

SOCIAL AND HEALTH CARE OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting	Thursday 13 th December 2018
Report Subject	Integrated Care Fund
Portfolio Holder	Cabinet Member for Social Services
Report Author	Chief Officer (Social Services)
Type of Report	Strategic

EXECUTIVE SUMMARY

This report provides a summary of the Welsh Government's (WG) Integrated Care Fund (ICF), its key objectives and county level investment plans. An update is provided in relation to the status of applications submitted for funding approvals and resource implications which require ongoing consideration and mitigation. Highlights are provided on impact that has been measured in year through use of the funding.

Full guidance on the use of the funding is published each year on the Welsh Governments website. The guidance includes conditions for use of the funding, objectives/outcomes expected to be achieved and expectations relating to how use of the Fund is governed.

RECOMMENDATIONS	
1	Scrutiny consider and comment on the Integrated Care Fund Programme and the opportunities it is providing.
2	Scrutiny consider and comment on the impact of utilising short term funding streams to deliver against strategic and operational priorities for the council and key partners.

REPORT DETAILS

1.00	BACKGROUND AND CONTEXT	
1.00	Briefich Filip Cont Ext	
1.01	The Integrated Care Fund, previously called Intermed is a Welsh Government fund, introduced in 2014. So grown in terms of level of funding, scope of application to total level of revenue funding available to Flint The total applications made against the capital produced decisions are pending for 18/19 is £2.1m.	Since that time, it has ation and complexity. shire 18/19 is £2.2m.
1.02	Full guidance on the use of the funding is published Welsh Governments website. The guidance includes the funding, objectives/outcomes expected to expectations relating to how use of the Fund is govern	s conditions for use of be achieved and
1.03	Both the capital and revenue funding streams are r Area Partnership Board. The Board is chaired by the Adults in Flintshire and also consists of senior man and Wrexham councils, Betsi Cadwaladr Unive (BCUHB) East Area, and Flintshire and Wrexham Vol	e Senior Manager for lagers from Flintshire ersity Health Board
1.04	The East Area ICF Partnership Board make reconnected Regional Partnership Board (RPB) on how the fundamental locally. In addition to the RPB required endorsement Action Plan and Capital proposals require additional Government.	ds should be utilised nt, the ICF Dementia
1.05	The East Area ICF Partnership Board are also respondent and monitoring use of the fund and the performance of	
1.06	Summary of Funding Allocations.	
1.07	All ICF funding is allocated on a regional basis in line that decisions are made in consideration of regional expressed within the North Wales Population Population based formulas are then applied at a co indicative allocations of funding available to spend.	priorities, for example Needs Assessment.
1.08	In 2018/19, there is 1 capital and 3 revenue pr corresponding allocations for Flintshire being:	rogrammes, with the
	Funding Stream	Allocation 18/19
	Older People and Frail	£1,266,882
	Learning Disability, Children with Complex Needs, Carers (and preventative work)	£606,054
	Dementia Action Plan	£365,993
	Capital Programme	£2,121,102
1.09	In addition to the above, the full ICF programme a streams relating to the development of the Wel Information System (WCCIS) and development of the streams of the streams.	sh Community Care

prior to county level allocation and are therefore outside of the scop this report. 1.10 To date, all funding has been allocated and agreed on an annual basis recognition of the prohibitive impact of this approach to support I planning and delivery, the more recent schemes (Dementia and Cap have been presented this year in a way which has allowed partner propose use of funding for up to a 3 year period. Ongoing communica continues with WG officials to extend this approach to cover the full programme in the future and also to encourage them to expedite processes for approving schemes as delays in approval continues to challenge. 1.11 Revenue Programme 1.12 Partners must utilise the ICF revenue streams to support schemes activities that provide an effective integrated and collaborative approach relation to the following priority areas for integration: • older people with complex needs and long term conditional including dementia • people with learning disabilities; • children with complex needs due to disability or illness; and • carers, including young carers. 1.13 A full breakdown of all revenue schemes funded this year in Flintshire included as Appendix 1. In summary, the schemes have been identified meet a number of strategic and operational objectives: • Supporting and further developing the care home sector • Provision of intermediate care (Step Up Step Down) beds/sup as an alternative to hospital or long term care admission or Dela Transfers of Care • Contributing to the Community Resource Team development that more care can be provided closer to home • Targeted support to children and families with complex needs • Reducing dependency on services / increasing independence sleen increasing preventative/early intervention services, inclust through increasing community resilience		
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	1.14	Schemes funded in 18/19 for the first time through ICF revenue include extension of the Progress for Providers work within care homes and into the domiciliary sector, review of the respite support offered to people with dementia, including those with early onset dementia and the provision of care support workers with a focus on dementia care within the Llys Raddington Extra Care Scheme.

