



MEETING:	Health and Wellbeing Board
MEETING DATES:	28 <sup>th</sup> January 2015
TITLE OF REPORT:	Better Care Fund Plan Submission and Delivery Plan Report
REPORT BY:	Director of Adults & Wellbeing & the Clinical Commissioning Group Accountable Officer

## Classification

Open

### **Wards Affected**

County-wide

## **Purpose**

This report provides:

- An overview of the key elements within the Herefordshire Better Care Fund submission of January 9<sup>th</sup> 2015
- · Information on the national BCF assurance process
- The BCF Performance Management and Governance arrangements
- The arrangements for delivery of the BCF Plan

### Recommendations

#### It is recommended that the Board

- (a) Approve the plan that was agreed using the delegated power agreed by the Health and Wellbeing Board on 16<sup>th</sup> October 2014;
- (b) Approve the Performance Management and Governance arrangements for the BCF;
- (c) Note the national assurance process and feedback to date;
- (d) Agree the delivery arrangements for BCF; and;
- (e) Agree the BCF Briefing Note (at Appendix One) for circulation to all Local Authority elected members and Health and Wellbeing Board key stakeholders.

# **Alternative options**

1. There is no alternative option. If the Better Care Fund is not submitted the Clinical Commissioning Group and the Local Authority will not receive the associated funding

allocations.

## Reasons for recommendations

2. To ensure that the Health and Wellbeing Board responsibilities for approving and delivering the plan are discharged with full knowledge of the plan and its anticipated impact within the Health and Wellbeing system.

## **Key considerations**

- 3. The principle of the BCF Plan to use a pooled budget approach in order for health and social care services to work more closely together aligns directly with the vision and principles highlighted in the aspirations of the Health and Wellbeing Board in Herefordshire. This includes a commitment to an integrated systems approach, partnership working and a focus on prevention and early intervention in all areas. The plan and principles link directly to the CCG operational and strategic plans, and the local authority priority of adults maintaining their independence and living healthy lives. It also supports the themes evidenced in the Joint Strategic Needs Assessment for Herefordshire Understanding Herefordshire 2014, which are to enable our older population to live independently and well; to prevent early death and increase years of healthy life; to improve physical and mental health and well-being; and reduce health inequalities.
- 4. Our September BCF submission was assured with one condition, with the condition being confirmed on 29<sup>th</sup> October as: Condition 4b: *The plan must address the outstanding financial risks identified in the NCAR report.* The financial risk identified in the Nationally Consistent Assurance Review (NCAR) report was: *F4-BCF financial risks are not fully identified, inadequate contingencies, lack ownership.*
- 5. This condition was included as a key area for focus in our 10 week Task and Finish Plan. We have ensured that our Memorandum of Understanding (MoU) and Risk Register reflect the financial risks in our plan; we have identified the steps we will take to address these risks, and our risk sharing agreement is clearly articulated and is fully owned by the partners. We were offered and took advantage of specialist advice from the BCF team, resulting in a dedicated session with a risk share specialist in December which assisted us in finalising our agreement.
- 6. All Health and Wellbeing areas are expected to set a minimum target reduction for total emergency admissions at 3.5%, although areas are free to choose a different target as long as all parties agree and a clear rationale can be developed to support such proposals. The Herefordshire BCF submission is set at a level of 1.5% which is below the national recommendation taking into account the ambitious overall target that we need to achieve and the context of the scale of the overall planned budget reductions within the Herefordshire Health and Wellbeing system.
- 7. When considered in total our overall target reduction for non-elective emergency admissions is in fact 6.5%, which is made up of pulling back from the 5% growth in demand in 2014/15 and the additional 1.5% reductions required to deliver the BCF Performance Fund. Following discussions with the BCF National Support Team, this approach to the target has been accepted as a rational and pragmatic approach to the challenges that exist in Herefordshire.
- 8. The key areas that have been agreed within the January iteration of the Better Care Fund plan are
  - a) A total BCF Pooled Budget (Revenue & Capital) of £47,590k. Details are set out in paragraph 22 of this report.
  - b) Three BCF Schemes within this Pooled Budget

