



HEALTH AND SOCIAL CARE INTEGRATION - PARTNERSHIP BUDGETS

Aim

The Shadow Board is asked to agree that a number of services, in addition to those included in the initial scope, should be included in the aligned integrated budget for 2014/15. In addition the Shadow Board is asked to agree that some services should be reported on a notional information sharing basis and be included in the scope of the partnership strategic plan. It is also proposed that the scope should be reviewed prior to April 2015.

Background

At its meeting on the 28th April 2014 the Shadow Board agreed the initial scope of the integrated budget. The report presented at that meeting also advised the Shadow Board that recent legislative consultation documents highlighted a number of services which must be included within the integrated budget, subject to the outcome of the consultation. These were services which were not included in the initial scope. The Chief Finance Officer and Director of Finance agreed to produce a paper detailing those services with recommendations on how to proceed with regard to the future delivery of those services.

The Shadow Board's overall aim is to make the shadow year as representative as possible of the live situation post April 2015;however, there is an acceptance that due to the ongoing consultation process linked to the legislation, and actual experience of operating the partnership during the shadow year, there will be changes to the integrated budget going forward.

Both partner organisations have agreed for 2014/15 the Shadow Board integrated budget will be prepared on an aligned basis.

Initial Scope

NHS Borders and Scottish Borders Council last calendar year agreed that the following services should be included within the integrated budget.

- Joint Learning Disability Services
- Joint Mental Health Services
- Joint Drug & Alcohol Services
- Older People's Services
- Community Hospitals, Day Hospitals & Nursing
- GP Prescribing
- General Medical Services
- AHPs
- Change Fund

This position was endorsed by the Shadow Board at its meeting in April.

A number of recent consultation documents linked to the Public Bodies Act have recommended that some services which were not included in the initial scope of the partnership must be included in the integrated budget, subject to the outcome of the consultation. It was therefore agreed to review these documents and recommend a way forward at the Shadow Board meeting in June 2014.

Options for Partnership Budgets

When reviewing services recently highlighted in the legislative consultation documents a number of options were proposed on how these services may be included in the Partnership. The two options available to the Board are detailed below:

- Integrated budget full financial accountability to the Board
- Notional/Information budget reported for information to the Board

Both partner organisations have agreed for 2014/15 the Shadow Board integrated budget will be prepared on an aligned basis. However from April 2015 the Integrated Board will have full financial accountability for the services in integrated budget. In other words the integrated board will have the obligation, be held accountable and be responsible for the financial performance of the services in the integrated budget.

Within the legislation there is the option that the integrated Board has a notional/information budget for a number of other services in addition to those that will be managed on a fully integrated basis in the integrated budget. It is envisaged the Integrated Board while not accountable for notional/information budgets would on a regular basis receive information about these services and would include them when agreeing the partnership strategic plan.

Process

Assessment criteria were produced to review the services highlighted in the legislative consultation documents. A shadow board workshop was held on the 2nd June 2014 to discuss the approach to including further services in the partnership and work through a number of examples.

The following criteria for assessment of services were identified. This assessment was a two stage process. Firstly services were assessed against six Level 1 criteria:

- Included in Legislation Documents
- Contributes to H&SC Outcome
- Linkages to Services in initial scope
- Avoids Unnecessary Administration
- Creates an Efficiency Opportunity
- Not a Statutory Responsibility

If the assessment at Level 1 resulted in a negative response to 4 or more of these level 1 criteria then it is proposed the service is excluded from the partnership budget. If the response is yes to three or more of these level 1 criteria then the service should be assessed against the level 2 criteria listed below:

- Suitability
- Feasibility
- Acceptability

If a service is fully suitable, feasible and acceptable then it should be included in the integrated budget. If it fails any of these criteria it should be considered a notional/information budget for the integrated board.

At the workshop on the 2nd June 2014 members of the Shadow Board and a number of senior officers from the NHS Borders and Scottish Borders Council reviewed a number of services, with a view to making a recommendation to the Shadow Board on which services should be included within the integrated budget.

Following the workshop, taking on board the key themes which we highlighted and following the examples which were discussed, finance staff have completed an assessment of all services which were highlighted in the legislation and recommended a way forward.

In the case where it has not been possible to disaggregate some services to reflect the operational budget specifically for older people, the full operational budget has been included in the integrated budget.

Assessment

Based on the process highlighted above the following services were reviewed and the following recommendations are made on how each service should be treated within the partnership budget.

Integrated Budget

The following services should be added to the initial scope and become part of the Integrated Budget for which the Integrated Board will be financially accountable.

