

Scottish Borders Health & Social Care  
Integration Joint Board



Meeting Date: 28 January 2019

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### INTEGRATED CARE FUND UPDATE

<b>Purpose of Report:</b>	<p>The purpose of this report is to provide the Integration Joint Board (IJB) with an update on the position of the Integrated Care Fund (ICF). Specifically:</p> <ul style="list-style-type: none"> <li>• A summary of the projects that are due to finish within the coming 12 months and will run to their conclusion</li> <li>• A recommendation to extend a number of existing projects and the related funding implications</li> <li>• A recommendation to fund a Community Outreach Team within the Mental Health service from available funds</li> </ul>
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<b>Recommendations:</b>	<p>The Health &amp; Social Care Integration Joint Board is asked to:</p> <ol style="list-style-type: none"> <li><b>Note</b> the current position of the Integrated Care Fund (ICF) – Table 1</li> <li><b>Note</b> the projects which have either ended or are expected to run to the end of their funded duration and do not require further decision at this stage</li> <li><b>Approve</b> the recommendation to extend and fund 3 live projects to establish a Discharge Programme of work for future evaluation.</li> <li><b>Approve</b> the funding of the Community Outreach Team</li> </ol>
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Personnel:	There are no resourcing issues other than those presented within the report.
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Carers:	Consideration has been given to the implications for carers in the paper.
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Equalities:	An EQIA is underway.
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Financial:	No resource implications beyond the financial resource identified within the report.
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Legal:	Supports the delivery of the Strategic Plan and is in compliance with the Public Bodies (Joint Working) (Scotland) Act 2014 and
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	any consequential Regulations, Orders, Directions and Guidance.
Risk Implications:	The key risks outlined in the report form part of the draft financial risk register for the partnership.

## 1 Integrated Care Fund – Allocation and Spend to Date

- 1.1 The ICF fund was established by the Scottish Government and allocated £2.13m pa to the H&SCP for the 3 years 2015/16 to 2017/18. The funding was baselined in 2018/19 and NHS Borders agreed to make it a recurring allocation to the IJB from this year onward.
- 1.2 The allocation has been utilised to support a range of projects and service changes over the years. To date of the total £8.520m allocated the sum of £7.636m has been committed to fund projects to their end date, leaving **£0.884m** uncommitted at the time of this update. Any funding either uncommitted or unspent at 31 March 2019 will be carried forward for use in 2019/20.
- 1.3 Table 1 summarises the direction of the funding to 31 December 2018. It presents the known spend to date and also shows the committed spend to the end of the projects agreed life. This forecast is based on the assumption that the allocated funding will be required and will be fully utilised. Projects are categorised as:
- Due to Finish – these projects have funding and have ended or are expected to run to the end of their funded duration and do not require any further decisions at this time.
  - Recommended for Extension – it is recommended that a small number of live projects are extended beyond their end date. Section 3 provides the details of these projects.

Table 1 – Summary of ICF Projects Approved to Date with Resources Directed / Spent

IJB Approved Projects	Project End Date (£)	Project Allocation (£)	Total Actual Spend to 31.12.18 (£)	Forecast spend to end of project (£)	Projection for Life of Project (£)
<b><u>Projects Due to Finish</u></b>					
Hospital to Home	30/09/19	1,145,028	283,889	861,139	1,145,028
Transitions	30/09/19	57,200	41,422	15,778	57,200
COPD	30/09/19	99,000	0	99,000	99,000
Community Capacity Building	31/07/19	562,660	463,504	99,156	562,660
Domestic Abuse Service	30/06/20	120,000	37,785	82,215	120,000
Strata	Jan/Feb 2019	75,000	22,500	52,500	75,000
Pharmacy	31/03/19	94,470	68,532	25,938	94,470
Transport Hub	31/03/19	204,900	101,028	103,872	204,900
Community Led Support	31/03/19	133,648	113,610	20,038	133,648
Project Management Team	31/12/18	740,699	740,699		740,699
<b><u>Projects to Extend</u></b>					
Transitional Care Facility	31/03/19	926,600	789,296	137,304	926,600
Craw Wood Specialist Dementia Facility	31/03/19	1,371,402	642,003	729,399	1,371,402
Matching Unit	31/03/19	286,077	224,197	61,880	286,077
Closed Projects		1,819,369	1,811,363	8,007	1,819,370
	<b>Total</b>	<b>7,636,053</b>	<b>5,279,742</b>	<b>2,356,312</b>	<b>7,636,054</b>
	<b>Total Funding</b>	<b>8,520,000</b>			
	<b>Total Unallocated Funding</b>	<b>883,947</b>			