1.15	Capital Programme
1.10	<u>Gapitar i Togrammo</u>
1.16	Capital fund applications have been submitted to WG for four areas of spend:
	Marleyfield House Expansion
	Hwb Cyfle development
	Conversion/Extension of 3 private homes providing accommodation
	for Foster Children /sibling groups
	Development of Glan y Morfa to provide accommodation for people with physical disability/reduced mobility as an alternative to an extended stay within hospital and/or to aid rehabilitation
1.17	At the time of writing, WG are continuing to take the capital applications through internal processes, with recommendations having been presented for Ministerial approval to approve funding for the Marleyfield, Hwb Cyfle and Glan y Morfa developments. Decisions are pending relating to the work relating to homes for children who are living within foster homes.
1.18	Managing the impact of decisions on funding requests have historically been a feature of ICF with representations being regularly made to WG on this matter. Partners seek to mitigate for the impact of not having a decisions, which this year have also included the new Dementia Action Plan funding which was not confirmed until October, with outcomes and spend being expected by March 2019.
1.19	Impact of Funding
1.20	Monitoring the performance of each of the funded elements of ICF is part of the responsibility of the ICF East Area Group. Schemes are performing well across the programme in Flintshire as referenced in Appendix 1.
1.21	Quarterly monitoring returns are required at a regional level by Welsh Government. Highlights from the Q2 report (covering the period from April –September 2018) for Flintshire include:
	i. 2261 nights were funded within step up step down beds (SUSD) from April to September. During the same period, 93 people were admitted to a SUSD as an alternative to a hospital stay and/or were assessed for longer term needs within an environment that is more suitable than an acute hospital setting.
	ii. The support offered by the multi-professional Community Resource Team for people in their own home for up to 6 weeks, prevented an estimated 2129 nights stay within an acute or community hospital. 168 Flintshire residents were supported by the team during April- June and 124 in July- September (numbers on caseload by quarter, so not a cumulative number).
	iii. 9 children with complex and often life-limiting conditions have received support at home rather than in hospital by increasing capacity within the Diana Service.

- iv. 206 people were taken through a multi factoral risk assessment after being identified at being at a higher risk of falling. This evidence based assessment identifies risks and supports participants to take action and be supported to reduce their own risk.
- v. Action for Children have been running the Repatriation and Prevention (RAP) service to provide targeted interventions for 20 children and families (as new referrals)
- vi. A minimum of 28 people have been offered intensive and practical support in relation to their hoarding behaviour which puts at risk their own health, wellbeing or independence as well as other occupants within the same address.
- vii. 44 young people in transition to adult services and adults with a disability have been supported through the Progression Service, to increase skills and confidence, with the aim of increasing independence and reducing reliance on care provision. A report to the Social & Health Overview and Scrutiny Committee was presented on 15th November, thus providing further details on this service.

2.00	RESOURCE IMPLICATIONS
2.01	The resource implication to the council and partners are overall positive as described above. The combined ICF programmes are used to fund strategic and operational areas of priority across Health and Social Care. These include but are not restricted to meeting the costs of Community Resource Teams, Step Up Step Down Beds and the RAP Service for Children and families.
2.02	However funding is not assured beyond the current financial year for any of these funding streams.
2.03	Concerns in relation to the impact of short term funding decisions are regularly communicated with WG officials. However, the council will need to continue to assess and respond to the risk that funding will cease or have restrictions placed on its use which prevent the utilisation of funds within key areas that would result in resource implications for the council and partners.

3.00	CONSULTATIONS REQUIRED / CARRIED OUT
3.01	Not applicable.

4.00	RISK MANAGEMENT
4.01	The East Area ICF Partnership Group maintains a risk register to note risks within the programme and to identify and monitor mitigating actions. The most significant risks relate to the impact of any loss of or change in funding streams and the timescales against which partners need to work where decisions are not made by WG until well into the year.