- Minimum Protection of Social Care The protection of social care is one of the
  national conditions of the Better Care Fund. The strategic objective of this scheme is
  to maintain the existing levels of NHS (section 256) investment in social care in order
  to enable the local authority to support services which meet the wider strategic
  objectives of the BCF.
  - The strategic objective underpinning this protection is the delivery of the Adult Social Care Strategy that describes a new relationship with individuals and communities: In order to manage the funding challenge and to ensure the sustainable delivery of personalised care, we need to develop a new relationship with citizens and the local community. Changing the way that existing services are delivered will in most cases not be sufficient. There needs to be a fundamental change in expectations of individuals, communities and service providers if the most is to be made of available resources. The challenge is to develop an approach that benefits both the individual and the council, while discouraging behaviours that create user dependency and incur further costs.
- Community Health and Social Care Redesign The strategic objective for this scheme is to deliver the right Community Health and Social Care services in the most appropriate way by reviewing the current menu and method or models of provision and implementing the changes required to achieve Herefordshire's transformation aims and objectives.
  - This scheme will operate and deliver within the System Transformation Programme and be a critical addition to the scope of the Community Collaborative Workstream and the development of an Integrated Care Co-ordination Service. The integrated service draws together health and social care services across all areas of need, organised around the GP practice populations and with structures that support integrated working across professional groups and organisational boundaries.
- Managing the Care Home Market The strategic purpose of this scheme is to
  deliver more effective market management across Herefordshire to enable the more
  cost effective purchasing of Residential and Nursing placements through both the
  Local Authority and Continuing Health Care.
   Savings released through this scheme will be utilised to provide additional funding for
  the protection of social care above the minimum funding already agreed
- c) The overarching governance arrangements ensure that the BCF schemes are tied firmly into the joint commissioning arrangements and delivery of the Health and Wellbeing Strategy.



The Health and Wellbeing Board is responsible for agreeing the Better Care Fund plans and for overseeing delivery through quarterly reports from the Joint Commissioning Board (JCB). The JCB has full delegated authority to act on behalf of the Local Authority Cabinet and the CCG Governing Body on matters relating to the Better Care Fund and other joint commissioning roles and responsibilities. It receives a monthly Integrated Performance Report that includes reporting against the key areas included in the pooled fund.

The Better Care Fund Partnership Group includes representation from provider organisations and is responsible for overseeing implementation of the action plan and for the continuing review and development of the fund.

d) The Performance Management Framework (ref Appendix Two). Oversight and responsibility for the Better Care Fund is embedded within the Senior Leadership Team of both Adults & Wellbeing within Herefordshire Council and the Clinical Commissioning Group. In both cases this is in the form of a senior leader who is able to maintain the profile of this agenda and ensure linkages to wider health and social care matters as well as connection to the corporate council agendas in the case of Adults and Wellbeing.

Coordination of agendas is assured through engagement both within each organisation and in terms of shared forums with colleagues. A dedicated multi-agency group (the Better Care Fund Partnership Group) is supporting focus and progression of the Better Care Fund, acts as the key problem solving vehicle and is accountable to the JCB. The JCB will receive a monthly highlight report from this group with key decisions and issues escalated to the board for resolution as appropriate.

An integrated performance report has been developed and is shared with the JCB on a monthly basis.

This is part of a move towards alignment of our commissioning arrangements, including development of joint strategies and commissioning arrangements, in particular in relation to adult community health and social care services including personal budgets, support to carers, care home market management, mental health and learning disabilities. The

- next stages of completion of our BCF section 75 agreement will include confirmation of the future ways of working to support delivery of our shared objectives.
- e) The Memorandum of Understanding (MoU) that articulates the risk share arrangements jointly adopted for the Better Care Fund.
- f) The Draft Section 75 agreement for the management of the BCF Fund and delivery of the schemes.
- g) The Risk Register for the BCF.
- 9. The initial assessment of the January iteration of the BCF plan will be completed by the 19<sup>th</sup> January and a telephone conference call has been booked by the assurance team with Chief Officers, the Chair of the Health and Wellbeing Board and the BCF Task and Finish Group on the 20<sup>th</sup> January to share that assessment and cover any points of clarification as appropriate. After this stage a further assessment will take place with a national group with the final assessment anticipated by early February.
- 10. Detailed action plans have been developed for the delivery of the plan and work allied to these has already commenced. A summary or high level plan is shown at Appendix Three of this report.

