Title of Report: Funding Transfer from NHS England

2013-14

Report to be considered by:

Health and Well Being Board

Date of Meeting:

26th September 2013

Forward Plan Ref:

N/a

Purpose of Report: To inform the Health and Wellbeing Board of how the 2013-

14 funding transfer from the NHS is being used by West

Berkshire Council.

Recommended Action: The Health and Wellbeing Board to approve the use of the

2013/14 transferred monies.

Reason for decision to be

taken:

To allow for the planned transfer of NHS funds to the

Council to be completed.

Other options considered: None

Key background documentation:

Report 'Funding transfer from NHS to Social Care 2013/14

to 2015/16' to the HWBB meeting on 25th July 2013

The proposals contained in this report will help to achieve the following Council Strategy priority:

◯ CSP1 – Caring for and protecting the vulnerable

The proposals will also help achieve the following Council Strategy principle:

CSP5 - Putting people first

The proposals contained in this report will help to achieve the above Council Strategy priority and principle by:

Portfolio Member Details	
Name & Telephone No.:	Councillor Joe Mooney - Tel (0118) 9412649
E-mail Address:	jmooney@westberks.gov.uk
Date Portfolio Member	
agreed report:	

Contact Officer Details	
Name:	Jan Evans
Job Title:	Head of Adult Social Care
Tel. No.:	01635 519736
E-mail Address:	jevans@westberks.gov.uk

Implications

None

Policy:

Financial:

health related social care services to be maintained. Had agreement not been reached on their use then significant cuts in non-statutory areas would have had to be made within the resulting negative impact on all stakeholders.			cuts in	
Personnel:	None			
Legal/Procurement:	None			
Property:	None			
Risk Management:	None			
Corporate Board's Recommendation:	n/a.			
Is this item relevant	to equality?	Please tick relevant boxes	Yes	No
Does the policy affect and:	service users, emp	loyees or the wider community		
Is it likely to affect people with particular protected characteristics differently?				
Is it a major policy, significantly affecting how functions are delivered?				
Will the policy have a significant impact on how other organisations operate in terms of equality?				
• Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics?				
		known inequalities?		
Outcome (Where one or more 'Yes' boxes are ticked, the item is relevant to equality)			lity)	
Relevant to equality - Complete an EIA available at www.westberks.gov.uk/eia				
Not relevant to equality			X	

The NHS funding plays an essential role in enabling existing

Executive Summary

1. Introduction

- 1.1 For 2013-14 an additional £0.519m was provided to West Berkshire Council by the NHS. This increased the total NHS funding level to £1.782m in 2013/14.
- 1.2 In order to secure the release of these funds agreement needs to be reached between the Council and NHS England (via the Thames Valley Area Team and the CCGs in Berkshire West) on how they are being used. The Health and Well Being Board has been agreed as the forum for discussions and agreement between the parties.

2. Proposal

- 2.1 This report explains the financial background in which the Council is operating and how the total NHS funding has been used to support Adult Social Care.
- 2.2 Agreement has been reached between the NHS England Area Team and the Council and this report, along with the appended S256 agreement, identifies those areas of spend which have been protected as a result of this funding.

3. Conclusion

3.1 The additional NHS funding has been most welcome and has been used to protect care services at a time when total funding for councils has been significantly reduced.

1. Introduction

1.1 In 2012-13 West Berkshire Council received £1.263m of Health and Social Care Funding from the Department of Health. This was non ringfenced and, whilst not directly added to the Adult Social Care (ASC) budget, it did enable the Council to build a degree of protection into the ASC budget. This money was spent as follows:-

£150,000 - Enhancement of WBC Reablement Service

£ 20,000 – Additional night warden for crisis work

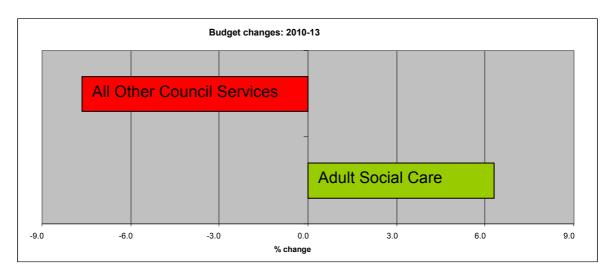
£518,000 - Increased care home bed capacity

£ 575,000 - Demography; domiciliary care

- 1.2 For 2013-14 an additional £0.519m was provided, bringing the total funding to £1.782m. Whilst this additional funding was most welcome, it does have to be seen in the context of the year on year budget reductions faced by this and other councils. Local Authorities have been subject to significant spending cuts as part of the Comprehensive Spending Review, 28% over four years.
- 1.3 Even with this additional NHS funding, in 2013-14 the Council has less money to spend on services than it had in the previous year.