## 2 Projects Due to Finish

2.1 A number of projects have ended or are due to finish within the coming 12 months. The finances relating to these projects are presented in Table 1 and an update is summarised below.

Project	Description	End date	Notes
Hospital to Home	Provision of reablement and care at home to reduce delayed discharges and packages of care.	30/09/19	Project will be evaluated as part of the Discharge programme.
Transitions	Improve the transition process from children's to adult services for people with a learning disability.	30/09/19	Project was due to end December 2018. An extension has been requested to 30/09/2019. Project lead has confirmed that no further funding is required.
COPD	Development of a pulmonary rehabilitation intervention model.	30/09/19	Start date has slipped however agreed funding is expected to be spent in full. The project is expected to run beyond September 2019.
Community Capacity Building (CCB)	Use a capacity building approach to increase activities for older people in communities, to support health and wellbeing.	31/07/19	Project Lead has confirmed that mainstream funding of CCB will be achieved through savings delivered through 'Reimagining of Day Services'.
Domestic Abuse Service	Coordinated approach to addressing domestic abuse in the Scottish Borders.	30/06/20	Expectation that domestic abuse services will be incorporated into the wider remit of the Public Protection Unit.
Pharmacy	Pharmacy input and support to Health and Social Care services to reduce medication errors, reduce the need for carer visits and reduce inappropriate use of compliance aids.	31/03/19	The Pharmacy project aims include risk reduction for medication errors, a reduction in medicine-related carer visits and medicine-related harm. Since inception over 400 patients have been assessed by the project team prior to discharge from BGH.
Transport Hub	Transport facilities to support people primarily to attend hospital and local health appointments.	31/03/19	There is potential slippage in the use of funding and an alternative source of funding will be sought prior to the project ending.
Community Led Support (What Matters Hubs)	Provide advice and support to local communities with a focus on effective conversations.	31/03/19	The project has led to a change in work practice and this will be embedded on ongoing workplans.
Strata	Cloud based product that enables improved, automated processes for matching patient needs to available resources.	28/02/19	Pilot focused on discharge management processes. Training has been delivered and the roll out of the project began in December 2018. Expect a further bid for full roll out beyond February.

Project	Description	End date	Notes
Project Management Team	An ICF PM Team was formed to establish and implement robust processes and procedures for ICF and to ensure effective project governance.	31/12/18	Support now provided through SBC Transformation team and NHS Better Borders Team.

### 3 Projects Recommended for Extension

3.1 A number of projects are providing a range of services targeted at reducing the number of delayed discharges in the acute system and supporting care in the home or a more homely setting:

#### Transitional Care Facility

- Utilises 16 units at Waverley care home
- Focuses on up to 6 weeks rehabilitation / reablement to allow individuals to return home and be as independent as possible subsequent to a hospital stay.
- It is a AHP led model supported by SB Cares staff

#### Garden View (Craw wood)

- Provides 15 bedded capacity outwith BGH to assess patients prior to them moving home or to supported accommodation.
- Target length of stay of 2 weeks
- Assessment carried out on site prior to discharge

#### Matching Unit

- Established initially to source and secure required home care hours for clients
- Expanded to cover end of life and is also linked to Strata with regard to care home placement.
- The unit has contributed to the reduction in waiting lists and reduced the time individuals wait for care.
- It has also significantly reduced the workload of social workers - the estimated average time social workers spend sourcing care. This has allowed the teams to do more assessments and reviews of care needs.

