

HEALTH AND WELLBEING BOARD	AGENDA ITEM: 8.1
<p>DATE OF MEETING: 3RD JUNE 2013</p> <p>REPORT AUTHOR SIMON PATTISON, Head of Adult Joint Commissioning</p> <p>& CONTACT NUMBER: 07500 918906</p> <p>SUBJECT: SECTION 256 TRANSFER FROM HEALTH TO SOCIAL CARE</p>	

WARD(S) AFFECTED: All

PURPOSE

1. To agree the transfer of funding from health to adult social care through a Section 256 agreement.

RECOMMENDATION(S)

2. The Health and Wellbeing Board is recommended to:
 - 2.1 Agree the broad outlines of the transfer of funding from the National Commissioning Board (NCB) to LBC to support adult social care and to delegate the final decision on the use of the funding to the Director of Housing, Community Living and Adult Social Care, in consultation with Luton CCG and the NCB.
 - 2.2 Support the sign off of a Section 256 legal agreement between LBC and the National Commissioning Board, if required.

BACKGROUND

3. On the 19th of December the Department of Health (DH) wrote to the National Commissioning Board (NCB) to inform them of a national transfer of funding from health to social care for 2013/14. The full letter is available at <https://www.wp.dh.gov.uk/publications/files/2012/12/Funding-transfer-from-the-NHS-to-social-care-in-2013-14.pdf> The allocation to Luton was £2,820,830. The key aspects of the letter are:
 - The funding will transfer from the National Commissioning Board to local councils, it is not part of the CCG's budget allocation.

- The funding must be used to support **adult social care services** in each local authority, which also has a health benefit.
- How the funding will be spent should be agreed by Health and Wellbeing Boards, after discussion between the NCB, local CCGs and each council.
- In making decisions on how the money is spent partners should think about the needs identified in the Joint Strategic Needs Assessment (JSNA).
- A condition of the transfer will be that local authorities demonstrate how the funding 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.
- The money can be used to support existing council 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. The money can also be used for new investment, again where this can demonstrate benefits for the health and care system.

REPORT

4. A verbal report on the main aspects of the Section 256 funding was provided to the last Health and Wellbeing Board. There have been a number of discussions between LBC and CCG to identify priority areas that could be funded from the Section 256 money. For LBC the first priority is to continue with the areas funded from the equivalent transfer from the NHS to social care in 2011/12 and 2012/13. These were:

	£
Home Care Reablement	200,000
Social Care input to falls team	50,000
Ongoing support for existing social care services	1,711,000
Total	1,961,000
Total Funding Transfer from NCB to Social Care in 2013/14	2,820,830
<i>Therefore funding not yet allocated</i>	<i>859,830</i>

5. This approach has been agreed by Luton CCG. Therefore there is just under £860,000 not yet allocated. There are three main categories this money could be spent on:
 - Reducing the level of savings required from Adult Social Care and preventing some of the changes proposed for 2013/14.
 - Continuation of schemes started on a one off basis in 2012/13.
 - Spend on new priority areas.

6. Discussions have taken place within and between LBC and LCCG to identify priority areas for this funding. A list of potential investments has been developed and is shown in the table overleaf:

Potential area for funding	Estimate of funding	Comments
<i>Continuation of Existing Schemes Funded on a One Off Basis</i>		
Permanent brokerage post to help find care homes and home care agencies to support hospital discharge and CHC placements (one post currently recruited to on a temporary basis)	30,000	Strong support from hospital discharge teams for this - would reduce pressure on them, the brokerage team already carry out this role for social care funded placements so this brings efficiencies
Step Up / Step Down Flats (mainstreaming current investment through one off winter pressures funding) - 6 flats	109,200	Support hospital discharge and will aim to reduce hospital admissions by the use of short term extra care flats as an alternative. Negotiating cost reduction in weekly rate
Additional Social Work Staff in the Integrated Hospital Discharge Team at the L&D to expedite discharges (currently funded from one off funding)	100,000	Allows weekend working on an ongoing basis for LBC hospital social work team
Joint Autism strategy priorities - ongoing funding for Autism Bedfordshire to deliver training across a range of professionals	20,000	Key priority for autism strategy
Admin Support towards the integrated GP pilot	40,000	Full year cost of part time Band 5 co-ordinator and Band 3 support post
Continuation of Alzheimer's Society pilot improving information and advice on dementia for people in BME communities	30,000	Formal evaluation of pilot awaited from Alzheimer's Society, informal feedback has been positive
<i>Potential New Schemes</i>		

