

10th July 2017**Agenda Item: 6****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE,
HEALTH AND PUBLIC PROTECTION****PROPOSALS FOR THE USE OF THE IMPROVED BETTER CARE FUND
2017/18****Purpose of the Report**

1. The report presents how the Council intends to spend the additional funding announced in the Chancellor's budget statement on 8th March 2017, in line with the associated conditions, and requests approval from the Committee for the specific expenditure and establishment of posts where required.

Information and Advice

2. The Spending Reviews of 2015 and 2017 have identified new money for adult social care in the form of the Improved Better Care Fund. This new element of the Better Care Fund is to be paid directly to local authorities for adult social care - amounting to £2.6bn by the end of the Parliament. In Nottinghamshire the original Improved Better Care Fund and the additional Improved Better Care Fund will provide an additional £64.13m over three years - with £16.06m in 2017/18, £21.56m in 2018/19 and £26.51m in 2019/20. The additional money announced is temporary.
3. The additional funding was announced by the Chancellor of the Exchequer in his budget statement of 8th March 2017 in response to national widespread concerns and calls for action about the funding of adult social care. The grant conditions for the additional funding to be paid to a local authority under this determination were confirmed on 27th April. The conditions are that the funding is to be spent on:
 - adult social care and used for the purposes of meeting adult social care needs
 - reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready, and
 - stabilising the social care provider market.
4. In terms of the wider context, the funding is also intended to support councils to continue to focus on core services, including to help cover the costs of the National Living Wage, which is expected to benefit up to 900,000 care workers. This includes maintaining adult social care services, which could not otherwise be maintained, as well as investing in new services, such as those which support best practice in managing transfers of care.

5. The Government will be writing to local authorities asking them to certify that the additional funding provided in the budget will be additional to existing plans for spending on adult social care in 2017/18.
6. The funding is provided through the Better Care Fund (BCF), which is a pooled budget arrangement overseen locally by the Health and Wellbeing Board. This Fund requires agreement between the Council and local Clinical Commissioning Groups (CCGs) through the Health and Wellbeing Board. Discussions have taken place with the Chief Officers of the Clinical Commissioning Groups. A summary of the proposals and the approach to allocating the funding was presented to the Nottinghamshire Health and Wellbeing Board on 28th June 2017.
7. In 2017/18 the total pooled budget for Nottinghamshire is £72.752 million. The latest policy framework for integration and the Better Care Fund was published in March. For 2017-19, there are four national conditions for BCF plans, rather than the previous eight:
 - Plans to be jointly agreed
 - NHS contribution to adult social care is maintained in line with inflation
 - Agreement to invest in NHS commissioned out-of-hospital services, which may include 7 day services and adult social care
 - Managing Transfers of Care (a new condition to ensure people's care transfers smoothly between services and settings).
8. Local authorities and CCGs also have a joint responsibility to implement each of the best practices set out in the High Impact Change Model for reducing delayed transfers of care, developed by the Local Government Association (LGA), NHS England and NHS Improvement (NHSI). The 7 changes listed in the High Impact Change Model are listed in **Appendix 1**.
9. The Council has received notification from the regional Better Care Fund Manager that an audit of the Improved Better Care Fund – led by the Department of Communities and Local Government (DCLG) - will be undertaken during this financial year, to demonstrate that the funding is being spent appropriately. The audit will be based on the changes identified in the High Impact Model. In addition at least 20 reviews of health and social care systems will be undertaken by the Care Quality Commission with a focus on how the funding is being spent.

The proposed plan for use of the new element of the Improved Better Care Fund in Nottinghamshire 2017/18

10. The proposed plan for the additional money is based on:
 - the need to meet the grant conditions
 - maintaining and improving performance of adult social care services
 - meeting targets in the Improved BCF and the High Impact Change Model (as above)
 - dealing with some of the current resource and performance risk areas
 - reducing dependence on Council reserves next year
 - offsetting some challenging savings targets.

