# Annex A

**Adult social care**

The Chancellor announced that:

* The NHS performance also relies on the adult social care system, so the Government will make available up to £2.8 billion in 2023/24 in England and £4.7 billion in 2024/25 to help support adult social care and discharge. This includes £1 billion of new grant funding in 2023/24 and £1.7 billion in 2024/25, further flexibility for local authorities on council tax and, having heard the concerns of local government, delaying the rollout of adult social care charging reform from October 2023 to October 2025. (Page 26, paragraph 2.38)
* Local authorities with social care responsibilities will be able to increase the adult social care precept by up to 2 per cent per year. (Page 51, paragraph 5.25)

LGA view

* In summary, this announcement means that the funding freed up by the delay to charging reforms will be available to support and children's services. This amounts to £1.3 billion in 2022/23 and £1.9 billion in 2023/24. In addition, there is new grant funding of £1 billion in 2022/23 and £1.7 billion in 2023/24, which will be partly be allocated via the Better Care Fund and partly direct to councils. Councils will have the option to 8 raise the social care precept by up to 2 per cent instead of the previous limit of 1 per cent. Each 1 per cent raises around £300 million nationally.
* We are pleased that the Government will provide extra funding for adult social care and accepted our ask for funding allocated towards reforms to still be available to address inflationary pressures for both councils and social care providers. Councils have always supported the principle of adult social care reforms and want to deliver them effectively but have warned that underfunded reforms would have exacerbated significant ongoing financial and workforce pressures. The Government needs to use the delay to reforms learn from the trailblazers to ensure that the appropriate funding and support is in place for councils and providers to ensure they can be implemented successfully.
* Although the additional funding to adult social care is welcome, it falls significantly short of the £13 billion we have called for to address the severity of the pressure facing the service, including rising demand, and ensure councils can meet all of their statutory duties under the Care Act. This includes £3 billion towards tackling significant recruitment and retention problems by increasing care worker pay. An investment of this scale is needed to support our national infrastructure, our economy and our prosperity. People who draw on social care and support will remain concerned about the services they access to live the lives they want to lead.
* It is disappointing that the Government has continued to rely on council tax and the social care precept as part of its package to increase funding for adult social care. As we have previously stated, council tax is not the solution for meeting long-term pressures facing high-demand national services such as adult social care. Council tax raises revenue not necessarily aligned to need, leaving many councils struggling to raise the funds that they need locally.
* Part of the additional funding for adult social care will be routed through the Better Care Fund (BCF) and we welcome the Government’s commitment to continuing this support. This will give social care and health partners much-needed medium-term certainty on funding. The purpose of the BCF is not limited to freeing up hospital beds; it supports people through adult social care to remain independent and in their own homes, helping to prevent admission to hospital in the first place. It is important that the Government works with the LGA and NHS England to agree the BCF policy framework well in advance of March 2023 to ensure that local care and health leaders are able to agree their local BCF plans in good time.
* We look forward to further details on the purpose of the Social Care Grant. We urge the Government to give local leaders the freedom and flexibility to allocate the funding according to local priorities and challenges.
* We note the Government’s decision to delay charging reform for two years and welcome the move to reinvest earmarked reform funding back into social care services, which we had previously called for. The LGA had proposed a short deferral to charging reform to ensure the learning from the Trailblazer sites was fully incorporated into the Government’s thinking and future funding plans. The Government will need to bring forward sufficient funding to implement the reforms in time for the deferred implementation.
* Councils, along with the rest of the social care sector, have undertaken valuable work in recent months to prepare for the reforms going live and this learning should not be lost simply because the reforms are delayed. The Government needs to continue to fund and support councils on this wider learning as it has the potential to improve efficiency, productivity and innovation. We are keen to avoid a delay to charging reform meaning a cessation of the important work councils have begun in using technology to help bring about productivity and efficiency benefits.

**Public health**

The Chancellor announced that:

* The Government is investing an additional £3.3 billion in each of 2023-24 and 2024- 25 to support the NHS in England, enabling rapid action to improve emergency, elective and primary care performance towards pre-pandemic levels. (Page 26, paragraph 2.34). However, no announcement was made on any similar increase to public health funding

LGA view

* We are disappointed that there is no commitment to recognising the need to support public health services in a similar way to the NHS. The public health grant has been reduced by 24 per cent in real terms per capita since 2015/16, equivalent to a total reduction of £1 billion. Inflation is reducing the value of the grant further still.
* Failure to provide sustainable long-term funding for public health may force councils to make significant cuts to services next April, including drug and alcohol treatment, sexual and reproductive health, health visiting, school nursing, suicide prevention and health protection. We need a clear long-term plan which recognises the public health challenges we face as a country, addresses the current and future pressures on the public health workforce and recognises the interconnectedness with other parts of the health and care system.
* The pandemic laid bare the importance of public health investment, yet the cuts to funding undermine efforts to prepare for the next major public health threat and desires to improve prevention to reduce pressures on the NHS and social care. It is a false economy to continue to underfund public health services, given their role in increasing years of healthy life, tackling the growing burden of chronic diseases, supporting people get back into employment and preventing future pressure on health and care services.

**Health and care workforce**

The Chancellor announced that:

* The Government will continue with the New Hospital Programme to deliver healthcare more efficiently, and will introduce measures to support and grow the workforce and improve performance across the health system, including:
  + ensuring the NHS has the workforce it needs for the future, including publishing a comprehensive workforce plan next year. This will include independently verified forecasts for the number of doctors, nurses and other professionals that will be needed in 5, 10 and 15 years’ time, taking full account of improvements in retention and productivity
  + further measures to support greater local decision making and freedom for healthcare professionals to do their job. This will include commissioning an independent review by Patricia Hewitt into how best the new Integrated Care Boards can work with appropriate autonomy and accountability. (Page 26, paragraph 2.37)

LGA view

* We welcome the development of a comprehensive workforce plan, but this must extend to the non-NHS health workforce commissioned or directly employed by local councils. It must also extend to the adult social care workforce and those in the community and voluntary sector without whose support the NHS would not be able to operate. The Government has previously announced £500 million for measures to support the adult social care workforce; further detail on this is needed to ensure the Government is joining up on its various workforce commitments.
* We welcome the independent review by Patricia Hewitt but would urge the Government to include Integrated Care Partnerships (ICPs) in the review’s scope. ICPs are an equally important component of Integrated Care Systems.
* The LGA is committed to working with Government and NHS England to ensure that the review includes local government as equal partners. It will be important for the review to consider how Integrated Care Boards and Integrated Care Partnerships are accountable to their local communities. The LGA fully supports local government and NHS leaders in integrated care systems having autonomy to focus on the biggest challenges for their systems.