



# Care Act 2014

## 2014 CHAPTER 23

### PART 4

#### HEALTH AND SOCIAL CARE

##### *Integration fund*

#### **121 Integration of care and support with health services etc: integration fund**

- (1) At the end of section 223B of the National Health Service Act 2006 (funding of the National Health Service Commissioning Board) insert—
- “(6) Where the mandate specifies objectives relating to service integration, the requirements that may be specified under section 13A(2)(b) include such requirements relating to the use by the Board of an amount of the sums paid to it under this section as the Secretary of State considers it necessary or expedient to impose.
- (7) The amount referred to in subsection (6)—
- (a) is to be determined in such manner as the Secretary of State considers appropriate, and
  - (b) must be specified in the mandate.
- (8) The reference in subsection (6) to service integration is a reference to the integration of the provision of health services with the provision of health-related services or social care services, as referred to in sections 13N and 14Z1.”
- (2) After section 223G of that Act (meeting expenditure of clinical commissioning groups out of public funds) insert—

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*Changes to legislation: Care Act 2014, Section 121 is up to date with all changes known to be in force on or before 19 April 2024. There are changes that may be brought into force at a future date. Changes that have been made appear in the content and are referenced with annotations. (See end of Document for details) View outstanding changes*

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### **“223GA Expenditure on integration**

- (1) Where the mandate includes a requirement in reliance on section 223B(6) (requirements relating to use by the Board of an amount paid to the Board where mandate specifies service integration objectives), the Board may direct a clinical commissioning group that an amount (a “designated amount”) of the sums paid to the group under section 223G is to be used for purposes relating to service integration.
- (2) The designated amount is to be determined—
  - (a) where the mandate includes a requirement (in reliance on section 223B(6)) that designated amounts are to be determined by the Board in a manner specified in the mandate, in that manner;
  - (b) in any other case, in such manner as the Board considers appropriate.
- (3) The conditions under section 223G(7) subject to which the payment of a designated amount is made must include a condition that the group transfers the amount into one or more funds (“pooled funds”) established under arrangements under section 75(2)(a) (“pooling arrangements”).
- (4) The conditions may also include—
  - (a) conditions relating to the preparation and agreement by the group and each local authority and other clinical commissioning group that is party to the pooling arrangements of a plan for how to use the designated amount (a “spending plan”);
  - (b) conditions relating to the approval of a spending plan by the Board;
  - (c) conditions relating to the inclusion of performance objectives in a spending plan;
  - (d) conditions relating to the meeting of any performance objectives included in a spending plan or specified by the Board.
- (5) Where a condition subject to which the payment of a designated amount is made is not met, the Board may—
  - (a) withhold the payment (in so far as it has not been made);
  - (b) recover the payment (in so far as it has been made);
  - (c) direct the clinical commissioning group as to the use of the designated amount for purposes relating to service integration or for making payments under section 256.
- (6) Where the Board withholds or recovers a payment under subsection (5)(a) or (b)—
  - (a) it may use the amount for purposes consistent with such objectives and requirements relating to service integration as are specified in the mandate, and
  - (b) in so far as the exercise of the power under paragraph (a) involves making a payment to a different clinical commissioning group or some other person, the making of the payment is subject to such conditions as the Board may determine.
- (7) The requirements that may be specified in the mandate in reliance on section 223B(6) include requirements to consult the Secretary of State or other specified persons before exercising a power under subsection (5) or (6).

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- (8) The power under subsection (5)(b) to recover a payment may be exercised in a financial year after the one in respect of which the payment was made.
- (9) The payments that may be made out of a pooled fund into which a designated amount is transferred include payments to a local authority which is not party to the pooling arrangements in question in connection with the exercise of its functions under Part 1 of the Housing Grants, Construction and Regeneration Act 1996 (disabilities facilities grants).
- (10) In exercising a power under this section, the Board must have regard to the extent to which there is a need for the provision of each of the following—
  - (a) health services (see subsection (12)),
  - (b) health-related services (within the meaning given in section 14Z1), and
  - (c) social care services (within the meaning given in that section).
- (11) A reference in this section to service integration is a reference to the integration of the provision of health services with the provision of health-related services or social care services, as referred to in sections 13N and 14Z1.
- (12) “Health services” means services provided as part of the health service in England.”.

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**Commencement Information**

**II** S. 121 in force at 1.10.2014 by S.I. 2014/2473, art. 6

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**Changes and effects yet to be applied to the whole Act associated Parts and Chapters:**

Whole provisions yet to be inserted into this Act (including any effects on those provisions):

- s. 15(2)-(3B) substituted for s. 15(2)(3) by [2022 c. 31 s. 166\(2\)](#)
- s. 26(1)-(2A) substituted for s. 26(1)(2) by [2022 c. 31 s. 166\(4\)](#)