REPORT TO: Health & Wellbeing Board

DATE: 4th July 2018

REPORTING OFFICER: Director of Adult Social Services

PORTFOLIO: Health and Wellbeing

SUBJECT: Adult Social Care Funding – Improved Better Care Fund (iBCF)

Allocation 2018/19

WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

- 1.1 To inform the Health & Wellbeing Board of the iBCF allocation for Adult Social Care in 2018/19
- 2.0 RECOMMENDATION: That the Board note the contents of the report and support the allocations outlined.
- 3.0 **SUPPORTING INFORMATION**
- 3.1 In the 2017 Spring budget, the Chancellor announced an additional £2 billion of new funding for councils in England over three years to spend on adult social care services. This additional funding was broken down as follows:-
 - £1 billion to be provided in 2017-18;
 - £674m in 2018-19; and
 - £337m in 2019-20.
- 3.2 As previously outlined in the report to the Board in July 2017, this was 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, which, at the time of writing this report, is due to be published Summer 2018
- 3.3 As a reminder for the Board, 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; specifically the funding is to be spent on schemes in three areas, as follows:-
 - 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 number of pressures 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;
- Care Homes sustainability/risks from closures/model of provision;
- Transfers of care from hospital speed and availability of care; and
- Capacity and availability of Reablement packages.

3.5 Proposed Allocations

It should be noted that many of the schemes outlined below commenced in 2017/18 and work on them will be continuing into 2018/19.

	Scheme	Funding 2018-19	Outcomes
1	Reablement First approach on discharge from hospital	£353k	*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	£295k	*Improvement in a person's independence and quality of life
			*Reduction in the number of people delayed in hospital
3	Improved Technology/Telecare Proactive Response	£150k	*Improvement in a person's independence and quality of life
4	Further Development of Preventative Options	£106k	*Improvement in a person's independence and quality of life
5	Care Homes - Work providers to develop an alternative commissioning/delivery model	£527k	* Training package developed and delivered * Framework for care- linked to staffing levels developed and delivered * Develop a sector led improvement model
6	Intermediate Care Bed Capacity	£250k	*Improvement in a person's independence and quality of life *Reduction in the number of people delayed in hospital

7	Reducing Pressure on the NHS	£146k	*Reduction in the number of people delayed in hospital. NB. The use of this allocation would focus on reducing the pressures on the NHS, including supporting more people to be discharged from hospitals when they were ready by the funding of additional packages of care and placements.

4.0 **POLICY IMPLICATIONS**

4.1 None identified.

5.0 OTHER/FINANCIAL IMPLICATIONS

- 5.1 The allocation for 2018/19 is £1,827,114 and will reduce to £904,208 in 2019/20. As highlighted earlier on in the report the Green Paper on future sustainability of the sector is due to be published in the Summer.
- 5.2 Due to the short term nature of this additional funding, the schemes are kept under review in respect to the outcome and outcomes and financial impact achieved.
- 5.3 The Council is required to complete quarterly returns to the Ministry of Housing, Communities and Government in relation to the allocation of the grant.
- 5.4 As with 2017/18's iBCF allocation, the grant will be pooled into the Better Care Pooled Budget and once agreement has been reached at the Board, we will be in a position to confirm allocations and spend funding immediately.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children & Young People in Halton None identified.

6.2 **Employment, Learning & Skills in Halton**None identified.

6.3 **A Healthy Halton**

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

6.4 A Safer Halton

None identified.

6.5 **Halton's Urban Renewal**None identified.

7.0 **RISK ANALYSIS**

- 7.1 The recommendations for allocation of available funding has been considered, in light of the eight high impact changes, ADASS vision for future provision¹ and our local areas of challenge, to ensure the biggest impact and future sustainability of services.
- 7.2 An invest to save approach continues to be undertaken to manage the risks in relation to non- recurrent funding.
- 8.0 **EQUALITY AND DIVERSITY ISSUES**
- 8.1 None identified.
- 9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972
- 9.1 None under the meaning of the Act.

¹ Distinctive, Valued and Personal: Why Social Care Matters, March 2015 https://www.adass.org.uk/distinctive-valued-personal-why-social-care-matters