

Humber and North Yorkshire Integrated Care Board (ICB) & Focus independent adult social care (Focus)

INDIVIDUAL COMMISSIONING, APPROVAL & ADVICE PANEL

Terms of Reference v 14

Aim

The Individual Commissioning Approval and Advice Panel (ICAAP) is established to provide robust/defensible internal assurance between the **Humber & North Yorkshire Integrated Care Board (ICB)** and **Focus independent adult social work (Focus)** in regard of the quality, cost effectiveness and efficiency of individual packages of care, micro-commissioned within North East Lincolnshire.

Definition

Packages of care are presented to ICAAP for approval to ensure they are safe, cost effective and efficient, offering an appropriate balance between outcomes and best value.

The panel will operate within a set of public law principles and will ensure the following tenets are reflected in commissioned arrangements:

- Personalisation
- Ethical and Pragmatic decision making (see policy)
- Equality of access
- Diversity
- Management of risk and demand
- High quality
- Safe and sustainable
- Fairness
- Valuing care work principles within North East Lincolnshire
- Transparency of decision making

Remit and responsibility

The panel will:

1. Review decisions (for the purpose of future learning and to test consistency) when packages of care are approved that exceed the standard contractual rates.
2. Review decisions (for the purpose of future learning, to test consistency and ensure compliance with standing financial instructions/standing orders) when packages of care are approved that exceed the delegated level of authority.
3. Provide formal approval of all resource requests for Personal Health Budgets outside budget authorization limits for CHC, currently anything above £1400.00 per week and in keeping with the ICB's Scheme of Delegation.



4. Provide formal approval of all resource requests (focus) over £300.00 per week or above the individual's personal budget.
 - a) Responsibility to monitor transitions and ensure the appropriate level of funding is in place.
 - b) Consideration for joint health and social care packages is being considered by practitioners for complex individuals.
5. Provide formal approval for all residential placements for individuals aged 18 - 64 years (focus)
6. Approve all Out of Area placements (focus) and benchmark the incidence of Out of Area placement with other commissioners annually. Receive reports from the Out of Area Advanced Social Work Practitioner (ASWP) regarding activity.
7. Acknowledge and monitor all acute beds placed out of area for older people/mental health.
8. Monitor the Learning Disability Transforming care "Dynamic Risk Register" within the quarterly monitoring meetings and to include the Learning Disability/Mental Health commissioning lead from the ICB.
9. Make decisions on individual cases where the level or nature of risk to the individual, carers or providers is such that both adult health and health practitioners are unsure about whether to approve a plan which falls outside of any scheme of delegation.
10. Take assurance from the NHS Continuing Health Care (CHC) team that the ICB and focus are compliant with consistent interpretation and implementation of the National Framework for NHS CHC and other related/associated policies and guidance.
11. Approve all requests for Residential detox beds presented by the council following the agreed flowchart approval route.
12. Acknowledge and monitor all residential short stay beds for older people mental health made out of hours by Navigo.
13. Have authority to direct action in the event of being made aware that commissioned services could pose a risk to individuals or representative.
14. Consider 'ordinary residence' disputes in accordance with Association of Directors of Adult Social Services (ADASS) protocol, Care Act statutory Guidance, responsible commissioner and the local area policy.
15. Monitor the application of the following:
 - a) *Compliance with the principles of the MCA and consideration for DoLS referral.*
16. Produce reports as requested to the Quality Governance Committee.
17. Highlight any thematic concerns/risks in relation to the effective use of dementia beds, specialist provision, Goole neuro rehabilitation beds, market shape etc. to the contract management meeting/ Humber care contracting committee (HCCC)
18. Through the chair, the panel will escalate any concerns to Director of Adult Social Services and Chief Executive ICB.
19. Act as the final decision maker in disputes between health and social care that cannot be resolved at lower levels of resolution, as described in the local resolution policy.
20. Make decisions regarding Personal Assistant redundancy requests, if funding is needed from the public purse.
21. All service users have a right to appeal against the panel's charging decisions, via the Appeals Panel.
22. Consider and record Warning Markers brought to the panel's attention and, where appropriate, ask workers to record a warning on SystemOne.



23. Panel will advise and support if the ICB and Local Authority are working to Pandemic situations. In this scenario panel will advise and support workers to ensure the processes in place meet any changes to government guidelines.

Membership

The panel members are appointed by the ICB and focus and represent on behalf of North East Lincolnshire Council.

The membership shall consist of:

- A chairperson (focus) with delegated authority to lead the panel on behalf of the ICB/focus or a deputy in his/her absence.
- The commissioning lead for NHS Continuing Healthcare.
- A Navigo representative.

If the designated chair is not available a permanent member of the membership will chair the meeting – deputies should not be chairing over permanent members.

All panel members will appoint a deputy when needed however it is expected that all members attend meetings.

The panel will co-opt attendance as required to transact business and other professionals will be required to sit on panel according to case requirements.

Case managers attending the panel to present information will have a role to play in making decisions relating to the case in question. Case managers attending the meeting are expected to be fully prepared to present the case and answer questions from panel members.

The panel will be provided with administrative support from focus.

Frequency of meetings etc.

The panel will normally meet weekly on Tuesday afternoons (excluding special dates). Before a booking is processed, the worker needs to follow the procedure, which is on focus' portal and has been shared with Navigo. Individual Commissioning, Approval & Advice Panel (ICAAP) Questionnaire and e-workflow must be completed before the request will be processed.

Meetings are not held in public and notes are recorded on the individual care record held on SystemOne.

NAVIGO have a pre-set to complete for all requests which must be completed and e-mailed to focus.mb-focus-icaapanel@nhs.net for an appointment.

The panel will verbally confirm the decision on each submission at the meeting and record that decision in the Questionnaire in SystemOne.

URGENT (virtual) decisions by budget holders can be made outside of the meeting where failure to take a decision would be detrimental to the patient/service user. It is the responsibility of the budget holder to report that decision to the panel administrator via e-mail focus.mb-focus-icaapanel@nhs.net for the formal record.

The following flowcharts have been agreed to be followed for the approval of:



Residential Detox Beds.

Section 17 Leave process – we agree the funding to come from the S17 leave funding prior to the community DOL application for people 65+ and the Commissioning Lead for the ICB is informed.

Recording of decisions

All decisions made at ICAAP will be made upon the evidence provided by the person/s presenting the case. The ICAAP administrator will document all decisions, circulating to ICAAP chair for agreement before saving on client's records. The person/s presenting the case are responsible for providing feedback to those the decision involves.

Reporting

The panel will formally report to the Clinical Commissioning Committee /ICB.

Business Conduct

- All meetings will start and end on time.
- All professionals attending panel are expected to attend the meeting and be fully prepared.
- Mobile phones should be placed on silent during the meeting unless members or case presenters are on call.
- In the event of disagreement within the meeting, the chair will consider whether he/she needs any additional advice before making the decision.

Review

In accordance with good practice these terms of reference should be reviewed at least every two years.

December 2023

Version 14

Next review due December 2024.

