Forward Plan reference number: 'Not applicable'

Report title: Grant Funding for Digital Social Care Records

Report to: Councillor John Spence, Cabinet Member of Health and Adult Social Care

Report author: Zoe Harriss, Procurement Lead

Date 9th November 2022

For: Decision

Enquiries to: Zoe Harriss, Procurement Lead, zoe.harriss@essex.gov.uk

County Divisions affected: All Essex

1. Everyone's Essex

- 1.1 When technology is embedded seamlessly into care and support services it can be transformative, helping people to live independent and fulfilled lives in their homes, communities, or other care settings.
- 1.2 Digitising the social care sector is central to this, and the government has committed to spending at least £150m in doing this, creating a Digital Social Care Record (DSCR) fund, with the first £25m now available across the country.
- 1.3 Each ICS (Integrated Care System) which serves the Essex population has successfully bid for some of this money, with £1.8m being granted for use across the next three years.
- 1.4 The purpose of this decision is to seek approval, in collaboration with our partners in the three ICSs, to distribute the Essex share of that funding for year one (amounting to £870,466), to eligible CQC-registered providers.
- 1.5 Helping people live independent and fulfilled lives is also central to Everyone's Essex, the county council's ambitious plan for the county, and so this decision accords strongly with those aims.
- 1.6 As digitisation will enable care providers to move away from paper-based working, this decision also chimes with the council's climate ambitions.

2 Recommendations

Agree to accept grant funding from Mid and South Essex, Suffolk and North East Essex and, Herts and West Essex Integrated Care Boards (ICBs) of £870,466. Agree to enter in to s256 agreements with the Integrated Care Boards (ICBs) for the transfer of the grant funding from them to the Council

- Agree to provide grant funding to eligible providers following a grant application process and to delegate to Director Strategy and Integration (Adults) to decide the providers and enter into the grant agreement.
- 2.3 Agree to act on behalf of Thurrock and Southend to manage the grant funding on their behalf.

3 Background and Proposal

- 3.1 NHS England established 42 statutory ICBs on 1st July 2022 in line with its duty in the Health and Care Act 2022. This was as part of the Act's provisions for creating Integrated Care Systems (ICSs).
- 3.2 ICSs are partnerships of NHS bodies and local authorities, working with other relevant local organisations, that come together to plan and deliver joined up health and care services to improve the lives of people in their area.
- 3.3 Each ICS has an ICB, which is a statutory NHS organisation responsible for developing a plan in collaboration with NHS trusts/foundation trusts and other partners for meeting the health needs of the population, managing the NHS budget, and arranging for the provision of health services in the defined area.
- 3.4 The Council is a member of Mid and South Essex ICB, Suffolk and North East Essex ICB and Hertfordshire and West Essex ICB. ICBs replace Clinical Commissioning Groups and commission healthcare.
- 3.5 On 1 December 2021, the Department of Health and Social Care published the White Paper, People at the Heart of Care, which outlines a 10-year vision for reform. The White Paper recognised that when technology is embedded seamlessly into care and support services, it can be transformative, helping people to live happy, fulfilled lives in their homes, communities, or other care settings. To support this goal, and the government's wider ambitions for reform, the White Paper committed to invest at least £150m in digitising the social care sector from April 2022.
- 3.6 The government has made a £25m Digital Social Care Record (DSCR) fund available to ICS via a new NHS Transformation Directorate (NHSTD) to support the vison set out in the White Paper. The DSCR fund is a national programme open to all 42 ICSs to further deliver this transformation
- 3.7 The NHSTD DSCR fund will allocate recurring funding over a 3-year period. All 42 ICS will receive a core funding settlement which will be released on agreement of a delivery plan (a three-year strategic plan, supported by a Year 1 implementation plan).
- 3.8 Each Essex ICS bid for funding through the submission of a Year 1 implementation plan. All bids were approved in July 2022 and have been

allocated funding by NHSTD to support eligible providers to adopt Digital Social Care Records

- 3.9 While the funding will be issued by NHSTD to the NHS partners in each of ICBs, NHSTD requested that Local Authorities take the lead in distributing funding to eligible providers. It is proposed that the Council enter into a S256 agreement with Mid and South Essex, Suffolk and North East Essex and Herts and West Essex Integrated Care Boards to pass the NHSTD funding to the Council and distribute it on their behalf.
- 3.10 The grant funding total allocation for the ICS in Essex is £870,455.50, made up as follows:
 - Mid and South Essex: £304,800 for Essex County Council Mid footprint, £81,280 for Thurrock footprint and £121,920 for Southend footprint, plus £68,800 towards implementation and project management costs
 - Suffolk and North East Essex: £152,950, plus £24,083.50 towards implementation and project management costs
 - Herts and West Essex: £116,622

