Report to:	HEALTH AND WELLBEING BOARD
Date:	19 January 2017
Executive Member / Reporting Officer:	Councillor Jim Fitzpatrick – First Deputy (Performance and Finance)
	Councillor Brenda Warrington – Executive Member (Adult Social Care & Wellbeing)
	Councillor Gerald P. Cooney – Executive Member (Healthy & Working)
	Councillor Peter Robinson – Executive Member (Children & Families)
	Kathy Roe – Director Of Finance – Single Commissioning Team
Subject:	TAMESIDE & GLOSSOP CARE TOGETHER ECONOMY – 2016/17 REVENUE MONITORING STATEMENT AT 30 NOVEMBER 2016 AND PROJECTED OUTTURN TO 31 MARCH 2017
Report Summary:	This is a jointly prepared report of the Tameside & Glossop Care Together constituent organisations on the revenue financial position of the Economy.
	The report provides a 2016/2017 financial year update on the month 8 financial position (at 30 November 2016) and the projected outturn (at 31 March 2017).
	A summary of the Tameside Hospital NHS Foundation Trust financial position is also included within the report. This is to ensure members have an awareness of the overall financial position of the whole Care Together economy and to highlight the increased risk of achieving financial sustainability in the short term whilst also acknowledging the value required to bridge the financial gap next year and through to 2020/21
Recommendations:	Health and Wellbeing Board Members are recommended :
	To note the 2016/2017 financial year update on the month 8 financial position (at 30 November 2016) and the projected outturn (at 31 March 2017).
	Acknowledge the significant level of savings required during the period 2016/17 to 2020/21 to deliver a balanced recurrent economy budget.
	Acknowledge the significant amount of financial risk in relation to achieving an economy balanced budget across this period.
	To note the 2016/17 quarter two Better Care Fund monitoring statement (Appendix A)
Links to Community Strategy:	The Sustainable Community Strategy and Local Area Agreement are key documents outlining the aims of the Council and its partners to improve the borough of Tameside (agreed in consultation with local residents).

Within health the CCG's Commissioning Strategy and Primary Care Strategy are similarly aligned to these principles and objectives.

Policy Implications: The Care Together resource allocations detailed within this report supports the strategic plan to integrate health and social care services across the Tameside and Glossop economy.

Financial Implications:

(Authorised by the Section 151 Officer))

This report provides the financial position statement of the 2016/17 Care Together Economy for the period ending 30 November 2016 (Month 8 - 2016/17) together with a projection to 31 March 2017 for each of the three partner organisations.

The report explains that there is a clear urgency to implement associated strategies to ensure the projected funding gap is addressed and closed on a recurrent basis across the whole economy.

Each constituent organisation will be responsible for the financing of their resulting deficit at 31 March 2017.

It should be noted that the Integrated Commissioning Fund for the partner Commissioner organisations will be bound by the terms within the existing Section 75 agreement and associated Financial Framework agreement which has been duly approved by both the Council and CCG.

Health and Wellbeing members should also note that the 2016/17 Better Care Fund allocation sum of £15.323m (page 11 of the attached report) is included within the Section 75 funding allocation of the Integrated Commissioning Fund as this is a revenue funding allocation. Actual expenditure is included within section 1. The Disabled Facilities Grant sum of £1.978m (page 11 of the attached report) is excluded from this total as it is a capital funding allocation.

Legal Implications: (Authorised by the Borough Solicitor) There is a need to deliver a balanced budget. Consequently, there are significant changes required to achieve this and reduce the current levels of spend which previously have been bailed out. This requires new models of working and relentless focus on budgets without compromising patient care and safety. Many of the new models are intended to achieve this rather than simply look to cut out waste.

Access to Information :

Any background papers relating to this report can be inspected by contacting :

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