North Yorkshire Council

Health and Adult Services

28 September 2023

Funding application to DHSC for the Urgent and Emergency Care Support Fund for Local Authorities

Report of the Corporate Director Health & Adult Services.

1.0 PURPOSE OF REPORT

1.1 To request approval from the Executive Member for Health & Adult Services following consultation with the Corporate Director (Health and Adult Services) and the Corporate Director Resources to authorise the submission of an application for grant funding of up to £1.7m for in respect of the Urgent and Emergency Care support fund for local authorities

2.0 BACKGROUND

- 2.1 On the evening of Friday 8 September, the Council received notification from DHSC that it was being asked to bid for funding known as the Urgent and Emergency Care Support Fund for Local Authorities (UECSFLA).
- 2.2 North Yorkshire was chosen as it is defined as one of those local authorities in areas with the greatest health and care challenges and it was asked to submit proposals to say how the Council would use this funding to strengthen the resilience of urgent and emergency care services this winter.
- 2.3 The Councils chosen are those in Tier one and Tier two integrated care systems (ICSs) set out below:

Tier one

Region	ICB
South West	Cornwall and the Isles of Scilly ICB
South West	Devon ICB
London	North East London ICB
South East	Kent and Medway ICB
North West	Cheshire and Merseyside ICB
North West	Greater Manchester ICB
East of England	Norfolk and Waveney ICB

Tier two

Region	ICB
East of England	Hertfordshire and West Essex ICB
Midlands	Herefordshire and Worcestershire ICB
Midlands	Shropshire, Telford and Wrekin ICB
Midlands	Staffordshire and Stoke-On-Trent ICB
South East	Frimley ICB
South East	Hampshire and Isle of Wight ICB
North East & Yorkshire	Humber and North Yorkshire ICB

2.4 Local authorities in these areas were therefore invited to develop proposals in agreement with the relevant ICB and provide evidence of ICB views on the proposals on the application form.

Proposals would be strengthened if linked to the ICB's winter surge plan. These proposals must be submitted by 29 September, following a Webinar held by the Department on 21 September.

2.5 The Department, supported by NHS England, will assess proposals against criteria set out below, with the aim of making payments in early October.

The proposals –

- Must impact on urgent and emergency care resilience and performance over the winter period, whether by helping prevent avoidable admissions or by reducing discharge delays
- Are deliverable over the winter 2023/24 period
- Are additional to existing LA expenditure and capacity plans and linked to NHS winter surge plans and Better Care Fund demand and capacity plans, for example by addressing gaps identified in those plans.
- 2.6 Should the Council be successful in being granted the funding, we will be expected to report on any discharge capacity bought with it within our monthly Discharge Fund capacity returns. We will also be expected to provide an interim report (in January 2024) to report on progress against planned spend and a final report in May 2024.
- 2.7 The indicative amount of funding available to NYC is £1,133k, although DHSC has said we can apply for 150% of this figure (i.e. £1,705k) presumably to be able to use funds which other Local Authorities have declined to apply for.
- 2.8 Discussions have been rapidly convened with the ICB and proposals put together which are suitable to officers in both organisations for both the 100% and 150% figures.
- 2.9 The timeframe for this bid has been extremely tight. It should also be said that the bidding process put in place by DHSC is a move away from previous practice when providing funds to support the NHS and Local Authorities with winter pressures.

3.0 **DETAILS OF THE BID**

- 3.1 If our bid is successful, NYC would receive funding of between £1.1m and £1.7m.
- 3.2 This bid builds on initiatives funded through the NHS Capacity Fund and Social Care Discharge Fund to go further to avoid hospital admissions and expedite discharge and flow, through either extended or additional schemes. The schemes will also assist NYCs strategic objective of both supporting hospital discharge and reducing reliance on short stay residential beds.
- 3.3 The proposals will mean:
 - Re-introducing the same-day transport offer successfully used last winter across York and Scarborough Teaching Hospitals NHS Foundation Trust to expedite urgent transfer of people, equipment and medicines
 - Increasing community equipment capacity above contracted levels to support people returning home earlier with higher needs
 - Employing additional Agency Social Workers to increase the North Yorkshire Council staff offer in discharge hubs to speed-up allocations and improve NCTR rates
 - Employing Agency Social Workers/Occupational Therapists to bring down waiting times for NHS and social care and by allowing people to be stepped up or discharged on pathways 1 and 2 more quickly and reduce the risk of deconditioning, admission to hospitals, speed of discharge from acute and community hospitals, and reliance on long-term bed placements

