Report No: 53/2018 PUBLIC REPORT

CABINET

20 March 2018

VARIATION TO THE SECTION 75 AGREEMENT - HOSPITAL DISCHARGE CARE COMMISSIONING

Report of the Director for People

Strategic Aim: Me	Meeting the health and wellbeing needs of the community		
Key Decision: Yes		Forward Plan Reference: FP/011117	
Exempt Information		No	
Cabinet Member(s) Responsible:		Mr A Walters, Portfolio Holder for Adult Social Care and Health	
Contact Officer(s):	Mark Andrews, Deputy Director for People		01572 758339 mandrews@rutland.gov.uk
	Karen Kibblewhite, Head of Commissioning		01572 758127 kkibblewhite@rutland.gov.uk

DECISION RECOMMENDATIONS

That Cabinet:

1. Approve the variation to the Section 75 Agreement between Rutland County Council and East Leicestershire & Rutland Clinical Commissioning Group (ELRCCG) to delegate the commissioning of hospital discharge packages of care for individuals from ELRCCG to Rutland County Council.

1 PURPOSE OF THE REPORT

1.1 This paper sets out the process currently used to commission packages of care on discharge from hospital and requests approval to formalise that process and the related funding, by using a variation to the current Section 75 Agreement to delegate commissioning of those care packages.

2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The Better Care Fund Programme sets out requirements for health and care partners to reduce the level of delays in transfers of care from hospital to the community once individuals are medically fit to be discharged, known as Delayed Transfer of Care (DTOCs). The reduction of these delays creates better care and outcomes for the individuals concerned, and leads to wider savings in the health system against cost of acute bed stays.
- 2.2 Rutland has made significant progress in reducing these delays and are one of the top performing authorities within the country. As part of the programme of work to ensure these delays are kept to a minimum for Rutland residents, the Council works jointly with East Leicestershire and Rutland Clinical Commissioning Group (ELRCCG) to identify and commission packages of care to ensure individuals can be discharged from hospital safely.

2.3 Current Model of Commissioning

- 2.3.1 For the past 21 months, the Council has trialled a process to support the effective commissioning of care packages for individuals being discharged from hospital, thus reducing delays in their discharge. The RCC Social Workers, on behalf of Health, assess individuals' needs and commission appropriate support packages enabling those individuals to leave hospital as soon as they are medically fit. The majority of these packages are residential care home placements, but also include home care packages.
- 2.3.2 For each package of care which is likely to be funded by Health, the assessing Social Worker contacts the Head of Strategic Commissioning and Planning at the CCG to request permission to commission that individual placement and recharge the CCG where applicable.
- 2.3.3 Post-discharge from hospital, the assessment of whether an individual should be funded by Social Care or by Health is undertaken; where the assessment shows that the individual is eligible for health funding this is recharged to ELRCCG at the relevant set rate. This process has resulted in a significant positive impact on reducing delays of hospital discharge.

2.4 Use of the Section 75 Agreement

- 2.5 Section 75 Agreements are made under the National Health Services Act 2006 and enable commissioning functions to be delegated from health in this case ELRCCG to the local authority. The Council and ELRCCG have a Section 75 Agreement in place currently, this paper requests approval of a variation to that Agreement for the purpose of commissioning the hospital discharge packages of care.
- 2.5.1 So far the process of commissioning hospital discharge has worked on a mutual

informal agreement with funding for each package of care being recharged in arrears; the request is to formalise this delegated commissioning and recharging arrangement via the Section 75 Agreement, reducing overall risk to the Council by holding the funding from the CCG in advance within the Adult Social Care budget.

2.5.2 The formalised arrangement can be provided for as a variation within the existing Section 75 Agreement held between ELRCCG and the Council.

3 CONSULTATION

- 3.1 The Portfolio Holder, who is also Chair of the Health & Wellbeing Board, supports the recommendation to add this funding as a variation to the Section 75 Agreement.
- 3.2 ELRCCG are concurrently taking this proposed variation through their own governance processes for formal approval.

4 ALTERNATIVE OPTIONS

- 4.1 This arrangement could continue on an informal basis, with the Council requesting permission to commission each individual placement and recharging the CCG after each placement is made. This alternative has been rejected for two reasons:
 - a) It can result in delays where the relevant authority in the CCG is unavailable and cannot give immediate permission to commission the placement;
 - b) The Council has to fund the placement in advance and recharge afterwards, thereby carrying the financial risk despite the care package being the CCG's responsibility.

5 FINANCIAL IMPLICATIONS

- The value of this proposed schedule of the Section 75 is based on the spend on activity over the first three quarters of 2017/18, since 1st April 2017, which was £74,911. The value is therefore proposed at £103,400 for 2018/19. This is slightly less than the previous full year figure of £118,500, but reflects the changing pattern of individuals' needs.
- 5.2 It is proposed that this sum is held by Adult Social Care and spent per package of care as they are commissioned.
- The spend will be forecast to year end quarterly and monitored by the BCF Partnership Board. Where it becomes apparent through this monitoring that the sum is not sufficient to last to the end of the financial year, both parties will agree an estimation of the spend for the remainder of the financial year and that additional sum will be transferred to the Council.
- 5.4 Any unspent monies at the end of each financial year held by the Council for this purpose will be rolled over to the new financial year, remaining ring-fenced for this use only.

6 LEGAL AND GOVERNANCE CONSIDERATIONS

6.1 The current Section 75 Agreement provides for a variation to be made by

- agreement of both parties through the BCF Partnership Board.
- The spend will be monitored by the Council's Senior Service Manager Adult Social Care and the Head of Strategic Planning and Commissioning from ELRCCG, and reported to the Partnership Board, as part of the wider Section 75 Agreement monitoring.

7 EQUALITY IMPACT ASSESSMENT

This will not change the process assessing and determining need for care packages, and therefore have no impact on those receiving care.

9 COMMUNITY SAFETY IMPLICATIONS

9.1 This will not change the process assessing and determining need for care packages, and therefore there are no direct community safety implications.

10 HEALTH AND WELLBEING IMPLICATIONS

10.1 This will not change the process assessing and determining need for care packages, and therefore have no impact on those receiving care.

11 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

- 11.1 By delegating the commissioning of hospital discharge packages of care, the current process will be formalised and remove the requirement for individual permission to commission each care package. This will make the process more efficient, and reduce the risk associated with recharging the costs after the fact.
- 11.2 A Section 75 Agreement is already in place to manage delegated commissioning arrangements and the related funding streams between the Council and ELRCCG, and can be varied to include this.

12 BACKGROUND PAPERS

12.1 There are no additional background papers to the report.

13 APPENDICES

13.1 There are no appendices.

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.