

INTEGRATED CARE FUND UPDATE AT 31ST MAY 2016

Aim

- 1.1 The aim of this report is to provide IJB members with an update on the partnership's Integrated Care Fund (ICF) Programme and further detail on those projects approved to date in terms of their cost commitments and targeted outcomes.

Background

- 2.1 Integrated Care Funding was first allocated to the shadow partnership in 2015/16. The ICF commenced on the 1st April 2015 with the award of £2.13m per annum (2.13% of £100m p.a.), a total allocation of £6.39m over the 3 years of the programme. During this year, a number of projects were approved by the partnership through the governance structure in place at that time. Of the £2.13m allocated for 2015/16, £224k was spent by the partnership in 2015/16 and a further £94k to date in 2016/17, a combined total of £318k to date.

Current Position

- 3.1 Overall, 14 projects, projected to cost £1.621m have been commissioned as part of the ICF programme to date. In summary, these are:

Table 1 – Summary of 3-Year Resource Requirements of ICF Projects Approved to 31.05.16

| | £'000 |
|------------------------------------------------|--------------|
| 1 Programme delivery | 220 |
| 2 Independent Sector representation | 94 |
| 3 Transport Hub | 139 |
| 4 Health Improvement (<i>phase 1</i>) | 19 |
| 5 Transitions | 65 |
| 6 Community Capacity Building | 400 |
| 7 Mental Health Integration | 38 |
| 8 My Home Life | 71 |
| 9 Delivery of the Autism Strategy | 99 |
| 10 Stress & Distress Training | 166 |
| 11 Delivery of the ARBD pathway | 102 |
| 12 BAES Relocation | 100 |
| 13 Community Ward delivery(18mth pm, pso) | 54 |
| 14 Health Care & Co-ordination (18mth pm, pso) | 54 |
| Total Approved to date | 1,621 |

- 3.2 Each of these projects is outlined in in [Appendix 1](#) to this report where further detail of their planned timeframes, aims and objectives, progress in their delivery to date and funding requirement is provided.
- 3.3 [Appendix 2](#) of the report maps in detail how each particular project will deliver its contribution to both the National Health and Wellbeing Outcomes and more

specifically, the partnership's local strategic objectives as outlined within its Strategic Plan.

The Way Forward

- 4.1 Service redesign is a key priority of the Health and Social Care partnership's plans going forward and clear themes are emerging as to what models of care, delivery structures and targeted priorities are required in order to achieve the Partnership's strategic aims and local objectives. It is in funding the transformational shift to these models, structures and priorities that the enabling financial resources and in particular, the ICF, can deliver the greatest benefit.
- 4.2 A number of other projects within the programme therefore are currently being developed to support this shift, at varying levels of development and approval within the fund's governance structure. In totality however, these proposals are being planned to deliver the partnership's new model and the development of new, improved pathways of care, a locality model for planning and delivering health and social care and meeting the expectations of the Scottish Government in terms of how the funding should be directed.
- 4.3 As the transformation programme develops, further reports will be brought forward to the IJB in order to ensure that a clear picture of each element of the partnership's plans is formed, in addition to an overall view, a picture that will consider not only how Integrated Care Funding is being used, but how all funding available to the partnership including its core delegated budget, large hospital budget set-aside, social care funding and change fund will support its delivery and enable future mainstreaming of the new delivery models.

Summary

- 5.1 As the Partnership's vision for health and social care integration develops and key themes for new models of care, delivery structures and key priorities emerge, the ICF programme continues to form in order to resource and deliver the transformation required.
- 5.2 To date £1.621m of the ICF has been committed, although of this, only £318k has been spent to date. Work is continuing to develop further proposals that will enable transformation to new models of health and social care. As progress is made, further reports over this delivery, the required temporary (transformational) and permanent (mainstreaming) resource requirements and expected priorities for investment and disinvestment will be made to the IJB.

Recommendation

The Health & Social Care Integration Joint Board is asked to **note** the report and the progress made to date in the development of the partnership's transformation programme, in particular, those projects funded from within its Integrated Care Fund programme.

| | |
|---------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Policy/Strategy Implications | There is a need for a more strategic approach to the use of the ICF and simpler governance arrangements. |
| Consultation | |
| Risk Assessment | Simpler governance arrangements will increase the speed of decision-making in relation to the use of the ICF. Improved performance monitoring is necessary to make more effective use of the fund. |
| Compliance with requirements on Equality and Diversity | The use of funding in this way will promote inclusion. |
| Resource/Staffing Implications | The ICF is £6.39M over the three years 15/16, 16/17, 17/18. |

Approved by

| Name | Designation | Name | Designation |
|--------------|-------------------------------------------------|-------------|--------------------|
| Susan Manion | Chief Officer, Health & Social Care Integration | | |

Author(s)

| Name | Designation | Name | Designation |
|----------------|-----------------------------|-------------|--------------------|
| Paul McMenamin | IJB Chief Financial Officer | | |