

Request for approval for an additional £45k for the period of February 2021-January 2022 to pay Leeds Care Association for the Care Home Trusted Assessor Roles

Date: 22 September 2021

Report of: Deputy Director Integrated Commissioning

Report to: Director Adults and Health

Will the decision be open for call in? Yes No

Does the report contain confidential or exempt information? Yes No

What is this report about?

Including how it contributes to the city's and council's ambitions

- In June 2018 Integrated Commissioning Executive (ICE) approved the creation and funding of two Care Home Trusted Assessor (CHTA) roles to assist with early discharge planning for patients at Leeds Teaching Hospital Trust (LTHT) and Leeds & York Partnership NHS Foundation Trust (LYPFT) who need to move into a care home, or return to a care home placement following a stay in hospital. This was a venture embarked upon in partnership with a number of key partners: Leeds Care Association (LCA), Leeds Clinical Commissioning Group, LTHT, and LYPFT.
- The LCA employ the CHTA's to help facilitate discharges from hospitals into care homes. The original funding of £80K, split equally between LCC and the CCG was approved through an administrative decision process in January 2021.
- This decision is for an additional £45k due to the LCA revealing they had made several invoicing errors that needed to be reconciled for previous work undertaken (£35k) and to ensure there is sufficient funding for the CHTA roles for the remainder of the funding period (£10k). This will increase the overall value of this funding period February 2021 to January 2022 from £80k to £125k. Ordinarily this decision would be another administration decision, however for the purpose of transparency this will be published as a Significant Operational Decision.
- The CHTA's will contribute to the Council's policies and the Best Council Plan including delivery of the better lives programme by contributing to: people living longer and healthier lives; helping people to live full, active and independent lives; ensuring that people's quality of life is improved by access to quality services; and; helping people to live in healthy and sustainable communities.

Recommendations

The Director of Adults and Health is recommended to:

- a) Approve the additional funding for the Care Home Trusted Assessors of £45K to cover the reconciliation of previous invoicing errors and the remaining costs to fund the posts until 31st January 2022.
- b) Note the Head of Commissioning will oversee the implementation of this decision.

Why is the proposal being put forward?

- 1 In June 2018 ICE approved the creation and funding of two Care Home Trusted Assessor (CHTA) roles to assist with early discharge planning for patients at Leeds Teaching Hospital Trust (LTHT) and Leeds & York Partnership NHS Foundation Trust (LYPFT) who need to move in to a care home, or return to a care home placement following a stay in hospital. This was a venture embarked upon in partnership with a number of key partners: Leeds Care Association (LCA), Leeds Clinical Commissioning Group, LTHT, and LYPFT.
- 2 The first CHTA was recruited into post in February 2019 and the second recruited in July 2019. The funding for these posts was initially agreed until the end of February 2021. In January 2021 funding was extended until January 2022 to allow the important work of the CHTAs to continue and help facilitate discharges from hospitals into care homes. The total funding agreed for that year, based on costs at that time, was £80K, split equally between LCC and the CCG.
- 3 This report has been put forward as result of the LCA who employ the CHTA's, alerting LCC Commissioners that they have been under invoicing for this service since inception and have requested the difference be paid in full.
- 4 For the period before this current funding year, this shortfall equates to £28,522.43 covering the period of February 2019 until 31st January 2021. Beyond January 2021 funding of £80k was agreed to enable the posts to continue the cost being split equally between LCC and the CCG. This figure was determined based on invoices received from the LCA. These posts have also been under invoiced for and a shortfall of £6,816.71 has been identified for staffing costs between 1st February 2021 and 30th June 2021.
- 5 In addition to the invoice reconciliation, forecasts using the corrected invoicing data indicate that the original £80k agreed to cover costs until 31st January 2022 will not be sufficient and therefore an increase in the funding is requested of just under £10k to cover the anticipated increased cost.
- 6 To enable the continuation of the work undertaken by the CHTA's, the full cost of backdated invoices from inception to 30th June 2021 at a cost of £35,339.04 will need to be met. In addition, an increase to the funding agreed for this year by just under £10k to cover additional costs anticipated because of the incorrect cost forecasts made. This means that the funding for the CHTA scheme for the period 1st February 2021 - 31st January 2022 will increase to £125K from the £80k originally agreed, an increase of £45k. This cost will be

split equally between LCC and the CCG. It is important to note that the figure originally taken to ICE was for an annual cost of £120k, so the adjusted figures do sit in line with the original costings.

- 7 Funding for the costs related to the period prior to 31st March 2021 will be met from Spring Budget underspends, as this was the source of funding for prior years. Additional funding required in the financial year 2021/22 will be met from within existing resources. The CCG half of the funding will be reconciled at the end of the year by colleagues in finance.

What impact will this proposal have?

Wards Affected:

Have ward members been consulted? Yes No

- 8 An equality impact assessment screening has been undertaken and is attached at appendix 1. There is no anticipated negative impact as a result of this decision.

What consultation and engagement has taken place?

- 9 The Executive Member for Adult Social Care and Health Partnerships has been briefed on this decision.

What are the resource implications?

- 10 The funding for the Care Home Trusted Assessor is to be increased from £80k to 125K, this is to cover £35k reconciliation of invoicing errors previously submitted by Leeds Care Association and the remaining invoices to pay for the trusted assessor roles up to the end of January 2022 when the current funding period ends equating to a further £10k. This will mean an additional expenditure of £45k
- 11 Funding for the costs related to the period prior to 31st March 2021 will be met from Spring Budget underspends, as this was the source of funding for prior years. Additional funding required in the financial year 2021/22 will be met from within existing resources. The CCG half of the funding will be reconciled at the end of the year by colleagues in finance.
- 12 The new overall anticipated expenditure for the funding period February 2021 to January 2022 is £125k.

What are the legal implications?

- 13 The decisions highlighted in this report will be taken by the Director of Adults and Health in line with the officer delegation scheme as detailed in Part 3 of the Council's Constitution.
- 14 This decision is a Significant Operational Decision and is therefore not subject to call-in.
- 15 There are no access to information issues arising as a result of this decision.

What are the key risks and how are they being managed?

- 16 The risk is if this funding is not approved then this could mean a key resource is lost in aiding discharge from hospital, if the LCA is unable to resource the CHTA roles for the remainder of the year.

Does this proposal support the council's 3 Key Pillars?

Inclusive Growth

Health and Wellbeing

Climate Emergency

17 The CHTA's will contribute to the Council's policies and the Best Council Plan including delivery of the better lives programme by contributing to: people living longer and healthier lives; helping people to live full, active and independent lives; ensuring that people's quality of life is improved by access to quality services; and; helping people to live in healthy and sustainable communities.

Options, timescales and measuring success

a) What other options were considered?

18 The alternative would be to not reconcile the cost of the previous invoicing errors made by the LCA which may negatively impact the service.

b) How will success be measured?

19 By utilising the care home trusted assessors to continue to aid the timely discharge from hospital and appropriate care home placements.

c) What is the timetable for implementation?

20 This will be implemented once the decision has been approved.

Appendices

21 Appendix 1 is the Equality and Diversity Impact Assessment Screening Tool

Background papers

22 None.