



London Borough of Hammersmith & Fulham

HEALTH & WELLBEING BOARD

9 September 2013

TITLE OF REPORT NHS Funding to Support Social Care Services 2013-14

Report of the Corporate Director

Open Report

Classification:

Key Decision: No

The Board is asked approve the proposals for the use of NHS Funding for Adult Social Care set out in the attached memorandum and schedule.

Wards Affected: All

Accountable Executive Director:

Sue Redmond, Interim Executive Director for Adult Social Care

Report Author:

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NHS Funding to Support Social Care Services 2013-14

As in previous years, the Department of Health has made available funding in 2013-14 for the NHS to transfer to Local Authorities for social care services. This year the funding agreement will be with NHS England, taking on the responsibility previously undertaken by the Primary Care Trusts.¹

1. Functions and activities in respect of which payment must be made

The payments must be used to support adult social care services which also have a health benefit. However, the Department has indicated that there is flexibility for local areas to determine how the investment in social care services is best used.

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, or would be reduced due to budget pressures in local authorities without this investment.

Local authorities have to agree with their local clinical commissioning groups how the funding is best used within social care, and the outcomes expected from this investment. Authorities should have regard to the Joint Strategic Needs Assessment and local commissioning plans for both health and social care.

It is expected that the plans will be discussed and agreed at the Health and Wellbeing Board.

2. Financial Position of Adult Social Care

As a result of reductions in local government funding Adult Social Care (ASC) has to deliver substantial savings in 2013/14 (£4.4m LBHF; £2.1m RBKC; £2.9m WCC). These are very large savings which are much bigger than any other savings programme delivered in the local authorities in the past.

Amongst big reductions to back office and support functions, the savings programmes also include reductions in the use of packages and placements, the greatest area of spend for ASC. Some of the savings projects may be difficult to deliver or may take longer than anticipated.

ASC is required to fund its own growth – where a budget must be increased to fund a pressure, then savings must be found within ASC to balance that. This growth requirement is therefore included in the savings target.

Funding growth for packages and placements arises mainly in the Learning Disabilities, Mental Health and the Young Disabled care groups where client numbers are growing, but also in Older People, as people live longer and are supported in the community.

¹ The NHS Commissioning Board (Payments to Local Authorities) Directions 2013

2. Adult Social Care Strategic Outcomes

Tri-borough Adult Social Care is working towards delivery of the following strategic outcomes, reflecting local needs, national and local policy priorities.

Outcome 1	Maximising self-reliance, personal responsibility and enabling more people to find their own care solutions
Outcome 2	Providing people with the right help at the right time to facilitate recovery and regain independence
Outcome 3	Enabling people with long term conditions, to receive care closer to home, stay independent and live the lives they choose
Outcome 4	Balancing risk effectively between empowering and safeguarding individuals
Outcome 5	Enabling people with disabilities to be active citizens and enjoy independent lives
Outcome 6	Ensuring carers are identified and have their needs met within their caring role
Outcome 7	Enabling people to have a positive experience of social care services
Outcome 8	Achieving greater productivity and value for money

Tri-borough Adult Social Care has established a programme of work to deliver against these outcomes, including:

- Implementing personalisation
- Developing high quality care at home
- Alignment of adult social care
- Integration with community health services
- Participation in whole systems development.

The NHS funding for adult social care will support the implementation of this programme of work.

4. Proposals for the Use of the Funding

As already agreed with the Clinical Commissioning Groups, it is proposed that the funding will be used to sustain and develop Adult Social Care in the three boroughs, thereby supporting the discharge of patients from hospital, and contributing to the prevention of hospital admissions through enhanced out of hospital care.

The funding will be used for three main purposes:

- To sustain services, otherwise at risk from savings plans
- To support transformation of services, leading to increased efficiency and higher quality
- To meet growth pressures arising from increased out of hospital care

5. Recommendation

The Health and Wellbeing Board is invited to approved the proposals for the use of NHS Funding for Adult Social Care set out in the attached memorandum and schedule.

**Memorandum of Agreement
For a Section 256 Grant
Under the National Health Service Act 2006
From NHS England to London Borough of Hammersmith and Fulham
For Social Care Services to Benefit Health
Covering the period 1st April 2013 to 31st March 2014**

1. CONTEXT

- 1.1 This document records the agreement of a revenue grant from NHS England using its powers under Section 256 of the National Health Service Act 2006 to the London Borough of Hammersmith and Fulham (local authority) to provide health funding to support social care.