2. Use of Transferred Funds in 2013-14

2.1 As evidenced by the following table, protecting the most vulnerable of our citizens remains a Council priority and therefore this additional funding from the NHS has been used to protect ASC, as far as is possible, from the full level of cuts faced by all other Council services. The additional NHS England funding in both 12-13 and 13-14 has been an important factor in allowing the Council to take this approach.



2.2 Whilst, in line with all other Council services, ASC has been required to deliver efficiency savings, 2013-14 is the first year where the net budget has reduced. In all previous years the net budget provided to ASC has been increased due to significant Council investment. The following table shows the level of investment in ASC in comparison with the total investment in all of the other Council services.

	12-13	13-14
Adult Social Care All Other Council Services	3,408,140 1,768,460	551,000 1,414,580
	5,176,600	1,965,580

- 2.3 The 2012-13 investment was required to reflect the pressures that had been building on most ASC activities. In excess of £550k of investment was made in financial year 13-14 towards the additional costs of care for young adults with learning disabilities as they transitioned from Children's Services
- 2.4 In order to ensure councils are making appropriate use of the transferred funds, NHS England has requested that the spend is classified under the categories set out in the table below. These sums have been allocated against each row on the basis of these are the likely areas where cuts have been avoided as a result of this funding. Using the transferred funds to support existing services was a recognised option for councils (further details of the services protected are provided in Section D of the attached S256 agreement).

Analysis of the adult social care funding in 2013-14 for transfer to local authorities		
Service Areas- 'Purchase of social care'	£	Subjective
		code
Community equipment and adaptations	80,000	52131015
Telecare		52131016
Integrated crisis and rapid response services	425,000	52131017
Maintaining eligibility criteria		52131018
Re-ablement services	425,000	52131019
Bed-based intermediate care services		52131020
Early supported hospital discharge schemes	275,000	52131021
Mental health services	74,000	52131022
Other preventative services	504,000	52131023
Other social care (please specify)		52131024
Total	1,783,000	_

2.5 Whilst ASC would have had no desire to make cuts in these areas it has to be recognised that with reduced overall funding and an ageing population it would be these non-statutory functions (preventative services, early hospital discharge schemes, reablement etc.) that would have had to be scaled back.

3. Transfer Process

3.1 The monies will only be passed over to the Council once the Section 256 agreement has been signed by both the Council and the NHS England Area Team. The agreement document is provided as Appendix 1 to this report and will be signed following the approval of this report by the Health and Wellbeing Board.

4. Future Years Funding

- 4.1 As detailed in the report 'Funding transfer from NHS to Social Care 2013/14 to 2015/16' that was considered by this Board at its meeting on 25th July 2013, significant changes are being made to the funding arrangements between the NHS and Local Authorities. Some additional funding (£200m nationally) will transfer in 2014/15 to assist in the preparation for a planned major transfer of funds (£3.8bn from the NHS nationally) in 2015/16. Details of the sums transferring to each council are not yet available.
- 4.2 Overseen by the Health and Well Being Board, the Council and the NHS jointly need to develop plans that cover how this funding should be best utilised within the health and social care economy. These plans must demonstrate how care and support services will be protected and how a number of new significant additional responsibilities will be met which include, but are not limited to;
 - 7-day working in health and social care, to support patients being discharged and prevent unnecessary admissions to hospital at the weekend
 - better data sharing, including universal use of the NHS number as a unique identifier
 - a joint approach to assessment and care planning
- 4.3 Further meetings between senior staff from the Council and their NHS colleagues are planned for the coming months in order to move this work forward.
- 4.4 One note of caution is that in a recent joint communication from the Local Government Association and the NHS there is reference made to this additional funding also being used to cover some of the costs associated with the Care Bill. Whilst there remains a lack of detail in major areas, the work done to model the financial impact of the Care Bill on this Council does suggest that it will result in major additional costs. The Government has previously stated that it would fully fund the costs arising from the Care Bill but we need to be cautious that the same funding is not spent more than once.

