

NORTH LANARKSHIRE COUNCIL

REPORT

TO: Social Work Committee	Subject: <b>Resource Transfer from Health Boards</b>
FROM: Jim Dickie Director of Social Work	
DATE OF COMMITTEE: 21 January 1997	
REF:	

**1. PURPOSE OF REPORT**

1.1 The purpose of this report is to:

- (a) advise Committee about disaggregated resource transfers from Lanarkshire and Greater Glasgow Health Boards;
- (b) update Committee on negotiations with Lanarkshire Health Boards in relation to transfer of resources during 1996/7

**2. DEFINITION**

2.1 Resource transfer is money transferred from Health Boards to local authorities, to reflect the transfer of responsibilities from long term hospital care to social work. This transfer of responsibilities arises through:

- ♦ discharge of long stay hospital patients to community settings;
- ♦ closure of long stay hospital beds;
- ♦ low occupancy levels in NHS long stay hospital beds, which has the same effect as closure as they are effectively not in use, and redesignation of NHS long stay hospital beds for other purposes, such as assessment.

2.2 Resource transfer is normally recurring revenue, with an annual uplift for inflation; however it can also be one off funding and exceptionally the transfer of staff or buildings.

2.3 Resource transfer is intended to cover the cost of direct services required by patients being discharged from hospital, usually residential or nursing care or supported accommodation and day care. It should also be used to fund the infrastructure of social care services to support people who have been discharged and to prevent admission to hospital. The latter group of services includes advocacy, social work staff in joint community teams and respite services.

2.4 The services to be commissioned and funded through resource transfer have to be jointly agreed with the Health Board. The General Manager of the Health Board continues to be accountable for resources transferred.

### 3. DISAGGREGATION OF RESOURCE TRANSFER

- 3.1 The resource transfer agreements which Strathclyde Regional Council had concluded with Health Boards were disaggregated to unitary authorities on the basis of share of relevant population.
- 3.2 The recurring resource transfers disaggregated from Lanarkshire Health Board amounted to £2.391 million, and from Greater Glasgow to £0.322 million, apportioned by care group as follows:

Care Group	Lanarkshire Health Board (£M)	Greater Glasgow Health Board (£M)
Learning Disability	£1.062	£0.070
Mental Health	£0.504	£0.202
Older People	£0.825	£0.041
Children (Special Needs)		£0.008
Physical Disability		£0.001
Total	£2.391	£0.322

- 3.3 The deployment of the resources within the Social Work Department is detailed below. By agreement with the respective Health Boards, the focus of these services can be altered over time to reflect changing client needs.

Resources	Lanarkshire Health Board (£M)	Greater Glasgow Health Board (£M)
Residential & Nursing Home Care	£0.825	£0.041
Supplementation	£1.007	£0.176
Day Care	£0.409	
Domiciliary Care	£0.100	£0.105
Advocacy	£0.050	
Total	£2.391	£0.322

- 3.4 Non recurring resource transfer monies amounting to £1.336 million were disaggregated from Lanarkshire Health Board for use in funding services for people with learning disabilities and older people. These monies can be used for non recurring purposes to facilitate the implementation of joint care strategies for these client groups.

### 4. RESOURCE TRANSFER CONCLUDED BY NORTH LANARKSHIRE COUNCIL

- 4.1 A resource transfer of £262,000 has been agreed with Lanarkshire Health Board being the balance of monies due in respect of 19 discharges and consequent bed closures at Hartwood Hospital (mental health) up to 31st March 1996.

- 4.2 The resources transferred covers both the direct care costs of those individuals discharged from hospital, and the creation of community based services designed to prevent future hospital admission. Key elements of this include extended Community Mental Health teams, independent advocacy, out of hours services, enhanced day services and improved support to carers of people with mental health problems.

## 5. RESOURCE TRANSFERS UNDER NEGOTIATION

- 5.1 Further resource transfer is being negotiated with Lanarkshire Health Board in relation to the on-going discharge of people with mental illness from Hartwood Hospital, and people with learning disability from Birkwood and Kirklands Hospitals.
- 5.2 It is estimated that the annual recurring value of sums transferred from Lanarkshire Health Board for 1996/7 will be in the region of £218,000 (mental health) and £192,000 (learning disability). The actual amounts will be determined by the numbers and timing of discharges achieved during the year.
- 5.3 In addition, members are asked to note that negotiations with Lanarkshire Health Board at Head of Service level within the Social Work Department are ongoing with regard to three outstanding issues. These are:
- (i) resource transfer monies owed for closure of NHS continuing care beds since January 1995, the date of the most recent agreement;
  - (ii) unoccupied NHS continuing care beds for frail elderly. It is the view of Social Work officers that unplanned reductions in NHS provision are a significant factor in the pressure on nursing and residential home places, as reported to Committee in November 1996. Negotiations are near completion concerning the transfer of a part year sum of £67,000 for unoccupied long stay beds, with full year transfer of £270,000 for 1997/8;
  - (iii) unplanned discharges have taken place since June 1995 from NHS continuing care beds for people with mental illness, from wards which are not part of the designated discharge programme. Officers have agreed a mechanism to jointly review all such discharges, with a view to negotiating resource transfer should this be appropriate.
- 5.4 With regard to the implementation of the discharge programmes, it is proposed that the Director of Social Work should proceed with negotiations in respect of beds closed during the current financial year. It is also proposed that the Director of Social Work and the Director of Housing should review with the Health Board and Lanarkshire Healthcare NHS Trust the current discharge programmes and bring forward a joint report to Social Work and Housing Committees, in order to establish a policy framework for the future implementation of hospital discharge programmes in North Lanarkshire.
- 5.5 The position in Greater Glasgow for 1996/7 is not yet clear because of the complexities surrounding the management of the discharge programmes and their disaggregation between six authorities. This will be the subject of a report to a future Committee.

## 6. RECOMMENDATION

Committee is asked to:

- (i) note the sums of resource transfer disaggregated to North Lanarkshire from Lanarkshire and Greater Glasgow Health Boards;
- (ii) note the sum of resource transfer agreed by the Department and Lanarkshire Health Board in respect of mental health for the current year;
- (iii) note that the Director of Social Work is taking action to secure resource transfer in respect of underoccupancy and unplanned discharges from NHS continuing care beds as outlined in paragraph 5.3 of this report;
- (iv) agree that the Director of Social Work and the Director of Housing should bring forward a joint report on future implementation of hospital discharge programmes in North Lanarkshire, for consideration by Housing and Social Work Committees and;
- (v) otherwise note the terms of this report.



**J Dickie**  
**Director of Social Work**  
**January 1997**

*For further information on this report please contact , Duncan Mackay, Principal Officer (Planning & Development ) (TEL: 01698 332067 )*