3.2 Given the linkages within and across these projects with the Hospital to Home (H2H) project it is proposed that they are all project managed and evaluated under a single "Discharge" programme of work. To facilitate this it is recommended that their end date is extended to coincide with the H2H project and that funding is provided to meet the costs of extension for each project to the 30 September 2019. These projects are intended to be mainstream funded in the future as savings are released.

The table below summarises the financial implications of these recommendations.

<b>Financial Implications of Extending Current Projects</b>			
<b>Project</b>	<b>Current End Date</b>	<b>Extended End Date</b>	<b>Estimated Financial Implication £'000</b>
Transitional Care Facility	31/03/2019	30/09/2019	99
Garden View	31/03/2019	30/09/2019	397
Matching Unit	31/03/2019	30/09/2019	85
<b>Total estimated costs</b>			<b>581</b>

#### **4 Community Outreach Team (New Funding Request)**

4.1 It is proposed to create a Mental Health Community Outreach Team (COT) to meet the needs of older adults with mental illness and dementia, working within care homes and community hospitals across the Scottish Borders. The key outcomes of the proposed service are summarised below:

- Improved detection, assessment and treatment of common mental health conditions
  - In particular to increase dementia diagnosis rates within the care home population with the aim of finally reaching the Scottish Government's national Local Delivery Plan (LDP) standard for dementia diagnosis in The Borders
- Reduction in the need to antipsychotic prescriptions
- Reducing hospital admissions, facilitating earlier discharge (reduction in delayed discharge days) and reducing the need for care home moves
- Raise awareness of mental health in care homes and community hospitals
- Increased confidence and skills in caring for older people with mental health difficulties and dementia in care home and community hospital staff

4.2 In order to aid recruitment and establish the service it is recommended that funding be provided for 2 years. It is anticipated that this becomes a permanent service and that costs saved by the reduction in occupied bed days (compared to the current base line) will fund the costs of the service within that 2 year period.

4.3 The proposed team will combine several existing posts and a number of new posts in a new service. The cost of the new service is estimated to be £243,379 in the first year and £230,000 recurringly. More detail is provided in the full bid presented in Appendix 1.

4.4 The following table gives a brief summary of costs and savings.

<u>Community Outreach Team Funding</u>		
	Yr 1	Yr 2
	£'000	£'000
<b><u>Additional Costs</u></b>		
Pays	205	205
Non Pay	37	24
<b>Total Additional Costs</b>	<b>242</b>	<b>229</b>
<b><u>Indicative Savings Scenario 1</u></b>		
Admission avoidance 10%	200	200
Reduction in Inpatient bed days @ 10%	201	201
<b>Total anticipated Savings</b>	<b>401</b>	<b>401</b>
<b>Estimated Saving</b>	<b>159</b>	<b>172</b>
<b><u>Indicative Savings Scenario 2</u></b>		
Admission avoidance 10%	200	200
Reduction in Inpatient bed days @ 20%	399	399
<b>Total anticipated Savings</b>	<b>599</b>	<b>599</b>
<b>Estimated Saving</b>	<b>357</b>	<b>370</b>

## 5 Summary

5.1 The overall financial implications of the recommendations to extend 3 existing projects, continue the Strata project for a further 12 months, and create a new Community Outreach Team within the Mental Health services is shown below.

<b><u>Summary ICF Funding and Commitments</u></b>	
	£'000
Uncommitted funds to date	884
<b><u>New Commitments</u></b>	
Extend 3 discharge projects for 6 months	581
Create Community Outreach Team	243
<b>Revised Uncommitted Balance</b>	<b>60</b>