5.00	APPENDICES
5.01	Appendix 1 - Guidance for the 2018 ICF programme
5.02	Appendix 2 – North Wales population needs assessment
5.03	Appendix 3 - Summary of revenue schemes and key performance to date

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS
6.01	None.
	Contact Officer: Karen Chambers, Senior Cluster Coordinator and Partnership Lead Telephone: 01352 702571
	E-mail: Karen.Chambers@flintshire.gov.uk

7.00	GLOSSARY OF TERMS
7.01	(1) Integrated Care Fund A funding stream from Welsh Government that aims to drive and enable integrated working between Social Services, Health Boards, housing providers, the third and independent sectors. The focus of the fund is to enable older people to maintain their independence and remain at home, avoiding unnecessary hospital admissions and delayed discharges. It also supports the development of integrated care and support services for other groups of people including people with learning disabilities, children with complex needs and autism.
	(2) North Wales Population Needs Assessment An assessment of the care and support needs of the population of North Wales produced by the six councils in North Wales and Betsi Cadwaladr University Health Board with support from Public Health Wales.
	(3) Welsh Community Care Information System An IT system being introduced in Wales to give community nurses, mental health teams, social workers and therapists the digital tools they need to work better together by allowing shared access to relevant information about an individual in relation to their care/treatment.

(4) Integrated Autism Service

A new national autism service for Wales, which will provide lifetime support for children and adults. The intended purpose of the service is to:

- bring together existing children's autistic spectrum disorder neurodevelopmental teams within health boards to provide diagnostic, assessment and specialist interventions (therapies) for children with ASD;
- Develop new specialist adult teams, which will offer diagnostic provision;
- Develop new community support teams in health board areas, providing behavioural advice, low-level support, access to community services, support programmes and sign-posting. This service will also provide training for parents and carers across the age range;
- Build on existing services by developing professional capacity and enhancing skills, to improve diagnostic assessment and postdiagnostic support.

(5) Step Up Step Down

Bed based service provided within care homes in Flintshire primarily for older people who are not able to live independently at home for a short period, normally up to 6 weeks. Step Up describes the service for those who need additional support to prevent admission to an acute hospital or long term care and Step Down describes the support offered after a stay within an acute hospital. The aim is to prevent unscheduled care, delayed transfers of care (see below) or placement in a long term care setting. It is also recognised that many people are more appropriately assessed for their long term needs outside of an acute setting. SUSD beds provide an opportunity for improved assessment of long term needs.

(6) **Delayed Transfers of Care**

Description of the point where a patient is clinically able to leave a hospital bed or similar care provider. Reasons are numerous and include delays in assessment of ongoing need, lack of community provision including social care packages to support ongoing needs, delays in obtaining equipment or modifications required to the home.

(7) Community Resource Team

A multidisciplinary team who work in the community to provide home based care for patients with a clinical need as an alternative to a hospital admission or prolonged stay.

(8) Progress for Providers

An ambitious, innovative programme which to date has focussed on residential care providers in Flintshire. The primary aim of the work is to move away from a 'task and time' model of service delivery to one that focusses on quality of life for the service user through implementation of a "toolkit", training and development for the Provider and its care staff and introduction of an accreditation scheme. The award winning service is

now being increased in terms of its scope by providing more support to homes to increase through to gold award and the development of a new programme for domiciliary care providers.

(9) Multi factoral risk assessment

An evidence based assessment of a wide range of factors that are known to increase an individual's risk of falling. The assessment provides opportunities to identify risk and ways to reduce that risk.

(10) Repatriation and Prevention (RAP) service

A service delivered within the Third Sector to work with children with complex needs and their families to provide:

- 1.Rehabilitation and therapeutic support
- 2.Provision of solutions to prevent family breakdown and/or escalation of need leading in risk of out of county placement

The third element of service supported by ICF which is led by the council is seeking to increase fostering capacity to children within the service in order to provide respite for families who are often foster carers themselves.

(11) Progression Service

The aim of the multi-disciplinary service is to ensure that care and support planning with individuals help them to maximise their independence. This is done with the aid of assistive technology and the use of a positive approach to risk. Services provided meet need with the aim that those needs reduce over time as confidence and skills grow.