The Council will be transferred this funding by the NHS partners in the ICB under the terms of the proposed s256 Agreement

- 3.11 There are milestones required to be met by NHSTD that will be set out in the S256 agreements between the Council and NHS partners for the Council to work with ICBs as follows:
 - hosting a provider information day
 - understanding the current position of providers on their digital journey by issuing a questionnaire and assessing the response
 - the Council will be responsible for supporting providers with applications for grant funding, evaluating, and making payment
- 3.12 It is a condition of the NHSTD funding that it is distributed to providers to adopt the introduction of Digital Social Care Records. It is proposed that the Council will distribute grant funding to providers that meet eligibility criteria. This criteria includes that the recipient provider did not have a digital social care record before 1 April 2022 and have or are working towards data security accreditation with NHSTD. The grant funding will be made available to providers by an application process to the Council where the eligibility criteria is assessed.
- 3.13 Providers receiving funding will be required to enter into a grant agreement to set out the terms of the grant and this includes a pass through of NHSTD terms and requirements from the ICBs. Proof of spend will be required from providers.
- 3.14 The maximum grant funding available for each Provider in Essex who meets the criteria will be £10,000 unless variation to that cap is expressly agreed by NHSTD.

- 3.15 Benefits to providers from participating in this scheme include:
 - · reductions in overall administrative task time;
 - improved management and oversight;
 - improved data quality and timely access ensuring a safe and responsive service:
 - increased compliance against regulation and standards;
 - reduced costs for paper and printing.
- 3.16 Thurrock and Southend District Councils are members of the Mid and South Essex ICS and ICB. It is proposed that the Council will act on behalf of Thurrock and Southend to undertake the activities in 3.11 and distribute grant funding to providers. There will be an agreement with Thurrock and Southend to set out the terms.
- 3.17 Implementation plans to secure grant funding for years 2 and 3 will need to be submitted to NHSTD and approved separately and may include supporting registered providers to: continue to adopt digital care records; to increase the use of sensor-based falls prevention and detection technology in residential care homes; and to trial other forms of care technology. This funding can be drawn down through a NHSTD approval process. A further decision will be taken in relation to this funding in due course.

4 Links to our Strategic Ambitions

- 4.1 This report links to the following aims in the Essex Vision
 - Enjoy life into old age
 - Connect us to each other and the world
- 4.2 Approving the recommendations in this report will have a net zero impact on the Council's ambition to be net carbon neutral by 2030.
- 4.3 This report links to the following strategic priorities in the Organisational Strategy 'Everyone's Essex':
 - Health wellbeing and independence for all ages

5 Options

5.1 Option 1 (not recommended) - Do nothing:

- While there is no immediate requirement to carry out this work, we would be
 missing the opportunity to take advantage of available funding. The
 requirement for full shared care records is stated in the Health and Care Act
 2022 and the work will be needed in the future.
- There is a current need to complete detailed baselining work with our providers for existing projects and we aim to promote the adoption of digital care records going forward.
- This approach may prevent providers from accessing grant funding which could be deemed as unfair.
- This approach may negatively impact our relationships within the ICSs.

5.2 Option 2 (recommended) – Commit to DSCR grant funding requirements:

- This approach would guarantee we maximise the funding opportunity available.
- This approach will exert some pressure on the Local Authority to deliver a programme of work during a time of increased demand and workforce shortages, although this is mitigated by funding for project management and implementation of the grant funding process.
- This approach will allow us to build on our relationship with the provider market to deliver change to those willing and able to commit at this time of increased demand and workforce shortages. This approach demonstrates our commitment to integrated working whilst supporting the NHS to understand more about social care and Local Authority pressures.
- This approach would support our relationships within the ICSs. Care teams
 will be able to access real-time information about a person's care through
 electronic care records to ensure people receive the right care, at the right
 time.

6 Issues for Consideration

6.1 Financial Implications

6.1.1. The three ICSs that the Council are part of were successful in having their Year 1 plans approved thereby securing the funding allocated to each ICS from the Digital Social Care Record Fund administered by NHSTD (£1.8m). The agreed share of the total funding for Essex care providers from the three ICS's is £870,000 for 2022/23 (including Southend and Thurrock) and is based on a share of implementation costs and the number of provider locations in Essex. The Year 1 funding will be used to support the implementation of Digital Social Care Records across Essex (including Southend & Thurrock) as set out in the table below.