### **Background**

- 11. In the 2013 Spending Round, the Government announced a national £3.8 billion pooled budget for health and social care services, building on the current NHS transfer to social care services, of £1 billion. The Spending Round document stated that 'the Government will introduce a £3.8 billion pooled budget for health and social care services, shared between the NHS and local authorities, to deliver better outcomes and greater efficiencies through more integrated services for older and disabled people'. This is set against the context of a reduction on overall local government expenditure.
- 12. It is important to note that this money is not new money, but a transfer of money from the NHS to Local Authorities that may already have been committed to existing NHS services. The funding must be used to support adult social care services, which also have a health benefit. The funding can be used to support existing or new services or transformation programmes where such programmes are of benefit to the wider health and social care system where positive outcomes for service users have been identified.

# **Community impact**

- 13. The Understanding Herefordshire 2014 and local needs assessments will provide the evidence base to support any redesign of services
- 14. The system wide Transformation Programme incorporating the Better Care Fund will be directed by the overarching Health and Wellbeing Strategy for Herefordshire which is currently being developed and will be approved by the Health and Wellbeing Board with regular progress reports.
- 15. There is a strong emphasis within the overarching Transformation Programme, and within both the Local Authority and the Clinical Commissioning Group on developing our community partnerships to ensure services and pathways meet the local need and that communities are able to take a lead role in the design of how services could be delivered in the future
- 16. Service users, carers and front line staff are and will be actively engaged to support the re

design of services through a number of mechanisms including the Making it Real Board, the Learning Disability Partnership Board and Healthwatch.

# **Equality and human rights**

17. An equality impact assessment will be undertaken for each of the schemes of change within the Better Care Fund

# **Financial implications**

- 18. The minimum BCF required for the BCF in Herefordshire in 2015/16 is £13,050k, comprising £11,694k revenue expenditure and £1,356k capital.
- 19. The January BCF submission has extended the pooled budget significantly beyond the minimum fund through the creation of an additional pool for Managing the Care Home Market (indicative value £34,540k) comprised of residential and nursing spot purchase expenditure from the local authority and funded nursing care (FNC) and continuing health care (CHC) expenditure from the CCG.
- 20. The minimum fund allocation confirms the maintenance of the current (2014/15) level of protection of social care funding at £4,520k and also includes Care Act implementation funding of £458k. It has been agreed that savings generated from the additional pool will be allocated to the local authority to provide additional protection of social care (up to an agreed maximum of £1,197k. The additional funding will be used to meet projected growth in demand, above normal demographic predictions and to provide additional investment in preventative services such as telecare and 7 day working to support the health system.
- 21. The BCF also contains a performance fund element which is based upon the target nonelective admissions reduction. For the Herefordshire BCF this represents £392k of the overall pool value and is anticipated to be delivered through the falls scheme. The Department of Health has specified rules through which funding is allocated, or withheld on a quarterly basis dependent upon achievement of the reduction in non-elective admissions.

### 22. Table 1: Total 2015-16 BCF Pool for Herefordshire

Pool 1 – Minimum Fund & Community Health & Social Care Services Redesign			
POOL		Scheme	2015/16 £000
1.	1.1	Minimum Fund Protection of Social Care	4,520
	1.2	Community Health & Social Care Services Redesign  -Early intervention and Rapid Response - Falls Response Service (123k)  -Early intervention & Rapid Response - Risk Stratification (800k)  -Early intervention & Rapid Response — Hospital at Home (800k)  -Intermediate Care — Step up / down community bed provision (153k)  -Intermediate Care Re-ablement (484k)  -Integrated Community Care - Community Health Services (3,879k)  - Prevention - Carers Support (477k)	6,716
		Sub Total	11,236
	1.3	Implementation of Care Act - Indicative allocation. (No Scheme document required)	458
		Total Revenue	11,694
		Please Note Capital (No separate scheme documents)	
	1.4	Disabled Facilities Grant	866

Pool 1 – Minimum Fund & Community Health & Social Care Services Redesign			
POOL		Scheme	2015/16 £000
	1.5	Social Care Capital	490
		Pool 1 Total	13,050
2	2.1	Managing the Care Home Market	34,540
		Pool 2 Total	34,540
		Total BCF Pooled Budget (Revenue & Capital)	47,590