11. Planning for use of the additional money also took into account the principles of the Council's Adult Social Care Strategy, as well as ongoing work to support current programmes focused on the transformation of social care provision and the delivery of savings targets identified over the last few years. The Adult Social Care Strategy seeks to manage demand and cost by:
 - promoting independence and wellbeing
 - ensuring value for money, and
 - promoting choice and control.
12. The Adult Social Care Strategy has sought to provide a legal and ethical framework for delivering sustainable savings in response to unprecedented reductions in central government funding. It is intended to protect support for people with the highest long term needs and lowest incomes, while encouraging other people to be more independent through offering alternatives to social care support or short term support to enable a return to independence. The County Council is approaching a savings target of £100 million from its adult social care budget (from 2011/12 - 2019/20).
13. The priority areas identified for allocation of the existing Improved Better Care Fund and the new element of the Improved Better Care Fund in 2017/18 are shown below. This amounts to £16.06m for 2017/18. They are listed under the headings of the three grant conditions. It should be noted that the costs shown are for 2017/18 only at this stage, as it is plans for this year that are required for national submission. A number of the areas of activity identified will also have funding requirements in the following 2 years that the temporary funding is available.
14. The costs are presented on a pro rata basis to show what will be required in the year 2017/18, and what the full year effect is. A table summarising all the posts requested for approval can be found in the recommendations below. The posts to be established for approval in the table, and those identified in the body of the report that will be funded from the Improved Better Care Fund, are requested for the period of up to 3 years that the funding is available, during which time the Council would reasonably anticipate further national announcements on the future of adult social care funding.

Grant condition 1 - adult social care and meeting adult social care needs

Enhanced capacity to support Team Managers to meet new statutory obligations and staff to undertake complex care assessments, and temporary capacity to undertake a review of the assessment and care management structure - £384,000 (pro rata, full year effect £768,000 for Team Manager and frontline staffing capacity), £40,000 (pro rata, full year effect £80,000 – for review of the structure over 2 years)

15. An additional 4 peripatetic FTE Team Managers across the County will create the capacity to support managers with growing areas of responsibility, such as Deprivation of Liberty authorisations, safeguarding audit work and the new competency framework.
16. Enhanced social worker capacity is required to meet statutory duties relating to four key areas of work, where there is increasing demand and pressures on current staffing due to the complexity of the work involved. These are Community Deprivation of Liberty Safeguards, Care and Treatment Reviews, increased safeguarding referrals and

investigations and Advanced Mental Health Practitioner (AMHP) assessments. The funding will cover the cost of 9.3 FTE Social Workers, 2 FTE AMHPs and 2 x 0.5 FTE Team Manager posts.

17. Temporary funding for one year over a two year period will also enable a review of resources, capacity, pressures and activity to inform a future structure for the whole of assessment and care management staffing. The associated posts required are 1 FTE Project Manager and 0.5 FTE Programme Officer.

Demand in younger adults' services - £3.368m (full year effect)

18. This is a known pressure on the adult social care budget resulting from an increased demographic demand for care and support services for younger adults with learning disabilities, mental health needs and Autism Spectrum Disorders. Many of these adults have complex health and social care needs, are living longer and are reliant on ageing carers.
19. The national policy under the Transforming Care Programme to move people with complex needs relating to learning disabilities and autism out of long stay hospitals into smaller scale community provision has also meant more people require bespoke community provision to meet their needs. Changes to national policy in relation to housing benefit has affected the development of supported living facilities and the level of demand for appropriate residential care has made it more difficult to manage costs in the care market. The funding will be used to secure the appropriate care and support services for people, in their communities wherever possible.

Implementation of safeguarding audits - £40,000 (pro rata, full year effect £80,000)

20. This capacity is required to support new work to be introduced as a result of the recent independent review of current practice in relation to adult safeguarding interventions. The additional staffing resource will support implementation of a robust and sustainable quality assurance framework to provide the Council with confidence that adult safeguarding practice is sound. The Care Act 2014 places a statutory duty on local authorities to lead and to have in place robust systems and processes in relation to adult safeguarding. The requirement is for 1 FTE Designated Adult Safeguarding Manager, and 1 FTE Business Support Officer.

Enhanced staffing capacity in the Adult Access Service - £123,000 (pro rata, full year effect £262,000)

21. This will support transformation at the point of contact with the Council, especially with development of the 3 Tier Model. The aim of this model is to resolve enquiries at the earliest possible stage by connecting people to existing community resources or short-term support that avoids or delays the need for long-term packages of care. The posts required are 1 FTE Advanced Social Work Practitioner, 1 FTE Social Worker and 2 FTE Community Care Officers, in the first year of implementation of the new model.