5. Conclusion and recommendations

- 5.1 The additional funding from the NHS in 2013-14 has been used to minimise the substantial cuts to Adult Social Care that would have otherwise been required. This approach has largely avoided any negative impact on service users and has allowed Adult Social Care to continue to invest in preventative services, maintain its crisis and rapid response services, continue to develop its 'Home Safe' service (early hospital discharge) and make positive changes to its re-ablement function.
- 5.2 It is recommended that the Health and Well Being Board note the contents of this report and approve the 2013/14 spend and the associated draft S256 Transfer Agreement.

Appendices

Appendix A – S256 Transfer Agreement

Consultees

Local Stakeholders: n/a

Officers Consulted: Steve Duffin - Head of Service (ASC Efficiency Programme)

Andy Walker – Head of Finance

Trade Union: Not applicable

MEMORANDUM OF AGREEMENT FOR TRANSFER OF ALLOCATION FOR SOCIAL CARE FOR 2013/14

Between

NHS England (Thames Valley) and West Berkshire District Council together referred to as "the Parties"

Giving effect to a transfer of monies from NHS England to the West Berkshire District Council pursuant to Section 256 of the NHS Act 2006.

Section A: Background and Principles

- 1. The purpose of this Memorandum of Agreement is to provide a framework within which the Parties will enable transfers of funding pursuant to Section 256 of the NHS Act 2006 and in line with the National Health Service (Conditions relating to payments by NHS Bodies to Local Authorities) Directions 2013, to enable those funds transferred to be invested by social care for the benefit of health and to improve overall health gain.
- 2. Gateway reference 00186 states that NHS England will transfer £859m from the 2013/14 mandate to local authorities.
- 3. The funding must be used to support adult social care services in each local authority, which also has a health benefit.
- 4.NHS England Thames Valley, on the recommendation of NHS Newbury and District CCG, North and West Reading CCG and the West Berkshire Health and Wellbeing Board ("through approval of s256 paper at its meeting on 26th September 2013 and is satisfied that:
 - the transfer of this funding is consistent with their Strategic Plan that it is likely to secure a more effective use of public funds than if the funds were used for solely NHS purposes, in line with the conditions relating to Section 256 payments the Act.
 - The transfer of these funds has had regard to the Joint Strategic Needs Assessment, the draft Health and Wellbeing Strategy and the commissioning plans of both the Clinical Commissioning Group and Local Authority.
 - The funding transfer will make a positive difference to social care services, and outcomes for users, compared to service plans in the absence of a funding transfer

Section B: Purpose of this Memorandum of Agreement

5. This Memorandum of Understanding gives effect to those arrangements to benefit the population of West Berkshire through the use of these monies the partners intend to secure more efficient and effective provision of services across the health and social care interface as outlined in Schedule 1.

- 6. Monies defined in Section C below will be transferred to the Local Authority under Section 256 and used in accordance with the terms of this agreement. If this subsequently changes, the memorandum must be amended and re-signed, as a variation to the original.
- 7. This Memorandum of Understanding governs the transfer, monitoring and governance arrangements for the monies and the projects associated with delivering the objectives.

Section C: Terms of Agreement – The sums of money

8. The money, which shall be transferred from NHS England to Social Care, is shown below:

	2013/14
Allocations for social care	£ 1.793

- 9. Payments will be made quarterly based on invoices issued by the Local Authority. The invoices must quote the relevant purchase order number.
- Where a payment is made under this Agreement, the Council will provide an annual voucher in the form set out in Schedule 3 to Agreement. This voucher must be authenticated and certified by the Director of Finance or responsible officer of the recipient.
- 11. Recipients must send completed vouchers to their external auditor by no later than 30th September following the end of the financial year in question and arrange for these to be certified and submitted to the paying authority by no later than 31st December of that year. A Certificate of Independent Auditor opinion is set out in Schedule 3 to the Agreement.

Section D: Terms of Agreement – The uses of money

12. Uses of this funding will be as follows and will be subject to review as part of the joint governance arrangements set out in Section E below:

Detail	Budget £s	Outcome	
Community Equipment and Adaptations	80,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer. Equipment provided enables safe hospital discharge, falls prevention and greater independence e from health and	
		social care services.	