23. The funding contributions from both partners into the BCF pool are summarised in Table 2 below

Scheme / Pool	LA	CCG	Total Scheme /
	contribution	Contribution	Pool
Minimum Fund – Protection of Social Care		4,520	4,520
Sub Total Pool 1		4,520	4,520
Community health redesign		6,716	6,716
Total Pool 1		11,236	11,236
Managing the Care Home Market (pool 2)	21,729	12,811	34,540
Disabled Facilities Grant	866	0	866
Social Care Capital	490		490
Implementation of Care Act		458	458
TOTAL FUNDING (BCF 2015/16)	23,085	24,505	47,590

24. Whilst the creation of the additional pool for managing the care home market has the potential to deliver additional savings, there are significant challenges in working with the market to release the savings into the health and social care economy. A dedicated project with senior finance support from both partners is already in existence to support and enable delivery of this target.

# Legal implications

25. It is a national requirement that the BCF pooled budget is managed under a section 75 arrangement. The agreement has been drafted and will progress through CCG and local authority governance processes in February 2015.

# Risk management

- 26. A memorandum of understanding on the risk share arrangements for the BCF has been developed by the partners together with a comprehensive risk register.
- 27. Risk will be managed and controlled through the BCF partnership group which meets weekly, with finance and risk share on a four weekly cycle for review.

# **Consultees**

28. A full engagement strategy will be developed for the BCF as elements are implemented. NHS Provider engagement is continuing and informal monthly sessions have been set up with key local stakeholders e.g. Healthwatch

# **Appendices**

Appendix One - .Better Care Fund Briefing Note

Appendix Two - BCF Performance Management Framework

**Appendix Three** – BCF Summary Action Plan

# **Background papers**

None

### **Better Care Fund Briefing Note**

#### What is The Better Care Fund?

The Better Care Fund (BCF) (formerly the Integration Transformation Fund) is a £3.8 billion fund put in place to ensure a transformation in integrated health and social care. It is a single pooled budget that brings together NHS and Local Government resources that aims to provide a real opportunity to improve services and value for money, protecting and improving social care services by shifting resources from acute services into community and preventative settings. The BCF guidance has changed considerably since it was first introduced, for example national expectations on performance related elements in 2015/16 have been amended, and the submission process became more iterative in nature.

More specifically the expectations are that the BCF will

- Reduce pressures on NHS Urgent Care and Emergency services and Social Care Services
- Deliver an ambitious level of savings with evidence of how this will be achieved from reduction in activity
- Provide a clear plan linking specific system changes to credible and quantifiable benefits realisation
- State how the new duties from the Care Act will be met
- Show a level of improvement that will be delivered against each of the national metrics
- Provide clear risk sharing agreements between the NHS and local authorities
- Encourage Acute providers to agree with and participate with the expected direction of travel

#### What does it mean in Herefordshire?

We have agreed a BCF Pooled Budget of £47, 590k as set out below.

Scheme / Pool	LA	CCG	Total Scheme /
	contribution	Contribution	Pool
	£k	£k	£k
Minimum Fund – Protection of Social Care		4,520	4,520
Sub Total Pool 1		4,520	4,520
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TOTAL FUNDING (BCF 2015/16)	23,085	24,505	47,590

There are three BCF Schemes within this Pooled Budget

**Minimum Protection of Social Care -** The protection of social care is one of the national conditions of the Better Care Fund. The objective of this scheme is to maintain the existing levels of NHS (section 256) investment in social care in order to enable the local authority to

support services which meet the wider strategic objectives of the BCF.

The strategic objective underpinning this protection is the delivery of the Adult Social Care Strategy that describes a new relationship with individuals and communities:

In order to manage the funding challenge and to ensure the sustainable delivery of personalised care, we need to develop a new relationship with citizens and the local community. Changing the way that existing services are delivered will in most cases not be sufficient. There needs to be a fundamental change in expectations of individuals, communities and service providers if the most is to be made of available resources. The challenge is to develop an approach that benefits both the individual and the council, while discouraging behaviours that create user dependency and incur further costs.

**Community Health and Social Care Redesign -** The strategic objective for this scheme is to deliver the right Community Health and Social Care services in the most appropriate way by reviewing the current menu and method or models of provision and implementing the changes required to achieve Herefordshire's transformation aims and objectives.