Potential area for funding	Estimate of funding	Comments
Care Home monitoring and improvement work within LBC Contracts and Quality Assurance team	50,000	This would include quality monitoring of CHC contracts with nursing homes and home care providers, work to monitor and support a reduction in hospital admissions from care homes
Support to bring back Learning Disability people in independent hospitals (intensive work with the individuals and their families, developing local bespoke services around the individual and potential transition costs	50,000	Key part of Winterbourne View action plan recently agreed by CCC and CCG Board
One off piece of work to add all NHS numbers to CareFirst (social care system) - currently about 30% of people on CareFirst have an NHS number recorded on the system and better integrated working requires the NHS number as a starting point	20,000	This is a very rough estimate and depends on whether an IT solution can be found or whether we need to employ temps to manually input the data
Funding for SEPT to complete Mental Health social care reviews more quickly and to extend this responsibility to older persons' services	80,000	
Expansion of Alzheimer's Society support to the SEPT Memory Assessment Service	20,000	Links to general expansion of MAS service (key dementia priority)
Integration - IT costs to implement a system to allow shared access to electronic records across health and social care (CareFirst, SystemOne etc.)	100,000	This is a very rough estimate, more exact figure awaited from Simon Carey
Increased Occupational Therapy staff to reduce waiting list	80,000	Current waiting list is over 300, many of these will be people who have long term conditions which may be exacerbated by the delay in adaptations

Potential area for funding	Estimate of funding	Comments
Additional funding for Disabled Facility Grants and / or minor adaptations to prevent hospital admissions and reduce delays	50,000	
Project costs for the Integrated Care work up/redesign and implementing a new model	15,000	Adult Social Care contribution to Ernst and Young integration work
Joint Programme Manager to implement proposals to further integrate services between LBC and LCCG	64,000	Rough estimate of potential cost
Short Term social care beds at Collinson House to allow discharge from hospital where home care package is not in place	5,500	To cover April and May period during transition to new home care providers
Long Term Conditions Fund administered by Age Concern	10,000	Proposal from Age Concern for one off funds for complex cases that do not fit other criteria
Subtotal	873,700	
<i>Potential priorities where more information is required</i>		
Social Care End of Life work		
Social care input to integrated GP pilot		
Social care input to Early Supported Discharge for Stroke		
Work on Discharge pathways and processes to improve the working of the integrated discharge team and the response from services in the community (including housing)		
Older Person's counselling service	30,000	Social care benefits queried
Subtotal	30,000	
Total potential funding identified so far	903,700	

Next Steps

7. The funding is from the National Commissioning Board (NCB) to local authorities. Whilst engagement has been good within the local health system agreement is also required from the NCB to the final list of schemes. A number of the potential schemes require further work to finalise the funding required and so it is proposed that Health and Wellbeing Board delegate the final decision on the use of the funding to the Director of Housing, Community Living and Adult Social Care, within the broad parameters of the schemes identified above and similar proposals. This would be in conjunction with the NCB and Luton CCG.

PROGRESS AGAINST HEALTH AND WELLBEING STRATEGY PRINCIPLES:

Promoting Integration/Pooled Budgets/Joint Commissioning

8. The Section 256 funding is aimed at social care funding that also has an NHS benefit. A number of the individual projects are aimed at improving integration through joint commissioning.

IMPROVING QUALITY AND EFFICIENCY - SERVICE / PATHWAY REDESIGN

9. Individual schemes will support this objective by promoting integrated working – e.g. investment in IT systems will support pathway redesign by making it easier for staff across health and social care to share information.

ADDRESSING THE WIDER DETERMINANTS OF HEALTH

10. The schemes proposed include housing, social care and voluntary sector support.

FOCUSING ON EARLY INTERVENTION AND PREVENTION

11. A number of the schemes proposed have prevention elements.

IMPLICATIONS

12. The proposal is that the Health and Wellbeing Board agree the broad outlines of the transfer of funding from the National Commissioning Board to LBC to support adult social care and to delegate the final decision on

the use of the funding to the Director of Housing, Community Living and Adult Social Care, in consultation with Luton CCG and the NCB.

CONSULTATIONS

None.

LIST OF BACKGROUND PAPERS
LOCAL GOVERNMENT ACT 1972, SECTION 100D

None.