



Essex County Council

AGENDA ITEM 8A

Report to Health & Wellbeing Board Report of Nick Presmeg	Reference number HWB/16/14
Date of meeting 20 th May 2014 Date of report 1 st May 2014	County Divisions affected by the decision All Divisions (North-East, Mid, and West Essex initially but will impact on south East and South
Title of report: The Integrated Health and Social Care Strategy for Adults with Learning Disabilities in North Essex 2014 - 2017	
Report by: Nick Presmeg, Director of Integrated Commissioning and Vulnerable People, Essex County Council	
Enquiries to: Phil Brown, Commissioning Support Manager, Essex County Council	

1. Purpose of report

- 1.1. The purpose of this report is to present the integrated health and social care strategy for adults with learning disabilities in North Essex to the Health and Wellbeing Board.
- 1.2. The report also describes the commissioning approach that has been agreed between the North-East, Mid, and West Essex CCG's ("North Essex CCGs") and Essex County Council ("ECC") for adult learning disability services in North Essex.

2. Recommendations

- 2.1. The Board is asked to endorse the integrated health and social care strategy for adults with learning disabilities in North Essex.
- 2.2. The Board is asked to acknowledge the integrated commissioning approach that has been developed in North Essex for adults with learning disabilities.

- 2.3. The Board is asked to acknowledge that this commissioning approach is the first stage in developing a whole Essex approach for the commissioning of learning disability services for adults, and that the ambition is for the strategy to become a whole Essex strategy as integrated commissioning arrangements are progressed in South Essex. A mandate to request the necessary additional resources to define and agree these new Pan-Essex arrangements is planned for July of this year.

3. Background and proposal

- 3.1. A project was initiated in April 2013 to integrate the commissioning of adult learning disability services in North Essex.
- 3.2. There were key business drivers for this project. These included:
- The opportunity to implement integrated commissioning within a relatively well defined area to inform future integrated commissioning projects.
 - The requirement to respond to the national Winterbourne View action plan, which requires integrated pathways for people with learning disabilities and behaviours that challenge, supported by pooled budget arrangements.
 - The opportunity to support the Working Age Adult Increasing Independence programme through increasing the opportunities to deliver innovative commissioning solutions across the health and social care economy.
- 3.3. Due to the complexities of the commissioning arrangements for learning disability services in South Essex (that include the unitary authorities of Southend and Thurrock), the intention of the project was to develop integrated commissioning arrangements in North Essex first, and then use this learning to extend the arrangements to include South East and South West Essex CCGs.
- 3.4. To achieve an integrated commissioning approach the project had four main deliverables which included:
- An integrated health and social care strategy describing the priorities for service transformation;
 - Joint commissioning arrangements for commissioning and contracting with health & social care providers underpinned by a Section 75 agreement.
 - Financial arrangements that support integrated commissioning.
 - Governance arrangements across the partnership with delegated decision making mandates.
- 3.5. The strategy was developed jointly by commissioners working for ECC and on behalf of the North Essex CCGs. At the same time as the development of the strategy, the Increasing Independence programme consulted with adults with a learning disability. Their views have shaped the core principles within the strategy.

- 3.6. A key message from the Increasing Independence consultation was that service users and family carers welcome and indeed expect greater integration between health and social care services.
- 3.7. Proposals for integrated commissioning arrangements have been agreed between ECC and the North Essex CCGs, with ECC taking on lead commissioning responsibility for specialist health services for adults with learning disabilities in north Essex.
- 3.8. An agreement made pursuant to the provisions of section 75 National Health Service Act 2006 to integrate health and social care functions (the "Section 75 Agreement") has been documented which describes how these commissioning arrangements will work in practice. The s75 Agreement is in the process of being agreed by the relevant legal departments within ECC and West Essex CCG (who are acting on behalf of the 3 North Essex CCGs). These integrated arrangements position ECC as the Lead Commissioner on behalf of both social care and the North Essex CCGs health. ECC will therefore be acting on behalf of health
- a) in monitoring the performance of existing health contracts
 - b) and acting on behalf of health in terms of defining the future integrated contractual arrangements with the market, acting within the Guidance of Responsible Commissioner with other CCG and local authorities.