2. PARTIES TO THE AGREEMENT

- 2.1 The parties to this agreement are NHS England, the body paying the Section 256 grant, and the London Borough of Hammersmith and Fulham local authority, the recipient of the Section 256 grant.
- 2.2 The schedule of services set out in the Annex attached has been agreed with the Hammersmith and Fulham Clinical Commissioning Group.
- 2.3 The London Borough of Hammersmith and Fulham local authority will ensure that the services funded via the Section 256 grant are provided.
- 2.4 The London Borough of Hammersmith and Fulham local authority will assume the ultimate responsibility for monitoring service provision and client welfare. Since the express intention is for both the NHS England and the local authority to jointly monitor the provision of services, the London Borough of Hammersmith and Fulham local authority undertakes to share this monitoring information in accordance with the monitoring standards contained within this document.

3. PAYMENT TERMS

- 3.1 A revenue budget is attached and specifies £3,287,039 for Health Funding to Support Social Care as the revenue grant from Hammersmith and Fulham Clinical Commissioning Group to the London Borough of Hammersmith and Fulham for the period starting 1st April 2013 and ending 31st March 2014.
- 3.2 Once both parties sign this Memorandum of Agreement, NHS England will pay London Borough of Hammersmith and Fulham the full amount.

4. DURATION OF THE AGREEMENT

- 4.1 The agreement shall be effective from 1st April 2013 until 31st March 2014.

5. STANDARDS FOR MONITORING GRANT

- 5.1 The London Borough of Hammersmith and Fulham (LA) will ensure that funding is spent on the items agreed in the attached schedule.
- 5.2 The London Borough of Hammersmith and Fulham (LA) will provide NHS England with an annual audited voucher for each financial year to verify actual costs incurred under the Section 256 agreement. This will be presented in the following financial year, in draft form by July and signed by September.
- 5.3 Increased costs or any other changes to the Section 256 agreement will not be approved without written consent from Hammersmith and Fulham CCG.

6. STANDARDS FOR MONITORING CARE

- 6.1 Where appropriate Service Level Agreements stating financial arrangements including S256 grants and expectations required by the London Borough of Hammersmith and Fulham (LA) with regards to monitoring of standards will be presented to NHS England as part of the report on expenditure.

7. REVIEW OF GRANT EXPENDITURE

- 7.1 There are quarterly meetings between the commissioners from Hammersmith and Fulham CCG and the London Borough of Hammersmith and Fulham LA held in January, April, July and November. This scheduling is to enable a report to be submitted as part of a summary report to each quarterly meeting of the Joint Finance Partnership Group, which meets in February, May, September and December. *[not sure how NHSE will want this to take place]*
- 7.2 Both the London Borough of Hammersmith and Fulham (LA) and NHS England reserve the right to call meetings over and above the regular quarterly meetings to discuss particular issues.

8. AUTHORISATION

BETWEEN: NHS England
and the London Borough of Hammersmith and Fulham local authority
RE: Health Funding for Social Care
FROM: 1st April 2013
TO: 31st March 2014
AGREED FUNDING: Health Funding for Social Care £3,287,039

FOR: NHS ENGLAND

Signature

Date

Name (Capitals)

Designation (Capitals)

FOR: LONDON BOROUGH OF HAMMERSMITH AND FULAHM LOCAL AUTHORITY

Signature

Date

Name (Capitals)

Designation (Capitals)

Funding Transfer from NHS England to the London Borough of Hammersmith and Fulham

Funding Schedule 2013-14

Preamble

The funding will all be used for Adult Social Care in LBHF, and thus will support both the discharge of patients from hospital, and will contribute to the prevention of hospital admissions.

ASC is subject to growth pressures, and has to fund these by reducing other areas of spend.

ASC already has in place an objective to reduce its spend on packages and placements. This funding will enable those reductions to be implemented at a more measured pace.

Some of the savings projects in ASC are risky to deliver or may take longer than expected. These include extending supported housing, reducing grants to the third sector, and reducing commissioning and procurement posts. It is proposed to use the funding to introduce these initiatives in a more measured way, to avoid the adverse consequences of pushing these changes through very quickly, or having to make unplanned emergency reductions in-year.

Proposals	2013-14	Comments
Maintaining Eligibility Criteria:- Growth for more home packages and placements to meet demand arising from demographic change and shifting settings of care	£1,945,000	Avoids Adult Social Care having to make even larger savings to fund the growth pressures
Other Preventative Services Preventative Strategy	£426,093	Enabling efficiencies in the supported housing market
Mental Health Services	£593,000	Enabling efficiencies arising from the West London Framework agreement
Early Supported Hospital Discharge Schemes	£73,000	
Other Social Care:- a) Joint Commissioning Team Salaries b) Commissioning and Procurement Efficiencies	£200,000 £50,000	a) Contribution towards Tri-Borough team b) Avoids the necessity to re-organise twice
Unallocated	0	
Total	£3,287,093	