	Implementation	Digital Social Care record provider grant	
Digital Social Care Record	Funding	funding	TOTAL
	£	£	£
MSE	68,810	508,000	576,810
SNEE - ECC Share only	24,084	152,950	177,034
HWE - ECC Share only	-	116,622	116,622
TOTAL Funding available	92,894	777,572	870,466
ECC footprint	92,894	574,372	667,266
MSE- Southend		121,920	121,920
MSE - Thurrock		81,280	81,280
TOTAL Funding available	92,894	777,572	870,466

- 6.1.2. The funding will pass to each ICB (NHS lead) and then be distributed to Local Authority partners. Each ICB has signed a funding agreement between itself and NHS England to enable the funding transfer to happen. The funds will be transferred on a quarterly basis subject to project progress being demonstrated, with some funding already transferred from NHSTD to the relevant ICB. S256 agreements will be put in place with each ICB to transfer the funding to the Council. Payments from the ICB to the Council are expected to be made in line with the funding payment schedules agreed with NHSTD. So long as the milestones are met as outlined in each implementation plan, or any amendment to the milestones are agreed with NHSE, then there is no clawback mechanism from NHSTD. The milestones are activity based and are very unlikely to be missed by the Council. The s256 agreements and grant agreements to be put in place will protect the position of the Council and mitigate the risk
- 6.1.3. The implementation funding received of £93,000 will be used by Procurement to lead the implementation across Essex (including Southend and Thurrock) which will include responsibility for carrying out baselining activity, reporting on project progress, administration of grant awards and engagement with the market.
- 6.1.4. The funding for Digital Social Care Records of £777,000 will be allocated to registered CQC locations in Essex on receipt of an eligible signed grant application on a first come first served basis for each ICS footprint and once the grant has been committed no further applications will be approved. The maximum grant will be the lower of £10,000 or 50% of their costs to support the implementation of procuring a digital social care record from the assured suppliers list. The grant is to support implementation only of the purchased system and will not be used to pay for ongoing licence fees or any other purposes. 80% of the payment will be made upon submission of evidence and 20% on submission of benefits template to ensure that the systems purchased are implemented. The timelines set for processing grant applications should ensure that the risk of distributing the grant ahead of

- reimbursement of the grant by the ICB is minimised and will therefore have minimal impact on the cashflow of the Council.
- 6.1.5. It is estimated that the grant funding provided will allow up to a minimum of 76 provider locations to be supported across Essex (see below) and therefore deliver an increase in take up of Digital Social Care Records.

	Estimated CQC locations elgible No.	Take up based on £10,000 max grant No.	% increase in take up %
MSE	342	50	15%
SNEE - ECC Share only	161	15	9%
HWE - ECC Share only	70	11	16%
TOTAL	573	76	13%

It is likely that the full grant allocation will not be distributed to providers within the first year, particularly as many providers have already invested in digital care records, which means that they will not be eligible for grant funding. ICS partners and NHSTD will need to agree what to do with any underspend of grant monies.

- 6.1.6. There was an expectation that ICSs would match fund allocations although it has been recognised that in Year 1 budgets were already set. For The Council, a total of £151,000 of match funding in kind through officer time was identified as part of the bid submissions.
- 6.1.7. The grant funding for Years 2 and 3 will be subject to a separate governance approval process once details are known including any match funding requirements.

6.2 Legal Implications

- 6.2.1 The Health and Care Act 2022 to ensure that all health and adult social care providers comply with any standards that we publish as information standards notices (ISNs). Their compliance with ISNs is mandatory.
- 6.2.2 The Council has the legal power to pay the grants to the providers pursuant to its statutory powers under s111 of the Local Government Act 1972 and s1 of the Localism Act 2011.
- 6.2.3 When making onward grants, the Council must consider whether such grants and grant recipient comply with the subsidy control rules in addition to complying with all grant funding conditions.

7 Equality and Diversity Considerations

- 7.1 The Public Sector Equality Duty applies to the Council when it makes decisions. The duty requires us to have regard to the need to:
 - (a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination etc. on the grounds of a protected characteristic unlawful
 - (b) Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - (c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
- 7.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, sex, and sexual orientation. The Act states that 'marriage and civil partnership' is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).
- 7.3 The proposals in this report will not have a disproportionately adverse impact on any people with a particular characteristic.

8 List of Appendices

Appendix A - ECIA

9 List of Background papers

None

I approve the above recommendations set out above for the reasons set out in the report.	Date
Cllr John Spence, Cabinet Member for Adult Social Care and Health	01.12.22

In consultation with:

Role	Date

Nick Presmeg, Executive Director, Adult Social Care	30/11/2022
Director, Corporate Services (S151 Officer) Stephanie Mitchener on behalf of Nicole Wood	17/11/2022
Director, Legal and Assurance (Monitoring Officer)	25.11.2022
Laura Edwards on behalf of Paul Turner	