This scheme will operate and deliver within the System Transformation Programme and be a critical addition to the scope of the Community Collaborative Workstream and the development of an Integrated Care Co-ordination Service. The integrated service draws together health and social care services across all areas of need, organised around the GP practice populations and with structures that support integrated working across professional groups and organisational boundaries.

Managing the Care Home Market - The strategic purpose of this scheme is to deliver more effective market management across Herefordshire and to enable cost effective purchasing of Residential and Nursing placements through both the Local Authority and Continuing Health Care.

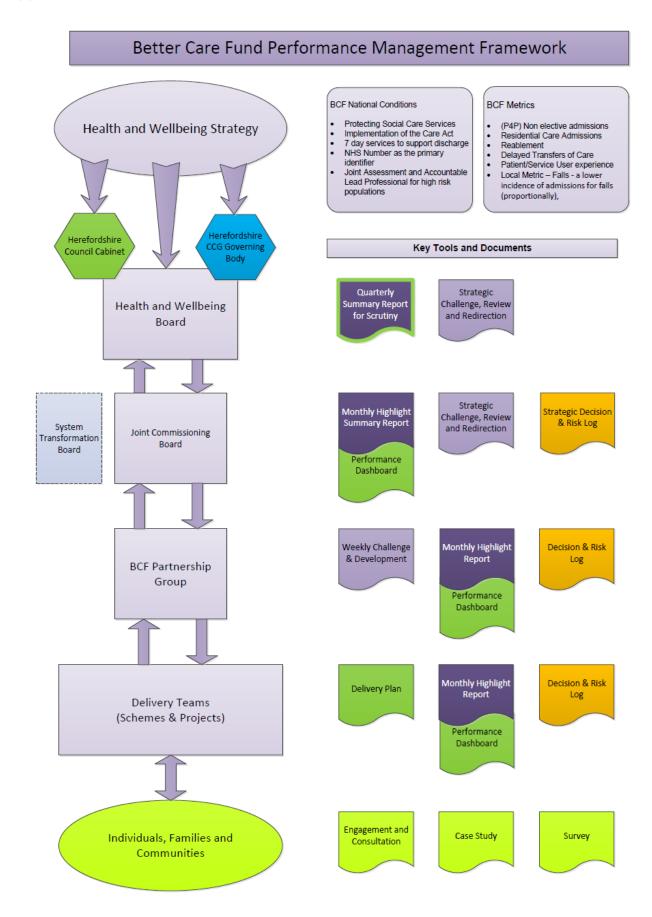
Savings released through this scheme will be utilised to provide additional funding for the protection of social care above the minimum funding already agreed

All Health and Wellbeing areas are expected to set a minimum target reduction for total emergency admissions at 3.5%, although areas are free to choose a different target as long as all parties agree and a clear rationale can be developed to support such proposals. The Herefordshire BCF submission is set at a level of 1.5% which is below the national recommendation but takes into account the ambitious overall target that we need to achieve and the of the scale of the overall planned budget reductions within the Herefordshire Health and Wellbeing system.

When considered in total our overall target reduction for non-elective emergency admissions is in fact 6.5%, which is made up of pulling back from the 5% growth in demand in 2014/15 and the additional 1.5% reductions required to deliver the BCF Performance Fund. Following discussions with the BCF National Support Team, this approach to the target has been accepted as a rational and pragmatic approach to the challenges that exist in Herefordshire.

### Who is responsible for delivering the plan?

The BCF Partnership Group is responsible for initiating and driving delivery of the plan, reporting to the Joint Commissioning Board and ultimately the Health and Wellbeing Board.



## **Better Care Fund Performance Management Framework**

#### Introduction

The Better Care Fund (BCF) Performance Management Framework works within the governance, management and project assurance requirements of the commissioning partners and therefore aims not to create a separate process, but to ensure that the role of the BCF as a significant lever for transformation through collaboration and integration is effectively planned, delivered, monitored, reviewed and redirected as appropriate within existing arrangements.

### **Roles and Responsibilities**

The diagram above illustrates the key groups and boards with responsibilities within this framework and the reports that will be utilised. The boards and groups mentioned will have broader responsibilities than BCF but this document only refers to the specific Herefordshire BCF requirements.

