

**REPORT TO:** Executive Board

**DATE:** 16 October 2008

**REPORTING OFFICER:** Strategic Director – Health & Community

**SUBJECT:** Valuing People Now: Transfer the responsibility for the Commissioning of Social Care for Adults with a Learning Disability from the NHS to Local Government and Transfer of the Appropriate Funding

**WARD(S)** Borough-wide

**1.0 PURPOSE OF THE REPORT**

1.1 To inform the Executive Board of the recently issued Government Guidance on the transfer of responsibility for commissioning social care services from PCT to local authority and the implications for Halton.

**2.0 RECOMMENDATION**

**That the Executive Board:**

- i) Note the requirements to reach agreement by 1<sup>st</sup> December 2008;**
- ii) Delegate powers to the Portfolio Holder, Health & Social Care and the Strategic Director, Health & Community to settle and submit the Council's submission to the Department of Health in response to the Valuing People Now consultation document.**

**3.0 SUPPORTING INFORMATION**

3.1 In August 2008 the Department of Health issued guidance on the transfer of responsibility for commissioning social care for adults with a learning disability from NHS to local government and the transfer of appropriate funding. Halton & St. Helens Primary Care Trust and the Local Authority are now required to :

- a) Reach agreement via PCT and LA respective governance arrangements on the amounts to be transferred for 2009/10 and informing the Department of Health by 1<sup>st</sup> December, 2008.
- b) Putting arrangements in place (if they do not already exist) so

that the transfer is effective from April 2009 and local transfers of the amount agreed can be made for 2009/10 (and 2010/11).

- 3.2 This guidance has been expected, following the consultation on Valuing People Now: from Progress to Transformation, the White Paper Our Health, Our Care, Our Say and Putting People First which sets out the adults social care agenda. There have also been a number of investigations/enquiries on NHS services which have raised concern about the safeguarding of adults with learning disabilities e.g. the Cornwall enquiry, and a growing support to move services away from health agency's responsibilities.
- 3.3 In essence, the transfer relates to the responsibility of commissioning of social care for adults with a learning disability resting solely with Local Authorities while the NHS will retain responsibility for commissioning and funding all health care elements including :
- **Specialist learning disability health services** – as set out in the recent Commissioning Specialist Adult Learning Disability Health Service Good Practice guidance.
  - **Forensic Services**
  - **Continuing Care**
  - **Mainstream health care** – encompassing access to services through primary care and general hospitals
- 3.4 It is expected that the transfer will include an appropriate allowance to meet commissioning and planning costs previously incurred by the PCT and that the transfer will be based on the actual spend in 2007/08 and amended by any other changes locally agreed to reflect necessary investment decisions. The amount transferred will be agreed locally and not by a national formulae.
- 3.5 The sum of money reported for 2007/08 which is submitted to the DoH by individual PCTs should be the basis of local discussions about what areas of spend are on health services alone and what can be described on social care related areas.
- 3.6 In addition to the reported sum PCTs may have included some of their spend on services to learning disabled people and their reported spend on primary care services and the spend should also be considered as part of local discussions.
- 3.7 This transfer of funding will be made locally for two years and will include and uplift for inflation beyond 2011 and once agreements have been reached and results analysed at a national level the DoH will consult on determination of allocations for the future.
- 3.8 Agreement to the amount to be transferred will need to be signed off

by respective LA and PCT by the 1<sup>st</sup> December 2008 and submitted to the DoH with confirmation that the transfer has been made locally by 30<sup>th</sup> June 2009 and again in 2010 and any major problems that may affect the agreement.

3.9 It is expected that the Strategic Health Authority, the Valuing People Support Team, Deputy Directors of Social Care and Care Partnerships and Learning Disability Partnership Boards will be involved at an early stage of the negotiations

### 3.10 **Implications for Halton**

Halton PCT and the Council have already entered into a Section 75 Agreement on all service areas. For learning disabilities this means that the local authority is the lead commissioner. A pooled budget arrangement has been in place since 2003 and is currently subject of a 3 year financial plan. This pooled budget stands at £12.5m but has been subject to pressure, which is likely to continue giving growing need and cost.

However, the Council and the PCT have agreed a number of issues which will facilitate this current negotiation particularly :

- The reconfiguration of the Health and Social Care Management Teams for learning disabilities into a hub and spoke model. The hub consisting of social care and health staff has been managed by the local authority since 1<sup>st</sup> August, 2008.
- The reconfiguration of respite/short break services. The PCT has undertaken to continue to invest in respite services despite the closure of the Croft Unit since July 2008. This means that £200,000 will continue to be invested into the pooled by the PCT per annum.

### 4.0 **SUMMARY**

4.1 A detailed understanding of the budget and future requirements for the next three years is now available and serves as a good basis for discussion and negotiations between the Council and the PCT to reach agreement by 1<sup>st</sup> December 2008.

4.2 This guidance is in line with national policy on the service for adults with learning disability moving away from a medical model to one of social inclusion including employment.

4.3 A working group made up of Directorate and Corporate representatives has been established to drive forward the agreement with the PCT and we anticipate the work being completed by the end of November 2008.

## 5.0 **POLICY IMPLICATIONS**

5.1 The Council already have the commissioning lead for services for adults with learning disability.

## 6.0 **FINANCIAL IMPLICATIONS**

6.1 To be confirmed following negotiations, although the PCT commitment to be no less than current investment levels.

## 7.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### 7.1 **Children & Young People in Halton**

The guidance makes reference to the need to take into account the transition of children moving into adult services during the next two years when agreeing funding arrangements. The Directorate has a record of those young people whose needs should be included in the agreement .

### 7.2 **Employment, Learning & Skills in Halton**

Increased commissioning responsibilities by Social Care may increase the opportunities for adults with learning disabilities to enter into work. Employment and learning opportunities are always raised as high priorities when adults with learning disabilities are consulted..

### 7.3 **A Healthy Halton**

This new arrangement will increase the opportunities for adults with learning disabilities to access mainstream activities and promotes the social model of disability It promotes social inclusion and the tailoring of services to meet individual need.

### 7.4 **A Safer Halton**

None identified.

### 7.5 **Halton's Urban Renewal**

None identified.

## 8.0 **RISK ANALYSIS**

8.1 Failure to reach agreement with the PCT by 1<sup>st</sup> December 2008 will be noted by the Department of Health and could lead to intervention from external inspectors.

8.2 There are a number of issues which remain to be resolved and which will need to be considered as integral to the negotiations. These are :

- a) **Retraction of Supporting People funding** – In the current year this retraction stands £996,00 on the PCT side. Future funding arrangements still remain to be agreed.
- b) **Infrastructure Costs** – It is expected that the PCT will contribute to the costs to the council under these new arrangements.
- c) **Current Contributions by the PCT** – The PCT only contributes to the cost of staff, the cost of the Croft and the Section 64 Arrangements. While one off contributions have been made in the last two years the only commitment to recurring growth has been £250k.

## 9.0 **EQUALITY AND DIVERSITY ISSUES**

9.1 This guidance aims to support vulnerable people in the community and continues the move from the medical model to the social inclusion model for some of the most excluded members of the community.

## 10.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None identified.