

## **Wiltshire Council**

### **Health and Wellbeing Board**

**25 September 2014**

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**Subject: 2014/15 NHS Transfer Fund – Section 256 Agreement**

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#### **Purpose of Report**

1. This paper is to provide information to the Health and Wellbeing Board on the use of the 2014-15 NHS Transfer Fund, and to request that the Health and Wellbeing Board endorses the use of these funds within a Section 256 Agreement (NHS Act 2006) between Wiltshire Council and NHS England so that the transfer can be concluded.

#### **National Policy context**

2. For 2014/15 the Department of Health has transferred funding to support adult social care to NHS England as part of the Mandate.
3. The funding is in two parts. The first part is intended to help local authorities and clinical commissioning groups prepare for the implementation of the Better Care Fund pooled budget in 2015/16. Each Health and Wellbeing Board must have agreed its Better Care Plan prior to receiving the money. The allocated sum for Wiltshire is £1,519,000 and will be transferred to the Council from NHS England under S256 of the 2006 NHS Act.
4. The remaining part of the transfer will be subject to the same arrangements as the S256 transfer in 13/14 and these are detailed in point 5. The allocated sum for Wiltshire is £6,836,709 and will be transferred to the Council from NHS England under S256 of the 2006 NHS Act.
5. There are a number of national conditions for the use of the 2014-15 funds, which are summarised below:
  - The funding must be used to support adult social care services in each local authority, which also has a health benefit
  - The funding may support existing services or programmes of transformation where they are of benefit to the wider health and care system, provide good outcomes for service users, or would be reduced due to budget pressures in local authorities without this investment.
  - The local authority must be able to demonstrate how the funding will improve services and outcomes for service users, compared to service plans in the absence of the funds
  - The use of the funding must be agreed locally between the local authority and the clinical commissioning group and the use of funding must have regard to the local Joint Strategic Needs Assessment and existing commissioning plans for health and social care
  - Health and Wellbeing Boards are seen as the natural place for discussion and sign off of the transfer arrangements

## **Local context**

6. The Better Care Plan identifies key areas for change in 2014/15:

## **Investing in transformation**

During 2014-15

- We will establish a joint integration programme team, using new capacity (a programme director) and existing resources from within the Council and the CCG. This team will lead the implementation of joint commissioning and joint delivery and ensure we achieve the objectives set out within this plan.
- We will undertake a systems review of the pathway of care for older people. This will tell us where different organisations invest and what outcomes are achieved. It will allow us to see a shift in investment from repair to preventative services that can make the biggest difference.
- We will use the systems review to prioritise the areas for development in 2015-16 and beyond. The first area for development will be hospital discharge.

## **Joint commissioning**

During 2014-15

- We will plan for joint commissioning teams for specialist services (learning disabilities and mental health)
- We will scope the potential for further pooled budget arrangements
- We will evaluate options for joint commissioning of community health and care services
- We will build on developing systems to share information to support commissioning. This will inform us how investment decisions across the whole system can be changed to get the best overall outcomes.
- We will start the implementation of a joint workforce strategy, which has been developed across acute, community and social care providers

## **Supporting individuals and communities to take more responsibility for their own health and wellbeing**

During 2014-15

- We will commission an information and advice portal to support healthy lifestyles, independent living and self care
- We will support informal carers in their caring role, listen to their views and realign the services funded through our Carers Pooled Budget. .

- We will review our existing investment in preventative services and maximise the opportunities for joint commissioning of voluntary and community sector services

## **Supporting care closer to home**

During 2014-15

- We will review processes for hospital discharge so that people do not make a decision about their long-term care arrangements in an acute hospital. This will reduce delays in hospital
- We will implement our model of local multi-disciplinary team working, moving staff and services into local clusters.
- We will review the provision of bed-based care in the county, including the commissioning of care home beds. We will re-commission care home beds using an outcomes-based approach to ensure that all care takes a re-abling approach and achieves the right outcomes to maximise independence. The council and the CCG will ensure care home beds are commissioned in a consistent way
- We will make the best use of telecare services to increase the range of equipment used and the number of people benefitting
- We will increase investment in capacity and skills for intermediate care and reablement in the community. This will be through a review of our existing STARR step up and step-down bedded scheme with a view to moving more of the investment from beds to support in people's own homes.
- We will review the implementation of Help to Live at Home processes to improve outcomes for intermediate care.

## **The right support when people need it**

During 2014-15

- We will continue to invest in 24/7 rapid response services
- Our pathway review will help us determine where to invest in 24/7 services to get the best outcomes.

## **Shared assessments and support plans**

During 2014-15

- We will develop and pilot a single support plan record which is held by the patient/service user.

- We will scope requirements for information systems to allow people to share information at a local level about patients and service users. This will avoid people having to repeat their story to different agencies.

### **Allocation of the 2014-15 funds**

The money from the S256 will be allocated to social care elements of the Better Care Plan . Predominantly funding will sit in Work Scheme 3 – Protecting social care services. It will contribute to: maintaining services, managing increased demand (demography) and strengthening quality assurance.

There will be bi-monthly update reports on the delivery of Better Care and the use of the pooled funds to our Joint Commissioning Board. The Joint Commissioning Board has developed a dashboard of performance outcomes which it monitors at every meeting. This dashboard will be expanded to include they key performance outcomes for the Better Care Fund.

### **Safeguarding considerations**

7. None known

### **Public Health considerations**

8. This transfer does not currently fund any specific Public Health initiatives.

### **Environmental and climate change considerations**

9. None known

### **Equalities impact of the proposal**

10. None known

### **Risk assessment**

11. The financial risk is minimal on the basis that the £8.356m transfer is part of a national arrangement, and NHS England is obliged to make the transfer to the local authority. The allocation has already been considered within the Council's financial planning processes and funds have been spent and/or committed by the Council and reported to the Joint Commissioning Board as set out above. The CCG has expressed support for the transfer to take place and NHS England has confirmed that the transfer can take place once the allocation has been reported to the Health and Wellbeing Board.

## **Financial implications**

12. The financial implications of the transfer are as set out above.

## **Legal implications**

13. The transfer will form a S256 Agreement between Wiltshire Council and NHS England.

## **Conclusions and Recommendations**

14. The Health and Wellbeing Board is recommended to:

- Endorse the use of the S256 transfer as set out above
- Authorise relevant Council officers to sign off the S256 Agreement between Wiltshire Council and NHS England and request that an invoice is raised to NHS England so that the transfer can take place

Sue Geary

Head of Performance, Health and Workforce

## **Unpublished documents used in production of this report**

None