

REPORT TO: Health & Wellbeing Board
DATE: 5th July 2017
REPORTING OFFICER: Director Adult Social Services
PORTFOLIO: Health & Wellbeing
SUBJECT: Adult Social Care Additional Funding
WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To inform Health & Wellbeing Board of the allocation of additional funding for Adult Social Care.

2.0 RECOMMENDATION: That the contents of the report be noted.

3.0 SUPPORTING INFORMATION

3.1 In the spring budget the chancellor announced an additional £2 billion of new funding for councils in England over the next three years to spend on adult social care services. This will be broken down as £1 billion to be provided in 2017-18 with £674m in 2018-19 and £337m in 2019-20.

3.2 This has been recognised by the Directors of Adult Social Services as an important step towards closing the gap in Government funding for Adult Social Care, whilst we are waiting for the Green paper on future sustainability of the sector.

3.3 This additional funding is to be spent on adult social care and used for the purposes of meeting adult social care needs, reducing the pressures on the NHS- including supporting more people to be discharged from hospital when they are ready- and stabilising the social care provider market.

3.4 A small number of grant conditions have been applied, to ensure that the money is spent on adult social care services and supports improved performance at the health and social care interface.

3.5 The grant will be pooled into the Better Care Fund pooled budget, once agreement has been reached at the HWBB we will be in a position to allocate and spend funding immediately.

3.6 There is an expectation that allocation of this funding will result in a reduction in Delayed Transfers Of Care, a series of metrics will be developed by the DH and DCLG to assess improvements in patient flow

across the NHS and social care interface.

3.7 From May 2017, CQC will be undertaking targeted reviews in a small number of areas, for those areas identified as having the greatest challenge, to ensure rapid improvement.

3.8 Local Authorities and CCGs have a joint responsibility to implement each of the best practices set out in the High Impact Change Model for reducing delayed transfers of care, including agreements on the implementation of a trusted assessor model. However, it is clear in the guidance that councils are best placed to determine what is needed to maintain a diverse and sustainable market locally and ensure the funding reaches the social care frontline swiftly.

3.9 “Distinctive, Valued and personal” – Why Social Care matters: The next five years, has recently been published by the Association of Directors of Adult social Services. This document highlights the vision for adult services and how future funding should be directed to ensure the system is sustainable and supports individuals with care and support needs in the right place at the right time.

3.10 A number of pressure have been identified within our local system, as a direct result of reductions in available funding, including:

- Ability to manage increases in demand
- Domiciliary Care capacity and model of provision
- Care Homes- sustainability/risks from closures/model of provision
- Transfers of care from hospital- speed and availability of care
- Capacity and availability of Reablement packages.

4.0 **RECOMMENDATIONS:**

		Funding 2017-18	Outcomes
1	Reablement first approach on discharge from hospital- this should be an invest to save by reducing the reliance and availability of long term domiciliary care	£600k	*Improvement in a person’s independence and quality of life *Reduction in the number of people delayed in hospital
2	Invest in transforming domiciliary care project	£400k	*Improvement in a person’s independence and quality of life

			*Reduction in the number of people delayed in hospital
3	Development of improved technology offer/telecare/proactive response	£600k	*Improvement in a person's independence and quality of life
4	Further development of preventative options, including SLL	£400k	*Improvement in a person's independence and quality of life
5	Develop a social care trusted assessor model	£50k	*Improvement on delayed transfers of care
6	Improve information provision within the hospital to support discharge choices/pathways	£50k	*Improved discharge pathways
7	Work with care home providers to develop an alternative commissioning/delivery model	£900k	* Training package developed and delivered * Framework for care- linked to staffing levels developed and delivered * develop a sector led improvement model

5.0 POLICY IMPLICATIONS

5.1 None identified.

6.0 FINANCIAL IMPLICATIONS

6.1 Additional funding- 2017/18 £2,974,314, which will reduce incrementally over the following 2 years, 2018/19 £1,827,114, 2019/20 £904,208, at which time we should receive the green paper on the future sustainability of the sector.

6.2 Due to the short term nature of this additional funding, a review of the outcomes and financial impact achieved will be completed at the end of year one and recommendations considered for years 2 and 3.

6.3 Section 151 officers will be required to complete returns to the DH in relation to the allocation of the grant.

7.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

7.1 **Children & Young People in Halton**

None identified.

7.2 **Employment, Learning & Skills in Halton**

None identified.

7.3 **A Healthy Halton**

All issues outlined in this report focus directly on this priority.

7.4 **A Safer Halton**

None identified.

7.5 **Halton's Urban Renewal**

None identified.

8.0 **RISK ANALYSIS**

8.1 The recommendations for allocation of available funding has been considered, in light of the eight high impact changes, ADASS vision for future provision and our local areas of challenge; to ensure the biggest impacts and future sustainability of services.

8.2 An invest to save approach will be implemented to manage the risks in relation to non- recurrent funding.

8.3 Opportunities for collaborative working across the Liverpool City Region will be considered within the recommended projects.

9.0 **EQUALITY AND DIVERSITY ISSUES**

9.1 None identified.

10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None