Immediate capacity at the Adult Access Service to support auto-scheduling work - £33,000 (pro rata, full year effect £66,000)

22. Auto-scheduling allows service users to make an appointment for an assessment or review at a convenient time for them. This represents a significant customer service improvement, as previously this would be done much later in the process after being picked up by a district social worker. It has also contributed to an improvement in workflow management for the department and has seen an increase in the number of assessments completed within the 28 day timescale. The Adult Access Service has also taken on the triaging of Customer Service Centre Update Messages. These are queries from existing service users that can often be resolved at an early stage but were previously directed to district teams. The proposal is for 2 FTE Community Care Officers in the Adult Access Service to absorb general work and allow additional capacity to support auto-scheduling.

Pressures on the service user transport budget - £478,000 (full year effect)

23. An appropriate budget for service user transport is required to allow people to access services that help them to remain at home and in their communities, e.g. day services, respite care. Historically there has not been sufficient funding to meet identified needs in this area. The proposal focuses on the day services element of the overall adult social care transport budget.

Continued investment in prevention services – £1,214,000 (full year effect)

24. Prevention services are a critical component of the Adult Social Care Strategy, and reducing demand for statutory services. The Care Act made prevention a statutory duty for local authorities. Currently services are supported via the Public Health grant, however the outcomes of the services are more closely aligned to adult social care priorities, and do not meet the conditions for expenditure from Public Health. This proposal relates to continued funding to support Nottinghamshire Help Yourself (£7,700), Connect services (£200,000), the Adult Social Care Co-production team (£206,000) and the Moving Forward service (£800,000).
25. The Nottinghamshire Help Yourself website is a partnership between health, the voluntary sector and the Council to bring information and advice for the public into a central place. The service budget funds the site licence, maintenance and development of the site, including officer time involved in growing the content, developing partnerships and supporting others to make best use of the site.
26. Connect prevention services are commissioned from three external providers: NCHA covering Bassetlaw; Age UK covering mid Nottinghamshire and Metropolitan covering south Nottinghamshire. The service provides two tiers of support: brief interventions and short term support with a view to maintaining people's independence and finding solutions for them within their local community.
27. The Co-production team consists of a team leader and three workers who engage with people with mental health needs to improve health and well-being. Co-production is managed as a project with members who are active participants in their own health and wellbeing. The service can provide evidence of a significant impact on improving

people's health and well-being, therefore reducing instances of mental ill-health re-occurring. The Moving Forward service is a mental health support service commissioned from Framework Housing Association. The core service now mostly provides support for people with mental health needs that also have housing, debt and financial difficulties that adversely affect their mental health and wellbeing.

Strategic change programmes to deliver social care in line with the Adult Social Care Strategy and the Sustainability and Transformation Plan - £2.0m

28. There are a number of posts approved at previous committees in order to support the implementation of current savings programmes and transformation plans in adult social care. In 2017/18 the Adult Social Care budget includes £6.9m of recurrent permanent savings; the current overall recurrent permanent savings agreed until 2019/20 is £14.8m. These posts are essential to delivery of the savings and closing the Council's long term funding gap. The department has been successful in delivering significant savings with £67m delivered to date. The posts include frontline social work practitioners, finance officers and project and programme management capacity supporting the transformation of adult social care.
29. The funding required for all the current posts is £2.4m in 2017/18 but the intention is to fund these posts, for the most part, from the Improved Better Care Fund in 2017/18. The posts are temporary and are subject to review, as they are aligned to the delivery of a range of savings projects.
30. In addition, there is some infrastructure funding required to support savings and transformation in adult social care, including the system review to align the Council's information systems.