- Housing services aids and adaptions Mandatory grants to contribute towards the
 cost of alterations to help meet the needs of clients with a disability or impairment.
 This includes providing essential amenities such as stair-lifts and ramps and may
 also include structural alterations to buildings but specifically excludes extensions to
 provide living accommodation.
- Bordercare a community alarm system which gives an immediate response in an emergency.
- Night Support The service offers assistance from 10:00pm to 7:30am to people who might otherwise be admitted to hospital, residential or nursing home care.
- Sexual Health this covers contraceptive services, sexual health advice, testing and treatment.
- Public Dental Services The main area within this heading is the NHS employed salaried and community dental service.
- Community Pharmacy This encompasses community services commissioned from local pharmacists such as advise to residential homes.
- Continence Services expenditure on staff and supplies of the community continence service.
- Immunisation costs associated with the NHS Borders immunisation programme
- Smoking Cessation this service supports Borders residents to give up smoking.

- Patient Transport expenditure incurred in relation to patient transport in addition to that provided by the Scottish Ambulance Service contract.
- Accommodation costs of services This includes utilities and rates costs of all properties occupied by services included in the scope of integration.
- Resource Transfer This is the amount transferred between health and local authority for services where inpatient beds have closed and the obligation to provide service now rests with the local authority. Services included are learning disability and continuing care.

At future Shadow Board meetings the finance report will be amended to include the above services in addition to those agreed in the initial scope.

Notional/Information Budget

The integrated board will receive information on the following services and for strategic planning purposes these services should be included:

- Unplanned inpatients within the BGH
- Adult projection and domestic abuse (detail of scope to be defined)
- A&E
- GP Out of Hours
- Care of Older People within the BGH
- Home Dialysis
- Public Health
- Screening
- Audiology
- Community Midwifery
- Welfare Services (detail of scope to be defined)
- Infection Control
- Specialist Nurses
- Emergency Planning (NHS only)
- Health Living Network
- Patient Safety Programme
- Pharmacy
- Visual Aids
- Non Cash Limited Services (general dental practitioners, opticians and community pharmacists)
- Palliative Care
- Payments to Voluntary Bodies
- Equality and Diversity
- Health Promotion
- Public Involvement

The exact definition of these headings is still to be defined. These notional/information budgets will be reported to the Shadow Board in so far as they are relevant to the integrated service provision in scope.

Integrated Budget with Effect from 1st April 2015

It is proposed to revisit the scope of integrated budget with effect from 1st April 2015. This review will take account of the outcomes of the consultations which are currently in process, any further documentation and consultations that take place during the course of

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the financial year as well as the experience of the Shadow Board linked to the 2014/15 integrated budget. In the early part of 2015 a paper for consideration will be produced for the Board to agree a way forward.

Summary

The Borders Partnership agreed the scope of the integrated budget. Since that agreement was reached further legislative consultation documentation has been produced which recommended some services must be included in the integrated budget which were not part of the initial scope. Assessment criteria for reviewing these services were designed and a workshop was held in early June to undertake the assessment of services against these criteria. Based on this work it is recommended that the initial scope is extended to include some services. In addition services should be reported to the partnership on a notional/information basis and included in the strategic plan. Prior to April 2015 it is recommended that the scope of the integrated budget is revisited by the Shadow Board.

Recommendation

The Integration Shadow Board is asked to <u>agree</u> the following services are included in the integrated budget for 2014/15 - Housing services aids and adaptions, Bordercare, Night Support, Sexual Health, Public Dental Services, Community Pharmacy, Continence Services, Immunisation, Smoking Cessation, Patient Transport, Accommodation costs and Resource Transfer.

The Integration Shadow Board is asked to <u>agree</u> the following services form part of the notional/information budget of the partnership and are included in the strategic plan – Unplanned inpatients within the BGH, Adult projection and domestic abuse, A&E, GP Out of Hours, Care of Older People within the BGH, Home Dialysis, Public Health, Screening, Audiology, Community Midwifery, Welfare Services, Infection Control, Specialist Nurses, Emergency Planning, Health Living Network, Patient Safety Programme, Pharmacy, Visual Aids, Non Cash Limited Services (general dental practitioners, opticians and community pharmacists), Palliative Care, Payments to Voluntary Bodies, Equality and Diversity, Health Promotion and Public Involvement. These will be reported to the Shadow Board as relevant to the integrated service provision in scope.

The Integration Shadow Board <u>agrees</u> to revisit the scope of the integrated budget prior to 1st April 2015.

Policy/Strategy Implications	In compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and any consequential Regulations, Orders,	
	Directions and Guidance.	
Consultation	Agreed by Integration Programme Board.	
Risk Assessment	A full risk assessment and risk monitoring process for the Integration Programme is being developed as part of the Integration Programme arrangements.	
Compliance with requirements on Equality and Diversity	An equality impact assessment will be undertaken on the arrangements for Joint Integration when agreed.	
Resource/Staffing Implications	It is anticipated that the Integration Shadow Board will oversee services which have a budget of over £100m, within the existing scope. The budget will change as other functions are brought within the scope of	

the Integration Shadow Board.	

Approved by

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