page 12 of **Appendix 1**, further work to refine this is ongoing. The draft gross budget for the Intermediate Care Service, is £8.831m in 2017/18, reducing to £6.855m in 2018/19. The cost reduction is associated with the fallout of the one off iBCF2 funding and liaison with partners to ensure that the service is affordable within the ongoing funding available in future years.
- 6.3 It should be noted that the Better Care Fund has a number of conditions attached to its use, with one key condition focusing on targets around Delayed Transfers of Care, which will need to be included within the Intermediate Care Model. From a financial risk perspective, should the delayed transfers of care targets (DTC) not be met, there is the potential that BCF funding could be withheld or future allocations adjusted.
- 6.4 Walsall's Better Care Fund plan has been through Phases 1 and 2 of the regional assurance process. The feedback from the process to date is that Walsall's plan is 'not approved'. Implementation of the Intermediate Care service model is therefore currently unfunded until the BCF plan is agreed.

## **7. Legal implications**

- 7.1 All relevant partnership arrangements must be entered into in compliance with Section 75 of the National Health Service Act 2006 and the Council's Legal Services Team will assist with developing such an agreement.
- 7.2 Legal Services will work with officers to ensure that all necessary legal processes are in place to minimise the risk to the Council in relation to the Section 75 Agreement.

## **8. Procurement Implications/Social Value**

- 8.1 Related procurement activity has been identified within the Adult Social Care Commissioning Intentions and has been entered onto the Procurement Plan.

## **9. Property implications**

- 9.1 The development of new community-based, integrated intermediate care teams, aligned to the four Integrated Health and Care Team Localities may require Walsall Council and Walsall Healthcare Trust to consider solutions to providing appropriate accommodation for these teams. This will be explored in parallel with the development of the service and until resolved, the service will continue to operate from existing Intermediate Care team bases.

## **10. Health and wellbeing implications**

- 10.1 The health and wellbeing of the residents of Walsall will be positively influenced by the implementation of the new model of Integrated Intermediate Care as patients in hospitals will experience a more integrated approach to discharge planning which will aide a timely discharge from hospital.
- 10.2 The development of the integrated intermediate care service is a significant project within the Better Care Fund plan which is overseen by the Health and Wellbeing Board.

## **11. Staffing implications**

- 11.1 The reconfiguration of services will inevitably lead to some changes in organisational arrangements and ways of working in intermediate care services within Walsall Council and Walsall Healthcare Trust and this will impact on staff.
- 11.2 Consultation will take place with staff and their Trade Unions on any proposed changes as they arise.

## **12. Equality implications**

- 12.1 There are no negative equality impacts arising from the development of the integrated intermediate care service or the development of the Section 75 Partnership Agreement. Health and social care services provided through the S75 must be sensitive and ensure that they address the different needs of all of the community.
- 12.2 An Equality Impact Assessment will be completed as part of the implementation plan.

## **13. Consultation**

- 13.1 Consultation will be undertaken as per respective partner organisation requirements at each stage of the project.

## Background papers

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17 October 2017



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17 October 2017