Grant condition 2 - reducing pressures on the NHS, including supporting more people to be discharged from hospital

Increased social work capacity based at hospitals due to increased demand - £782,130 (total for County) (South - £396,000, Mid - £200,500, North - £185,000)

31. This proposal is to maintain and increase permanent social work assessment and management capacity to support hospital discharge and the 'ward linked cluster' model across the county. This includes funding social care posts in hospitals that Clinical Commissioning Groups are no longer able to fund. The funding will ensure a social care presence in emergency departments, support weekend working and have an impact on the high profile issue of Delayed Transfers of Care, with the aim of keeping these to a minimum.
32. The additional capacity put in place to cover winter 2016/17 has enabled social care staff to be linked to wards with the highest number of people requiring social care input prior to discharge. This closer way of working has demonstrated benefits for service users and the partner organisations involved, with Nottinghamshire rated between 5th and 12th best in the country for delays attributable to social care in the period from November 2016. Therefore the report requests approval for six of the Community Care Officer posts to be established - two each at Queen's Medical Centre (QMC), King's Mill Hospital (KMH) and Bassetlaw Hospital.

33. Historically, the South and Mid Nottinghamshire Clinical Commissioning Groups (CCGs) have funded some social care assessor posts in the acute hospitals to provide additional capacity to reduce delays in hospital discharge. Due to financial pressures experienced by the CCGs they are unable to continue to fund all of these posts from April 2017. The posts that deliver the Council's core functions in relation to hospital discharge planning therefore require future funding.
34. In South Nottinghamshire these posts are 2 FTE Social Workers, 3 FTE Community Care Officers, 2 Advanced Social Work Practitioners plus funding for weekend working. In Mid Nottinghamshire the posts required are 2 FTE Social Workers, 1 FTE Community Care Officer and funding for weekend working. These are all existing posts, so the intention is to fund these from the Improved Better Care Fund. In Bassetlaw, the additional posts requested for approval are 0.5 FTE Team Manager in the hospital team, and 2 FTE Social Workers supporting Transfer to Assess schemes. These are new posts that require approval for establishment.

New Models of Care – new types of social care services required to support Home First and Discharge to Assess models - £1.45m

35. There is an evidenced need to increase capacity to allow both older and younger adults to have more access to reablement services that help people to gain or regain the skills needed to live a more, or fully, independent life. These services will help service users to have access earlier and more quickly to the support they need to acquire or re-learn skills for independent living, including at weekends. This will support the whole social care sector in Nottinghamshire by ensuring resources are concentrated on individuals who have the most pressing needs, reducing the number of people who require hospital admission and ensuring that more people are able to leave hospital in a timely fashion. It will also help to reduce the cost to both health and social care as the cost of care and support will reduce as independence for people increases.
36. The funding will be used to increase front line and assessment capacity in the Council's Short Term Assessment and Reablement Team (START) service to increase the number of people being supported, and widen the criteria to younger adults (£950,000). This also includes the associated IT purchases in connection with these posts. The funding will also cover the cost of extending the current Programme Officer post to the end of March 2018. This role is essential in supporting recruitment of the new staff, and training them to use the new technology, which is critical in scheduling support to service users and ensuring the capacity of the service is maximised.
37. The proposal would also enhance capacity in the Notts Enabling Service to work with people with disabilities who approach the Council and people who are already receiving longer term support from social care services (£450,000). In addition more capacity will be created in the Brighter Futures service, which is commissioned from an independent provider, to support people with a learning disability, autism or brain injuries to live more independent lives with greater levels of self-esteem (£50,000). The additional posts associated with START and the Notts Enabling Service are listed in the table below.

Implementation of an Information Technology project to improve exchange of information and speed up decision making and processes across health and social care - £345,000 (full year effect)

38. An exploratory IT project across health and social care has devised a simple way of accessing key information for health and social care professionals from each other's systems. This project has been tested out at Kings Mill Hospital, allowing health employees based in the Emergency Admission Unit to have access to agreed social care information held on the Council's electronic record system. This has helped to speed up clinicians' decision making, improve discharge planning and reduce requests generated to hospital based social care employees, who can spend much of their time looking up simple information. The second phase of the project will allow social workers to have access to information they regularly request from health colleagues. The Council is keen to implement this solution between health and social care information systems throughout Nottinghamshire, as it shows high potential for significant savings of staff time. The funding to support this project is required for three years.

