

High Intensity Users Funding Agreement With The Integrated Care Board

To: Communities, Social Mobility and Inclusion Committee

Meeting Date: 21 March 2024

From: Executive Director of Strategy and Partnerships

Electoral division(s): All

Key decision: Yes

Forward Plan ref: 2024/058

Executive Summary: The Communities service at the Council has been selected by the Integrated Care Board (ICB), via an expression of interest process, to host the High Intensity Users (HIU) Operational Team. This report seeks approval to enter into a Section 256 Agreement with the ICB to receive funding to host the team, and for the agreement to be signed under seal.

Recommendation: The Committee is recommended to:

- a) Authorise the Council to enter into a Section 256 Agreement with the Integrated Care Board for receipt of funding to host the High Intensity Users Operational Team; and
- b) Delegate authority to the Executive Director of Strategy and Partnerships, in consultation with the Chair and Vice-Chair of the Communities, Social Mobility and Inclusion Committee, to sign the agreement under seal.

Officer contact:

Name: Jill Buckingham

Post: Head of Communities

Email: jill.buckingham@cambridgeshire.gov.uk

1. Creating a greener, fairer and more caring Cambridgeshire

- 1.1 The opportunity to host the HIU Operational Team has been evaluated against the seven ambitions set out in the Council's Strategic Framework.
- 1.2 Hosting the HIU Operational Team will contribute to the following strategic ambitions:
 - Ambition 3: Health inequalities are reduced.
 - Ambition 4: People enjoy healthy, safe and independent lives through timely support that is most suited to their needs.
 - Ambition 6: Places and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised.
- 1.3 If this approach can successfully help people move past a cycle of crisis, then it will also contribute to:
 - Ambition 5: People are helped out of poverty and income inequality.

2. Background

- 2.1 HIU, in this context, refers to residents who frequently present at hospital Accident and Emergency Departments (ED). These individuals often have complex, but not necessarily medical, needs, which cannot be met by the ED.
- 2.2 Last year, the Cambridgeshire and Peterborough Integrated Care System spent an estimated £28m of NHS funding on emergency care for the 4,500 people attending ED 5-10 times per year (an average of £6,200 per person). While the cost of high impact service use has not yet been quantified in the same way for other organisations and services, including Council services, it is clear that the ED costs are only one part of the total public sector spend.
- 2.3 Early identification of high intensity users of services has shown to reduce Accident and Emergency attendances and non-elective admissions by at least 40% within NHS patient cohorts. Improved understanding of the drivers of high frequency use of Accident and Emergency will also identify gaps and impacts in wider care and support provision.
- 2.4 By hosting the HIU Operational Team on behalf of the system, the Council would help to ensure that people receive a strengths-based and personalised approach to their care and support.
- 2.5 The approach is to focus on an individual's concerns, building a personalised plan with them, and working with wider partners to use all the collective services, assets and resources in a more proactive way.

- 2.6 In October 2023, the Council's Communities service submitted an expression of interest to the ICB to host the HIU Operational Team. The expression of interest application highlighted how hosting the team would complement the work already taking place at a local level alongside the Integrated Neighbourhood Teams, and support the Council's approach to decentralisation, bringing support closer to communities in a meaningful way.
- 2.7 Following a review of expression of interest applications, the Council was named as the successful host organisation.

3. Main Issues

- 3.1 In total, the Council will receive £900,000 to host the HIU Operational Team over a period of 18 months from the date of award.
- 3.2 During the 18-month pilot, the team will contribute to an external evaluation process that will help to determine the future of the work.
- 3.3 Pursuant to Section 256 of the National Health Service Act 2006, payments will be made from the ICB to the Council under a Section 256 Agreement.
- 3.4 The Section 256 Agreement and related service specification has been reviewed and approved by the Head of Communities, the Head of Partnerships and Programmes (Adults, Health, and Commissioning Directorate) and Pathfinder Legal Services.
- 3.5 Proposed costings have been reviewed by the Finance team to ensure there is no adverse financial risk to the Council in hosting the HIU Operational Team.

4. Alternative Options Considered

- 4.1 The following alternative options have been considered in formulating the recommendations contained in the report:
- (a) do nothing – this was rejected, as acceptance of the Section 256 Agreement would enable the Council to host the team and to do nothing would prevent this from happening.
 - (b) go out to tender – not applicable, as this report relates to income and not expenditure.
 - (c) viability – this was considered during the expression of interest process ahead of submitting the expression of interest application for funding to the ICB.

5. Conclusion and reasons for recommendations

- 5.1 The Council has been selected through an expression of interest process to host the HIU Operational Team on behalf of the wider system. To enable recruitment of the team to take place and the work to begin, the Council must receive funding through a Section 256 Agreement from the ICB.
- 5.2 As the total amount of funding to be received is more than £500,000, this is a key decision

that requires approval from the committee and to be signed under seal.

- 5.3 The committee is therefore recommended to authorise the request to receive funding of £900,000 to host the team for a period of 18 months, via a Section 256 Agreement, which would commence from the time that funding is received.

6. Significant Implications

6.1 Finance Implications

This report requests approval to enter into a Section 256 Agreement and to receive funding from the ICB, and no financial implications have been identified for the Council.

6.2 Legal Implications

Section 256 of the National Health Service Act 2006 provides authority for the ICB to make payments to a local authority if it is satisfied that the payment is likely to secure a more effective use of public funds than the deployment of an equivalent amount on the provision of services. A Section 256 Agreement shall be entered into between the Council and ICB.

6.3 Risk Implications

None

6.4 Equality and Diversity Implications

None

6.5 Climate Change and Environment Implications (Key decisions only)

None - this key decision relates to receiving income from the ICS.

7. Source Documents

- 7.1 None