# AGENDA ITEM

# REPORT TO HEALTH AND WELLBEING BOARD

### 29 OCTOBER 2014

REPORT OF CORPORATE DIRECTOR OF CHILDREN, EDUCATION AND SOCIAL CARE

## Funding Transfer from NHS England to Social Care 2014/15: Stockton-On-Tees

#### SUMMARY

#### RECOMMENDATION

- 1. It is recommended that the Health and Wellbeing Board approves the plan for use of the social care funding, as detailed in Appendix 1 which is in line with the 2013/14 plan. It is a requirement of the funding transfer that plans are jointly agreed between Local Authorities and Clinical Commissioning Groups and approved by Health & Wellbeing Boards.
- 2. The planned use of the funding for Stockton on Tees meets the requirement for investment in adult social care services that demonstrates health benefits. A draft s256 agreement has been drawn up and sets out the legal basis for the transfer and the monitoring arrangements that will be established.

#### DETAIL

- For the 2014/15 financial year, the NHS will transfer £1,100 million from its global allocation to local authorities. The amounts to be paid to individual local authorities are based on the adult social care relative needs formulae. £200million of this total is the first part of the Better Care Fund, intended to help local authorities and Clinical Commissioning Groups prepare for the implementation of the full Better Care Fund pooled budget in 2015/16.
- 2. The total value of the fund to Stockton-On-Tees is £3,874,010 for 2014/15. The allocation includes the integration payment relating to Better Care Fund, with the remaining main allocation in line with the 2013/14 allocation. This was confirmed in the NHS Commissioning Board (Payments to Local Authorities) Directions 2014, published in April 2014:

https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/30 0805/FINAL\_Directions\_to\_NHSE\_on\_s256\_payments\_2014.pdf

3. The Directions make it a condition of the transfer that the Local Authority must agree with its partner Clinical Commissioning Group, a plan for establishing and maintaining a Better Care Fund pooled budget in the financial year 2015/16 and that the integration must be used for purposes related to preparing for implementation.

- 4. The remaining funding will be subject to the same arrangements as the Section 256 transfer was in 2013/14 and can be summarised as follows:
- 5. The funding must be used to support adult social care services in each Local Authority, which also has a health benefit. However, beyond this broad condition, the Department of Health wants to provide flexibility for local areas to determine how this investment in social care services is best used.
- 6. The Directions make it a condition of the transfer that the Local Authority agrees with its local health partners how the funding is best used within social care, and the outcomes expected from this investment. Health and Wellbeing boards have been identified as the natural place for discussions between the Local Area Team, Clinical Commissioning Groups and local authorities on how the funding should be spent, as part of their wider discussions on the use of their total health and care resources.
- 7. In line with responsibilities under the Health and Social Care Act, a condition of the transfer is that local authorities and CCGs have regard to the Joint Strategic Needs Assessment for their local population, and existing commissioning plans for both health and social care, in how the funding is used. It also make it a condition of the transfer that local authorities demonstrate how the funding transfer will make a positive difference to social care services, and outcomes for service users, compared to service plans in the absence of the funding transfer.
- 8. The funding can be used to support existing services or transformation programmes, where such services or programmes are of benefit to the wider health and care system, provide good outcomes for service users, and would be reduced due to budget pressures in local authorities without this investment. New services or transformation programmes, again where joint benefit with the health system and positive outcomes for service users have been identified, can also be supported.
- 9. The Caring for Our Future White Paper also sets out that the transfer of funding can be used to cover the small revenue costs to local authorities of the White Paper commitments. NHS England should have regard to this when reaching agreements with local authorities.
- 10. On this basis, it is proposed that the additional funding for 2014/15 is used to maintain services that support people to remain independent in the community (including extra care, respite, domiciliary care and personal budgets) where the Local Authority currently has budget pressures and would be required to cut services without this investment.
- 11. The proposals for use of the funding meet the requirement for investment in adult social care that provides health benefits and will make a positive difference to social care services and outcomes for people using the services.
- 12. The plan for use of the funding for 2014/15 is attached at Appendix 1.
- 13. A draft S256 agreement has been prepared by NHS England's Durham, Darlington & Tees Area Team and will be finalised and signed by the Area Team and the Local Authority following approval of the plan.

#### FINANCIAL IMPLICATIONS

The funding amount for Stockton for 2014/15 is £3,874,010.

The integration funding is included within the Better Care Fund Planning Template (Part 2) which was approved at the Health & Well Being Board on 28<sup>th</sup> August 2014 (£843,000).

The remaining allocation will be used to maintain some existing social care services that are at risk due to budget reductions to the Local Authority. The areas identified for additional investment will enable positive health and social care outcomes to be achieved for people receiving care and support from the Local Authority.

#### LEGAL IMPLICATIONS

Not applicable.

#### **RISK ASSESSMENT**

Not applicable.

#### CONSULTATION

The development of the plan for use of the social care funding has involved joint working between the Local Authority and the CCG.

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