- Establishing winter grants to targeted voluntary sector Community Anchor
 Organisations across North Yorkshire to expand prevention offer and facilitate onward
 flow to community-based support from intermediate care to support discharge
- Block-booking additional domiciliary care capacity in the care market in the form of a bridging service to enable rapid discharge
- Purchasing additional licences for the GP out-of-hours provider (NIMBUS) to establish an improved integrated service offer and improved urgent care response
- A flexible approach to purchasing additional community beds and spot-purchased care market placements in response to emerging winter requirements
- Developing additional support for unpaid carers
- Additional support for discharges from mental health wards and people with mental health conditions in acute care
- 3.4 The value of the proposals above exceeds the 100% funding available. Depending on the allocation received, we would look to scale proposals accordingly. The main areas where the 150% funding would provide significant additional capacity would be: expanding our ability to fund additional agency therapy posts and funding additional community beds or community placements as required in response to additional winter pressures. We would also seek to extend capacity and response through acute hospital discharge lounges, where appropriate.
- 3.5 We have learned from experience that winter capacity requirements can be highly variable, due to prevalence of covid, other viral conditions, etc. We would want to be able to work fast and flexibly to bring additional capacity on board quickly from the care market when required.

4.0 CONSULTATION UNDERTAKEN AND RESPONSES

4.1 Proposals have been co-developed through the Tactical Group between North Yorkshire Council (NYC) and North Yorkshire Place (within the Humber and NY ICB). This team is responsible for developing the joint proposals for the Social Care Discharge Fund and reports up to a joint Health and Care Board between NYC and NY Place (ICB). The proposals are also consistent with the NY Place-led winter plan, as part of the ICB system plan, which has been again co-developed at the same time.

5.0 CONTRIBUTION TO COUNCIL PRIORITIES

5.1 Existing schemes through NHS Capacity and Social Care Discharge Funds have achieved improved system performance since April 2023, but there is still considerable scope to go further. Whilst OPEL levels for acute Trusts are better than the equivalent period last year, the number of people who are Not Meeting Criteria to Reside in acute hospitals is only reducing slowly. We would expect significant further improvements this winter as a result of this investment.

6.0 ALTERNATIVE OPTIONS CONSIDERED

6.1 Although there are unusual and additional reporting burdens related to this grant, it is felt that it is beneficial to go through that process to bring in extra resources to the area.

7.0 IMPACT ON OTHER SERVICES/ORGANISATIONS

7.1 The successful implementation of proposed schemes identified within the grant application will deliver a positive impact on the discharge performance across the North Yorkshire footprint, benefitting both Humber and North Yorkshire ICB and West Yorkshire ICB (covering Craven) and associated Acute Trusts and reduce escalation and risk over the winter months. It will also contribute to NYC's goal to reduce long-term reliance upon short stay residential beds.

8.0 FINANCIAL IMPLICATIONS

- 8.1 Should the Council be successful in being granted the funding, we will be expected to report on any discharge capacity bought with it within our monthly Discharge Fund capacity returns. We will also be expected to provide an interim report (in January 2024) to report on progress against planned spend and a final report in May 2024.
- 8.2 Additional funding granted will have to be spent by 31 March 2024. The Council will also ensure that any spend is one-off and does not cause ongoing commitments

9.0 LEGAL IMPLICATIONS

- 9.1 Grant terms and conditions, likely through a Memoranda of Understanding will be put in place for each local authority, setting out how funding will be used and what information the local authority will be expected to provide to demonstrate impact and value for money. This will be reviewed by legal services and if the terms and conditions present any unacceptable risk to the Council the grant would not be accepted.
- 9.2 The Council shall ensure any spend of the grant monies is compliant with the Public Contracts Regulations 2015 and the Subsidy Control Act 2022 where applicable.

10.0 EQUALITIES IMPLICATIONS

10.1 Consideration has been given to the potential for any equality impacts arising from the success of this grant and the implementation of associated schemes. The equality impact assessment screening tool is attached at Appendix A. No significant adverse impact is expected for any groups of people with protected characteristics identified in the Equalities Act 2010.

11.0 CLIMATE CHANGE IMPLICATIONS

A Climate change impact assessment has been completed and is attached at Appendix B. No significant change is expected as a result of the implementation of schemes under the grant, although it is noted that implementation of a discharge transport service will provide a more co-ordinated response and therefore create efficiency with a positive effect on the climate.

12.0 POLICY IMPLICATIONS

12.1 There are no policy implications for submitting the grant application.

13.0 HUMAN RESOURCES IMPLICATIONS

13.1 As stated above, any staffing costs incurred by use of the funds will be temporary and not have ongoing commitments.

14.0 ICT IMPLICATIONS

14.1 No additional ICT implications arising from this bid.

15.0 REASONS FOR RECOMMENDATIONS

15.1 To enable the Council to bid for up to £1.7m which can be used in partnership with the ICB to support winter pressures.

16.0 RECOMMENDATION

To request approval from the Executive Member for Health & Adult Services following consultation with the Corporate Director (Health and Adult Services) and the Corporate Director Resources to authorise the submission of an application for grant funding of up to £1.7m

Report Authors -

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