The Section 75 Agreement also describes the financial arrangements that will support the integrated commissioning approach. It proposes that a "pooled fund" comprising of monies contributed by ECC and the North Essex CCGs is created to support integrated commissioning. This pooled fund includes the funds to support the integrated commissioning and the necessary funds to discharge the existing health contracts.

The Section 75 Agreement describes the governance arrangements for the integrated commissioning approach. An Integrated Commissioning Executive Board will be created to oversee the commissioning arrangements; the pooled fund; and to monitor progress in implementing the key actions from the strategy. Membership of the Board will include senior managers from both ECC and the North Essex CCGs.

- 3.9. The proposals to integrate the commissioning of adult learning disability services were agreed at the Executive Boards of each of the North Essex CCGs in March 2014.
- 3.10. The proposals have been supported by Strategic Commissioning Board and are being proposed to the Member for approval as a Cabinet Member Action. This has been added to the Forward Plan for consultation and is planned for final signature by the Lead Member during May.
- 3.11. The Section 75 Agreement will be presented to the Health and Wellbeing Board once it has been formally signed off by all parties.

4. Policy context

- 4.1. The strategy and proposed commissioning approach is consistent with the vision declared in the Joint Health and Well Being Board Strategy for Essex (2013) that:

“By 2018 residents and local communities in Essex will have greater choice, control, and responsibility for health and wellbeing services. Life expectancy overall will have increased and the inequalities within and between our communities will have reduced. Every child and adult will be given more opportunities to enjoy better health and wellbeing.”

- 4.2. The strategy is also consistent with the *Increasing Independence Programme for Working Age Adults* that was agreed by the Cabinet in March 2014.

5. Financial Implications

- 5.1. The Council's expenditure described in the strategy is based on the financial model agreed for the Increasing Independence programme by Cabinet in March 2014. The CCGs expenditure is based on their current levels of expenditure and will be agreed as part of the Section 75 agreement.

6. Legal Implications

- 6.1. One of the implications of the strategy is a move towards greater integration of commissioning and a move towards integrated delivery across health and social care.
- 6.2. As outlined above, the first pilot of this integration is starting between the North Essex CCGS and ECC.
- 6.3. The Section 75 Agreement provides the legal mechanism that allows ECC to act on behalf of the North Essex CCGs in delivering an integrated commissioning function and, in particular, to manage the contracts related to the health funds of £12.763 million that have been placed within the pooled fund. The Section 75 Agreement is a one-year agreement that is intended to pave the way for a longer-term arrangement which will include the CCGs in the South of the county. These subsequent steps in the partnership will require new legal agreements that will supersede this initial Section 75 Agreement and further consultation will also be required in due course.

7. Staffing and other resource implications

- 7.1. The employee who previously commissioned specialist learning disability health services on behalf of the North Essex CCGs retired in April 2014. Included within the Pooled Fund is a sum of £100,000 from the North Essex CCGs that provides the funding for ECC to take on this role. ECC is in the process of recruiting

someone to fulfil that role and they will work as an ECC employee within the commissioning function for vulnerable people.

8. Equality and Diversity implications

- 8.1. The purpose of the strategy and the integrated commissioning approach is to address the inequalities experienced by people with learning disabilities.
- 8.2. An Equality Impact Assessment has been completed as part of the strategy and is included as an Appendix.

9. Background papers

- 9.1. The strategy *“Better Lives, Better Health for Adults with Learning Disabilities in North Essex - An integrated strategy for adults with learning disabilities 2014 – 2017”*

An Easy Read version of the strategy is also available. Both the strategy and Easy Read versions of the strategy were presented to the Learning Disabilities Partnership Board in March 2014.

- 9.2. The Consultation Document for the Increasing Independence Programme for Working Age Adults.
- 9.3. The Response to the Increasing Independence Consultation.