Grant condition 3 – Stabilising the social care provider market

National Living Wage (NLW) increases and inflation for Fair Price for Care - £5.645m (full year effect)

39. This is a known budget pressure, relating to ensuring sustainability and stability of the social care market. It has arisen as a result of legislative changes which came into effect from April 2016 with the introduction of the National Living Wage. In addition there are pressures in relation to inflationary increases applied to older adults' care homes in accordance with the Fair Price for Care. The financial impact of the NLW increase and the Fair Price for Care index linked inflationary increase for 2017/18 is £5.645m.
40. The Council contracts with a large number of external providers for adult social care services. In order to ensure that the Council can continue to commission the services to meet its statutory duties in relation to the provision of adult social care services, the Council needs to pay increased fees to meet the increased costs that the care providers are now incurring arising from the implementation of the National Living Wage. Concerns remain about the sustainability of the adult social care market and providers continue to report considerable difficulties in recruiting and retaining care staff including nursing staff. There is a risk that some providers may not be able to sustain delivery of care services that are financially viable as a result of increased costs relating to staff pay and on-costs including National Insurance and pensions contributions. Evidence in other parts of the country is that providers are handing back contracts where their cost pressures are not being reflected in the fees paid by local authorities.

Capacity in Quality and Market Management Team - £80,000 (pro rata, full year effect £160,000)

41. The main role of the Quality and Market Management Team is to monitor the quality of services delivered across the county by social care providers. These include residential and nursing care homes, homecare providers, extra-care housing schemes, day services and care, support and enablement services.

42. In recent years there has been increased public awareness about the standards of care and support services brought about in part by local and national media coverage. This has led to an increase in concerns reported and also the necessity to undertake additional quality monitoring visits to services across the County in addition to visits planned by the team. These visits are often undertaken with health and Care Quality Commission colleagues and can take place outside of normal working hours. This proposal is to ensure sufficient capacity to deal with quality issues and safeguarding concerns related to the services listed above. The posts required are 4 FTE Quality Development Officers.

Increased capacity in Strategic Commissioning - £79,736 (pro rata, full year effect £159,471)

43. This proposal will enable capacity in the oversight and delivery of Direct Payments (DP). Direct Payments are a growing area of work and the additional staffing requested will ensure appropriate support to both service users and assessment and care management teams. It will enable monitoring of the effective use of Direct Payments to ensure value for money, and prevent the need for significant annual recoups from service users. The proposal will also ensure market development is supported to ensure a choice of cost effective options. The posts required are 1 FTE DP Co-ordinator, 2 FTE DP Quality Development Officers and 1 FTE Commissioning Officer.

Other Options Considered

44. The department considered a range of options for allocation of the funding within a short period of time, once the grant conditions for the funding were confirmed in late April. A number of proposals were not prioritised as they were not felt to meet the national requirements. The proposals were also presented to the Chief Executive and the Council's Section 151 Officer as well as being subject to initial discussions with the Chief Officers of the Clinical Commissioning Groups.

Reason/s for Recommendation/s

45. The Council is required to develop and submit a plan for allocation of this temporary funding for 2017/18 and to use the funding to meet the required grant conditions within the financial year. Use of the temporary funding will be subject to monitoring and audit by the Department of Communities and Local Government and there will also be reviews of local health and care systems by the Care Quality Commission.

Statutory and Policy Implications

46. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

47. The proposed allocation of the existing and the additional funding in the Improved Better Care Fund for 2017/18 are identified in the body of the report. The total funding available in 2017/18 is £16.06m. The funding also covers the cost of some current temporary posts during 2017/18 including hospital based social care staff and staff supporting the delivery of savings projects and the transformation of adult social care services to meet current demands and respond to recent legislative changes.

Human Resources Implications (SJJ 13/06/17)

48. Any specific HR implications are identified in the body of the report. All the new posts will be recruited to in line with the authority's recruitment policy with and will be subject to the agreed employment policies. It is anticipated that the department will consider a recruitment programme to enable them to effectively appoint to all the new posts.

Implications in relation to the NHS Constitution

49. Some of the proposed allocation of the Improved Better Care Fund will meet the grant condition relating to reducing pressures on the Health Service, especially with regard to hospital discharge planning.

Safeguarding of Children and Adults at Risk Implications

50. The proposals in relation to enhancing the capacity of the Quality and Market Management team in the department, and the implementation of the safeguarding audits, will help to ensure that the Council's statutory responsibility for safeguarding adults is embedded in practice.

