

## ASSRP – 13 July 2017

## Adult Social Care &amp; All – Age Disability in 2017/18 – Update

## 1. Background

The first quarter of the 2017/18 financial year has allowed the division to digest and interrogate the 2016/17 outturn, understand the on-going budget pressures in 2017/18 and prepare to tackle these challenges through the use of additional funding and delivering in year savings. A summary of the key items is provided below.

## 2. 2016/17 Outturn

The divisional outturn position for 2016-17 is an over spend of **£3.209m** (£1.878 in Adult Social Care plus £1.331 in the 0-25 SEND service), which represents 3.1% of the budget. Table 1 below shows the budget, actual spend and variance to budget at the end of the year.

Table 1 - Revenue budget and spend 2016/17

People Dept	Budget £'000	Actual £'000	Variance £'000
Adult Social Care and All-Age Disability Directorate	7,289	8,071	782
Adult Safeguarding and Quality Assurance	2,214	2,259	45
Older People Social Care	17,797	17,300	(497)
Disability Commissioning and Brokerage	4,630	3,898	(732)
25-65 Disability	38,427	40,542	2,115
Transformation and Clienting	1,430	775	(655)
Adult Mental Health Social Care	7,400	7,352	(48)
Day and Employment Services	2,543	2,733	190
Older People Commissioning and Brokerage	11,155	11,833	678
<b>Sub- Total</b>	<b>92,885</b>	<b>94,763</b>	<b>1,878</b>
0-25 SEND Service	10,385	11,716	1,331
<b>Adults Social Care &amp; All Age Disability Total</b>	<b>103,270</b>	<b>106,479</b>	<b>3,209</b>

### 3. 2017/18 Budget

The divisional budget for 2017/18 totals £108.150m. This budget includes growth of £4.9m to address the additional costs from 2016/17 and emerging pressures in 2017/18. This growth has been funded via the £4.4m 2017/18 Adult Social Care Precept of 3%. Future years funding via the precept, which is subject to change and cannot exceed 3% in total, has been assumed to be £2.9m in 2018/19 and £1.5m in 2019/20.

### 4. BCF & IBCF Funding

The Council and CCG have been allocated BCF funding in 2016/17 and again in 2017/18. The total allocated in 2016/17 was £22.263m and £22.856m in 2017/18. Table 2 shows the BCF funding for the Council over these two years, with 2017/18 totalling £8.049m. All schemes, except for End of Life – Social Care have continued from 2016/17 into 2017/18. Allocations include inflation at 1%.

**Table 2 - BCF Allocation Funding**

	2016-17 £'000	2017-18 £'000
Step Down & Convalescence Beds	505	510
TACS - Social Work Input	455	460
End of Life - social care	253	0
Mental Health - Reablement	202	204
Mental Health - Packages of Care	303	306
A&E Triage	177	179
Hospital Discharge	177	179
IAPT - Long Term Conditions Pilot	177	179
Early Intervention & Reablement	1,023	1,033
Prevent return to acute / care home	480	485
Extended Staying Put	121	122
Care Support Team nurses	126	127
Alcohol Diversion	61	62
Specialist Equipment e.g. Telehealth / Telecare	187	189
Demographic pressures - package of care	2,043	2,063
Care Act	806	606
Social Care Pressures	1,111	1,122
Social Care (Careline)	221	223
<b>Sub-Total Social Care</b>	<b>8,427</b>	<b>8,049</b>

The IBCF funding has been allocated to Croydon in two tranches. Tranche 1 was allocated at spending review 2015 and formed part of adult social care core funding to mitigate the reduction in core grant funding. This allocation was built in to base budgets and enabled protection from cuts. Tranche 2 was allocated in the Spring 2017 budget and due to timing Croydon has not built this additional funding into the Council's 2017/18 budget. Table 3 below shows the funding allocated:

**Table 3 – IBCF Funding**

Year	Tranche 1 £m	Tranche 2 £m	Total £'000
2017/18	0	5.5	5.5
2018/19	3.1	4.0	7.1
2019/20	6.3	2.0	8.3
<b>Total</b>	<b>9.4</b>	<b>11.5</b>	<b>20.9</b>

Tranche 2 funding will be transferred directly to the Council by DCLG and further work has been done with health partners to allocate funding to support three areas in line with the guidance:

- Meeting Adult Social Care Needs
- Supporting Hospital Discharge – including the Out of Hospital Programme (OoH)
- Stabilising the Social Care provider Market.

The council has agreed with the CCG to fund the Out of Hospital Business Case as follows:

2017/18 **£1.232m** – which is the full amount required from IBCF for the OoH programme

2018/19 **£2m** – which is 50% of the IBCF funding

2019/20 **provisionally allocated £2m** – which is 100% of the IBCF funding.

Review of programme progress to be undertaken ahead of this final allocation being made.

Table 4 details how the council is planning to spend the balance of Tranche 2 IBCF funding.

**Table 4 -Tranche 2 IBCF Allocation of Funding**

	2017-18 £m	2018-19 £m	2019-20 £m
<i>Meeting ASC needs</i>	3.435	0.335	0.250
<i>Other Out of Hospital Projects</i>	0.241	0.091	0.091
<i>Stabilising the care market</i>	0.592	0.199	0.000

## 5. Additional Health Funding

It was identified at the last ASSRP that health funding with an impact on social care, through the £30m national Managing A&E demand and Sustainability and Transformation Plans (STPs), may be made available to Croydon. Due to the general elections and changes to management at NHS Croydon CCG, there has

been a delay in gaining insight on funding available to Croydon and how it might be accessed however work is underway through the A&E Delivery Board to provide more clarity.

## **6. Challenges**

The division continues to face on-going budget pressures and needs to focus on the following key challenges in 2017/18 to meet them:

- Delivery of £3.1m of in-year savings and efficiencies via further transformation and managing demand
- Supporting self-funders to make the right decisions when choosing which services to use
- Improving the access and quality of support and services Carers need to live their own lives
- Developing the social care market by reinforcing the micro market
- Better use of new technology to improve customer engagement and service delivery
- Maximising value from contracts through gaining a better understanding of all contracts across the division, an improved strategic approach to commissioning/procurement and tactical negotiation with providers.
- Greater collaboration with partners and getting the best out of wider resources i.e. Working with Health on Outcomes Based Commissioning Programme for over 65's