Integrated care and rapid response services	425,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer. Service works jointly with surgeries and BHFT Intermediate Care Services to enable timely hospital discharge and the prevention of inappropriate hospital/care home admission
Reablement Services	425,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer WBC Home Care Improvement Service works with service users for up to 6 weeks, led by OTs to promote independence and a reduction of demand for health and social care community services.
Early supported discharge Schemes	275,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer. Service redesign to provide a Home Safe service supporting first 48hrs following hospital discharge, preventing DTOCs and ensuring safe, timely hospital discharge.
Mental health services	74,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer. Funding has supported placements of service users on S117 reducing DTOC at Prospect Park Hospital.
Other preventative services – (financial support to the voluntary sector and other organisations currently providing a range of preventative services)	504,000	The funding transfer will enable current service levels to be maintained. A situation that would not have been possible in the absence of a funding transfer. Carers support; range of commissioned services and individual grants to support Carers to continue caring; respite, day opportunities; education, support groups, contingency planning. Preventative services; range of commissioned services to support independence, self sufficiency and reduce

		dependency on statutory services; day opportunities, family support, home from hospital, handyman, befriending.
Total	1,792,796	

Section E: Terms of Agreement - Governance, Reporting and Monitoring

- 13. In West Berkshire District Council the Agreement shall be held by Director of Communities and appointed nominees to manage, monitor and deliver.
- 14. In NHS England the Agreement shall be held by the NHS England (Thames Valley) Director and appointed nominees to manage, monitor and deliver NHS interests.
- 15. In Newbury and District and North and West Reading CCG the appointed nominee for governance and monitoring purposes will be the CFO.
- 16. The Integrated Partnership Board shall monitor and review the programme of work monthly and ensure corrective action where required. At least one officer of the CCG shall be a member of this Board. West Berkshire Wellbeing board will receive quarterly reports on the progress of the programme of work from the Integrated Partnership Board and ensure the programme supports the delivery of the Health and Wellbeing Strategy and Joint Strategic Needs Assessment. NHS England will be represented on the West Berkshire Wellbeing Board. The Wellbeing Board will review the annual expenditure of the allocation.
- 17. Any underspend on the transfer money will be discussed by West Berkshire District council and Newbury and District and North and West Reading CCGs via the Integrated Partnership Board and agreement reached as to how the underspend should be dealt with. This may or may not include retention of the underspend with West Berkshire District Council for use on additional activity for the benefit of health or an alternative arrangement.
- 18. The Council will report expenditure plans on a monthly basis to NHS England (Thames Valley) categorised into the following service areas (Table 1) as agreed with the Department of Health.

Table 1:

Analysis of the adult social care funding in 2013-14 for transfer to local authorities

Service Areas- 'Purchase of social care'

Community equipment and adaptations
Telecare
Integrated crisis and rapid response services
Maintaining eligibility criteria
Re-ablement services
Bed-based intermediate care services
Early supported hospital discharge schemes
Mental health services
Other preventative services
Other social care (please specify)

Section F: Terms of Agreement - Renewal, Disputes, Variation and Alteration

- 19. The agreement may be altered by mutual consent by an exchange of letters.
- 20. In relation to continuation beyond 1st April 2014, such provisions as shall be directed by the Secretary of State on continuation and transferal of agreements shall apply.
- 21. Disputes shall be resolved by informal means wherever possible and thence by formal meeting of the Integrated care governance group and referral to the Health and Wellbeing Board if agreement cannot be reached.

Section G: Signatures

In respect whereof, the parties to this agreement have caused to be affixed their hands and seals.

Signature
Name
Position
Date
FOR AND ON BEHALF OF West Berkshire District Council
Signature
Name
Position
Date

FOR AND ON BEHALF NHS ENGLAND

SCHEDULE 3

Section 256 Voucher

West Berkshire District Council

PART 1 STATEMENT OF EXPENDITURE FOR THE YEAR 31 MARCH 2014 (YEAR)

(if the conditions of the payment have been varied, please explain what the changes are and why they have been made)

Scheme Reference Number Revenue Expenditure Capital Total Title of Expenditure

Project £

PART 2 STATEMENT OF COMPLIANCE WITH CONDITIONS OF TRANSFER

I certify that the above expenditure has been incurred in accordance with the conditions, including any cost variations, for each scheme approved by the NHS England and NHS Newbury and District and North and West Reading CCGs in accordance with the National Health Service (Conditions Relating to Payments by NHS Bodies to Local Authorities) Directions 2013.

Signed:	
Date:	
Directo	r of Finance
I/We ha	Certificate of independent auditor ive:
	examined the entries in this form (which replaces or amends the original submitted to me/us by the authority dated)* and the related accounts and records of the West Berkshire Council and
•	carried out such tests and obtained such evidence and explanations as I/we consider necessary.
(Except	for the matters raised in the attached qualification letter dated)* I/we have concluded that
	the entries are fairly stated: and the expenditure has been properly incurred in accordance with the relevant terms and conditions.
Signatu	re
	Data * Doloto as nocossary