

EXECUTIVE

Minutes of the meeting held on 21 November 2014 starting at 8.30 am

Present

Councillor Stephen Carr (Chairman)
Councillors Graham Arthur, Robert Evans, Peter Morgan,
Colin Smith, Tim Stevens and Stephen Wells

Also Present

Councillor Peter Fortune

91 APOLOGIES FOR ABSENCE

There were no apologies from Members.

Apologies were received on behalf of the Chief Executive.

92 DECLARATIONS OF INTEREST

There were no declarations.

93 NHS S256 FUNDING TRANSFER 2014/15

Report CS14111

Social care funding from NHS England to L B Bromley for 2014/15 comprised:

- a one-off £992k integration payment from a national £200m integration sum, forming the first part of the Better Care Fund (BCF); and
- a transfer of £4,464,253 from a national £900m sum in the Spending Round, subject to the same arrangements as Section 256 transfers for 2013/14.

With Bromley's BCF Plan agreed by the BCF Programme Board (subject to six small changes), and previously signed by the Health and Wellbeing Board, BCF funds for 2014/15 had been transferred to L B Bromley as an integration payment under s.256 of the NHS Act 2006. Although BCF plans include some detail on 2014/15 spend, s.256 arrangements require that local authority expenditure plans are categorised into specific service areas agreed with the Department of Health.

The remaining £4.464m would be used to support adult social care and have a health benefit. The sum was provided to make a positive impact on social care services and outcomes for service users. As with the integration payment, the Spending Round sum would be made via an agreement

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between NHS England and L B Bromley under s.256 arrangements. Funding would be transferred upon signing of the s.256 agreement by both parties.

Local authorities were required to complete a submission template showing how proposed spend meets the Adult Social Care Outcomes Framework and the NHS Outcomes Framework. Submissions were to show planned expenditure, with project details against specific service areas. Details were outlined in Report CS14111 along with proposed 2014/15 allocations, although it was not proposed, or required, that all service areas be covered by spend. With the £992k BCF monies retained in 2014/15 Central Contingency, release of the monies was sought to fund the areas outlined. Bromley CCG had agreed these areas. Subject to Executive agreement and sign-off by the Health and Wellbeing Board Chairman, the proposals would be submitted to NHS England following the meeting (21st November), along with final details of the individual schemes. The additional 2014/15 funding would be included with the overall 2015/16 Better Care Fund previously reported to Executive (19th September 2014). Allowing for any new ongoing commitments not previously reported and recognition that Report CS14111 includes one off funding at £150k, the expected contribution towards “Protecting Social Care” would reduce from £3.5m to £3.25m from 2015/16.

Members considered significant service areas earmarked for the 2014/15 integration funding.

On dementia, there were an estimated 200,000 cases of undiagnosed dementia nation-wide. Dementia was a priority through the BCF strategy. Significant savings could be made through research and early identification of dementia e.g. GPs looking at all their patient records. Early identification could enable measures to slow the onset of dementia; however, it seemed that NHS England preferred all the funding to be spent on patients.

There was also a heavy demand for re-ablement services. Discussions were developing with the CCG on both rehabilitation and re-ablement – the former being a service provided by the NHS. A further significant area concerned integrated crisis and rapid response services, an area primarily concerned with medically fit patients blocking beds at the Princess Royal University Hospital.

It was hoped that future BCF working with NHS England would be more regularised. However, it was difficult for officers to be confident on this. There was concern at the level of accountabilities now required of local authorities and funding needed to be spent entirely in line with NHS requirements. Assurance was sought that no duplication had occurred with the previous submission for 2015/16 BCF funding. Officers were also asked if the funding could be used for other areas. It was indicated that, as far as possible, efforts had been made to allocate spending to areas meeting the NHS criteria.

Members agreed the recommendations in Report CS14111.

RESOLVED that:

(1) the 2014/15 submission to NHS England in respect of the funding transfer be agreed; and

(2) the sum of £992k for NHS Support for Social Care held in the Council's 2014/15 Central Contingency be released to fund the schemes identified in Report CS14111.

Chairman

The Meeting ended at 8.50 am