

ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1	Meeting:	Health and Wellbeing Board
2	Date:	1st October 2014
3	Title:	Social Care Support Grant 2014/15
4	Directorate:	Neighbourhoods and Adult Services

5. Summary

This report provides information on the transfer to Rotherham MBC of the Social Care Support Grant. It provides details of the local allocation and sets out recommendations on how the allocation will be spent for the 2014/15 financial year. NHS England will transfer £6.166 million to Rotherham MBC. This includes an increase of £1.351m from 2013/14.

Payment of the Social Care Support Grant is to be made via an agreement under Section 256 of the 2006 NHS Act. The agreement will be administered by the NHS England Area Team (not the Rotherham Clinical Commissioning Group). Funding from NHS England will only pass over to local authorities once the Section 256 agreement has been signed by both parties.

Social Care Support Grant must be used to support adult social care services that deliver a health benefit. However, beyond this broad condition, NHS England wants to provide flexibility for local areas to determine how this investment in social care services is best used.

Guidance relating to the Social Care Support Grant requires NHS England to ensure that the local authority agrees with its local health partners on how the funding is best used. Health and Wellbeing Boards will be the forum for discussions between the Area Teams, CCGs and local authorities on how the funding should be spent. In line with their responsibilities under the Health and Social Care Act, NHS England will make it a condition of the transfer that RMBC and RCCG have regard to the Joint Strategic Needs Assessment for their local population. NHS England will also make it a condition of the transfer that RMBC demonstrate show the funding transfer will make a positive difference to service users.

From 2015/16 this grant and all services commissioned with it will be incorporated into the Better Care Fund. This fund will be overseen by a robust joint governance framework which supports achievement of the following metrics

- Reduction in emergency admissions
- Reduction in delayed transfers of care from hospital
- Proportion of older people still at home 91 days after hospital discharge into rehabilitation
- Number of readmissions to hospital within 30 days of discharge

6. Recommendations

That the Health and Wellbeing Board:

- **Agree to the programme of expenditure set out in Section 8**
- **Agree to the development of a light-touch performance framework for the grant**

7. Proposals and details

It is proposed that the Social care Support Grant be used to support existing services and transformation programmes, where such services or programmes are of benefit to the wider health and care system. The funding will support new services or transformation programmes, again where joint benefit with the health system and positive outcomes for service users have been identified.

NHS England will ensure that the CCGs and local authority take a joint report to the Health and Wellbeing Board to agree what the funding will be used for, any measurable outcomes and the agreed monitoring arrangements in each local authority area.

As part of the S256 agreement, NHS England will ensure that it has access to timely information (via Health & Wellbeing Boards) on how the funding is being used locally against the overall programme of adult social care expenditure, in order to assure itself that the conditions for each funding transfer are being met.

It is proposed that funding focuses on the following key areas.

- Additional short term residential care places, or respite and intermediate care.
- Increased capacity for home care support, investment in equipment, adaptations and telecare.
- Investment in crisis response teams and preventative services to avoid hospital admission.
- Further investment in reablement services, to help people regain their independence

8. Finance

Appendix 1 sets out the proposed spending programme for 2014/15.

9 Risks and Uncertainties

The key risks associated with the Social care Support Grant funding are;

- That the funding is subject to annual review so could reduce in future years
- Difficulties in measuring health outcomes

10. Policy and Performance Agenda Implications

There is no requirement to develop a performance framework for this funding. However national guidance does stipulate that investment should focus on health outcomes. It is proposed that the Health and Well Being Board endorse the development of a light-touch performance management framework for this grant, overseen by the Adult Partnership Board

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Appendix 1: Proposed Spending Programme – Social Care Support Grant

Social Care Grant 2014-15	£000s
Interim Care beds	100
Community based support - home care/re enablement	500
Therapy staff x 2	100
Social workers in A & E	180
Expand fast response service	220
2 SSO reviewing officers to fast track assessments during re enablement	98
Fast response Nursing team	60
Home improvement agency (HIA)	60
Provision of residential short term or respite care for older people to avoid hospital admission or speed up discharge.	115
Learning Disabilities independent sector residential care	582
EMI Day Care	100
Social Workers in GP Practices	100
Mental Health - To promote early discharge from hospital into specialist rehabilitative care to enable access to community based services.	150
PDSI -Community support including Direct Payments/ Personal Budgets	220
To provide additional home care/supported living through Direct payments/Self Directed Support.	734
Older People - Pressures on Domiciliary Care Budgets	380
Learning Disabilities - increase in demand for Direct Payments	314
Mental Health - Increased Drug and Alcohol Community based rehabilitation	59
Development of specialist supported living scheme for people with a learning disability	46
Develop community based dementia care service	100
Investment into specialist community based support for people with a learning disability	37
Further Investment into Intermediate Care	560
Transitional placements from Childrens to Adults	400
Additional demand for Direct Payments	375
Additional provision of Domiciliary/Enabling Care	376
Care Bill Preparation	200
Total Social Care Grant	6,166