Implications for Service Users

51. Service users will benefit from increased capacity and a more immediate response in relation to care and support, in a number of the areas highlighted in the report.

Ways of Working Implications

52. There will be implications in teams and services where new posts are established. Managers will need to identify any implications in their areas and seek support from relevant colleagues to address these.

RECOMMENDATION/S

That the Committee:

- 1) approves the specific expenditure of the existing and the additional Improved Better Care Fund allocation for Nottinghamshire in 2017/18.
- 2) approves the establishment of the posts listed below until 31st March 2020 (unless otherwise stated).

Proposal	Post titles
Enhanced capacity to support Team Managers to meet new statutory obligations and staff to undertake complex care assessments, and capacity to undertake a review of the assessment and care management structure	<p>4 FTE peripatetic Team Managers (Band D)</p> <p>Community DoLS 4 FTE Social Workers (Band B) 0.5 FTE Team Manager (Band D)</p> <p>Care and Treatment Reviews 1 FTE peripatetic (backfill) Social Worker (Band B)</p> <p>Safeguarding 4.3 FTE Social Workers (Band B)</p> <p>Advanced Mental Health Practitioners 2 FTE AMHPs (Band C) 0.5 FTE Team Manager (Band D)</p> <p>Assessment and care management structure review (Posts required for 12 months from date of appointment) 1 FTE Project Manager (Band D) 1 FTE Programme Officer (Band B)</p>
Implementation of Safeguarding audits	<p>1 FTE Designated Adult Safeguarding Manager (Band D)</p> <p>1 FTE Business Support Officer (Grade 3)</p>
Enhanced staffing capacity in the Adult Access Service	<p>1 FTE Advanced Social Work Practitioner (Band C) 1 FTE Social Worker (Band B) 2 FTE Community Care Officers (Grade 5)</p> <p>(Posts required for 2 years from date of appointment)</p>
Immediate capacity at the Adult Access Service to support auto-scheduling work	<p>2 FTE Community Care Officers (Grade 5)</p>
Increased social work capacity based at hospitals due to increased demand	<p>South Notts 2 FTE Community Care Officers (Grade 5)</p> <p>Mid-Notts 2 FTE Community Care Officers (Grade 5)</p> <p>Bassetlaw 0.5 FTE Team Manager (Band D) 2 FTE Community Care Officers (Grade 5) 2 FTE Social Workers (Band B)</p>

New Models of Care – new types of social care services required to support Home First, Discharge to assess models	<p>START</p> <p>21.4 FTE Reablement Support workers (Grade 2)</p> <p>4 FTE Peripatetic workers (Grade 3)</p> <p>2.3 FTE Reablement Managers (Band A)</p> <p>3 FTE Occupational Therapists (Band B)</p> <p>3.3 FTE Community Care Officers (Grade 5)</p> <p>1 FTE Team Manager (Band D)</p> <p>1 FTE Programme Officer (Band B)</p> <p>(Extension of current post from Oct 2017 to 31st March 2018)</p> <p>Notts Enabling Service</p> <p>1 FTE Team Manager (Band D)</p> <p>2 FTE Social Workers or Occupational Therapists (Band B)</p> <p>1 FTE Team Leader (Band A)</p> <p>9.5 FTE Promoting Independence Workers (Grade 3)</p> <p>0.5 FTE Business Support Assistant (Grade 3)</p>
Capacity in Quality and Market Management Team	4 FTE Quality Development Officers (Band A)
Increased capacity in Strategic Commissioning	<p>1 FTE DP Co-ordinator (Grade 4)</p> <p>2 FTE DP Quality Development Officers (Band A)</p> <p>1 Commissioning Officer (Band C)</p>

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Constitutional Comments (LM 28/06/17)

53. The recommendations in the report fall within the Terms of reference of the Adult Social care and Public Health Committee.

Financial Comments (KAS 22/06/17)

54. The financial implications are contained within paragraph 47 of the report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Better Care Fund Performance and 2017-19 plan, Health and Wellbeing Board, 28th June 2017

Adult Social Care Strategy

Electoral Division(s) and Member(s) Affected

All.

ASCPH476