

Title: Update Report - Adult Services

Wards Affected: All

To: Health and Wellbeing Board **On:** 17 July 2013

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1. Achievements since last meeting

- 1.1 The beginning of the financial year end has indicated that the commissioning of adults services from TSDHCT has been progressing in line with the ASA. This continues to be a positive achievement given the demand pressures on the services for adults.
- 1.2 Dialogue with care homes as providers of services continues to take place and a further development of the fees model in conjunction with the CCG will take place over the summer and autumn period before council sets fees for further years.
- 1.3 The process of acquisition of TSDHCT continues with a members working group considering the detail of the business case. A summary and recommendations of the final business case following formal evaluation in June is going to council on 18th July 2013, followed by NHS processes for final decision and determination. The council remains committed to the model of integration of health and social care.
- 1.4 Supporting people services continue to provide preventative services and a consideration with partners will be how to manage the expected reductions in public expenditure and still manage support and prevention for vulnerable groups.
- 1.5 The pioneer bid to government to help support the transformation of health and social care for local people was submitted on time. This will be assessed and any announcement will be made in September.
- 1.6 Government set out its funding intentions in June for CSR. The 10% cut to 2015/16 local government funding by the Chancellor in his Spending Round announcement last week brought few surprises to most of us. This means overall funding for local government will fall by £2.1 billion in 2015/16.
- 1.7 There was some slightly better news in the announcements, there will be a £3.8 billion pooled budget for health and adult social care and a continuation

of the existing transfer of funds from the NHS to Adult Social Care, known as section 256 monies. There is also an additional £200m to support the transformation process.

- 1.8 Adult social care services will need to develop its approach to Dilnot and self-funders which will drive new organisational demands and new processes for assessments will be required. Some of the new monies in the government announcements it is understood are for the costs of Dilnot year 1.

2. Challenges for the next three months

- 2.1 The need to focus on delivery whilst the acquisition process goes through its determination is a continued risk to our local system. This is mitigated through good local working relations across the health and care system and an emphasis on the focus on 'Mrs Smith' with shared vision and values.
- 2.2 The action plan to improve our mental health services through AMPA has been submitted to CQC and a short and long term set of improvements are underway.
- 2.3 The work of the health and well being board, the CCG and the pioneer bid will need to be pulled together into a single programme of work reported to the HWBB for Torbay, and to the governance of Devon County Council in order to manage our resources efficiently and effectively.
- 2.4 Development of holistic review of accommodation based care and support, including care homes, Dom care, supported living, extra care housing for long term view of market for providers including mental health as well as physical fragility is part of a market position statement required by January 2014, and capacity will need to be prioritized for this.
- 2.5 Understanding the financial announcements by government and having an early discussion with CCG as to what this may mean regarding our future financial commissioning intentions and the 'single pot' approach articulated in the acquisition process.

3. Action required by partners

- 3.1 Support to develop work for pioneer of health and care system as per Norman Lamb pilot within a single work programme for local government, CCG and providers reporting to HWBB and DCC Governance.
- 3.2 Engaging with care homes jointly with CCG regarding fees for future years.
- 3.3 Continued engagement of role of voluntary and community sector for joined up role of health and care in financially sustainable way.
- 3.4 Engaging with CCG regarding future financial model and use of 256 and transformational monies.

3.5 Reviewing supporting people arrangements via service user and providers consultation in view of reducing resources in local government.

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