

NHS Management Executive

To: District General Managers
Regional General Managers
SHA General Managers
NHS Trust Chief Executives
FHSA General Managers

Department of Health
Richmond House
79 Whitehall
London SW1A 2NS
Telephone 071-210 3000

EL(91)122
3 October 1991

Dear Colleague,

**NHS and local authority collaboration:
provision of NHS services to local authorities and of health-
related social work services to the NHS**

1. The implementation of the NHS Reforms in April 1991 does not affect the collaboration arrangements whereby NHS services are provided to Local Authorities and local authority social work services are provided to the NHS without charge. The attached note sets out the current position. It has also been sent to LAs under cover of LAC(91)14.

2. District health authorities (DHAs) should ensure that:

- a DHA's contracts with provider units reflect the DHA's responsibility for securing health service support for the LAs in their area. In the first instance, purchasers will determine the level and type of provision to LAs, following discussion with the LAs; detailed day-to-day arrangements will probably need to be discussed directly between the relevant LAs and provider units;
- as both NHS purchasers and providers have an interest in the level of health-related social work services provided (although the service is based around provider units and their total needs), both purchasers and providers discuss with the relevant LA(s) the level and type of social work support to be provided to the NHS.

Arrangements will, of course, vary according to what best suits local needs. What is important is that services provided under these arrangements should be discussed between the interested parties, particularly when changes are proposed.

3. Enquiries about the contents of this letter should be sent to Carol Welch, Room 217 Wellington House, 133-135 Waterloo Road, London SE1 8UG (Tel: 071-972 4095).

Yours sincerely,



Andrew Foster
Deputy Chief Executive

This letter will be cancelled on 31 October 1993

**NHS and local authority collaboration:
provision of NHS services to local authorities and of health-related social work services to the NHS**

Introduction

1. The implementation of the NHS Reforms in April 1991 has led to uncertainty about the provision of NHS services to local authorities (LAs) and of health-related social work (HRSW) services to the NHS. This note clarifies the position.

Background

2. As Circular HRC(74)19 (copy of Appendix A attached) says, under the 1974 collaboration arrangements, LAs are required to bear the cost of the services of social workers provided to the NHS and health authorities are required to bear the cost of the services of medical, dental, nursing and auxiliary health staff provided to LA personal social services, environmental health, health education, port health and certain education services. The using authority is expected to pay accommodation and other support costs. Even where there is no statutory duty, it is expected that LAs and district health authorities should secure necessary services free of charge.

Current position

3. The implementation of the NHS and Community Care Act 1990 and the Children Act 1989 (to be implemented on 14 October of this year) have not affected the principles underlying the 1974 arrangements. DHAs are still responsible for ensuring health service support is provided to LAs, including payment for general medical services provided to LAs, and their contracts with provider units should reflect this. LAs are still responsible for providing social work support to the NHS, including NHS Trusts. No changes to the services provided should be made without prior consultation.

4. The level of provision of health service support and of health-related social workers (HRSWs) by LAs should be discussed between LAs and the relevant DHAs in the context of Community Care Plans, and in discussion on plans for services for children, eg in relation to child protection and services for children with disabilities. In addition, LAs will need to discuss arrangements for the provision of health services and of HRSWs with NHS provider units.

5. The Children Act 1989 emphasises the need for collaboration by specifically requiring DHAs, Special Health Authorities and NHS Trusts to comply with requests for help from LAs in the exercise of their functions under Part III of the Act (local authority support for children and families).

Funding and provision of HRSWs by the NHS

6. LAs continue to be responsible for the provision of HRSWs under current arrangements. However, we are aware that in some places NHS provider units are funding, and sometimes also providing, one or more HRSWs, in addition to the HRSWs funded and provided by the LA. There is no reason why provider units should not fund an additional post(s) where they consider it improves the service they can provide for their patients. Where this occurs, this could best be done through the LA.

7. Department of Health is currently discussing with the local authority associations the scope for national advice which would address the issue of providing a more equitable alignment of the cost of providing HRSW services in relation to the patients receiving those services.

**WORKING PARTY ON COLLABORATION: SUMMARY OF RECOMMENDATIONS
RELATING TO FINANCE**

1. The Working Party endorsed the following recommendations of the Finance Sub-Committee:-
 - 1.1 Local authorities should be required to bear the cost of the services of social workers provided to health authorities in pursuance of a statutory duty to make such services available to the National Health Service.
 - 1.2 Health authorities should be required to bear the cost of the services of medical, dental, nursing and auxiliary health staff engaged in activity appropriate to their professions provided to the local authority personal social services, environmental health, health education, port health and certain education services in pursuance of a statutory duty to make such services available.
 - 1.3 Health authorities should share equally with the local authorities concerned the costs of any additional staff required to service joint consultative committees, their sub-committees and the parallel groups of officers; incidental administrative expenses; and the cost of any special activities. Local authorities jointly represented on a joint consultative committee might apportion their half share between them by mutual agreement.
 - 1.4 The using authority should normally be required to pay for all other goods, plant, accommodation, services etc supplied by the providing authority.
2. The Working Party also recommended that, even where there is no statutory duty to provide a particular service, neither a health nor a local authority should be prevented by the absence of such a duty from providing free of charge the appropriate professional services in support of the other authority.