### The Health and Wellbeing Board will

- receive quarterly reports on the progress of the BCF implementation
- and **scrutinise delivery** against the expectations of the Health and Wellbeing Strategy and the BCF outcomes set out in the BCF plan.

The Joint Commissioning Board has formal decision making authority and will

- receive a monthly Summary Highlight Report on the progress of BCF implementation
- specifically challenge progress against the Joint Commissioning Plan
- review the Performance Dashboard and the achievement of agreed outcomes
- review the Risk and Issues Log and agree appropriate mitigation requirements
- Take and record decisions made in order to ensure delivery against the plan and or changes to the plan that improve the opportunity to deliver the required outcomes

The Joint Commissioning Board also has responsibility for the monitoring of the Section 75, Risk Share and Contingency Plan for the Pooled Budget arrangements. The process for this is covered within the separately documented Governance arrangements but the agendas will run in parallel to ensure that the board has the full picture for decision making.

**The System Transformation Board** is primarily the board for the System Transformation Programme and will not operate as a direct board for the BCF. BCF Schemes and Projects that are working within the programme workstreams or have high interdependencies with the programme will be reported to this Board (that meets on a monthly basis) as required by the Senior Responsible Officers for the relevant workstreams.

The System Transformation Board will have access to the same information as the Joint Commissioning board as relevant to the workstream detail that is being presented. The only exceptions to this will be any commercial or confidential commissioning information that could give an advantage or create a conflict of interest for providers who sit on the board.

The BCF Partnership Group is the Steering Group for the delivery of the BCF Plan. The membership is commissioners and providers at a senior management level. Members of the group take responsibility for delivery of the schemes or projects that they are leading and communications into and across their organisations in order to ensure effective understanding of the planned activity and outcomes and support for identifying interdependencies and opportunities to great greater benefits.

The group will meet on a weekly basis and operate a four weekly agenda cycle to cover Implementation, Outcomes, Finance & Legal Agreements, Delivery Review. Through this cycle the group will

• specifically **challenge progress** against the individual schemes

- review the Performance Dashboard and the achievement of agreed outcomes
- review the **delivery against Section 75**, **allied agreements** and pooled budget responsibilities
- receive a monthly Highlight Report from each scheme indicating progress on implementation and achievement against the required outcomes
- review the Risk and Issues Log and agree appropriate mitigation requirements
- take and record decisions made (within given authority) in order to ensure delivery against
  the plan and or changes to the plan that improve the opportunity to deliver the required
  outcomes
- agree the summary report for presentation at Joint Commissioning Board

**Delivery Teams** may be in the form of existing service delivery teams project teams or task and finish groups. For BCF Plan delivery they will utilise the BCF delivery plan and tracker template (Refer Appendix X) to ensure consistency of approach and ease of review by the partnership group and other Boards. Each team will have a lead officer who will be responsible for

- creation and sign off of the delivery plan
- development of the performance dashboard for the scheme/project
- maintaining delivery momentum
- Maintaining the Decision Log and Risk and Issues Log
- Attendance at the BCF Partnership Group and keeping the group advised of any delivery issues or development opportunities and preferred solutions
- Drafting of the monthly highlight report for the partnership group

**Standard templates** have been put in place to support consistent planning recording of progress and ease of performance analysis.

The key documents are

- Quarterly BCF Performance Summary Report
- BCF Delivery Monthly Highlight Report Template
- BCF Delivery Plan & Tracker Template
- Performance Dashboard

Deliverable	Due Date	Owner
System Chief Officers and Chair of Health and Wellbeing agree to re-submit Herefordshire's BCF plan as part of the 3 <sup>rd</sup> wave on January 9 <sup>th</sup>	December 2014	Chair of Health & Wellbeing Board
BCF Governance Structure agreed at CCG Governing Body	December 23 <sup>rd</sup> 2014	CCG Accountable Officer
The BCF Partnership Group Commences as the Steering Group for the delivery of the BCF Plan.	January 2015	CCG Director of Operations
BCF Scheme 1.2 Community Health and Social Care Redesign confirmed within Community Collaborative Workstream Scope Sign off at System Transformation Board	21 <sup>st</sup> Jan 2015	CCG Accountable Officer
Lead Commissioner Identified for BCF Scheme 1.2 - Community Health and Social Care Redesign	14 <sup>th</sup> Jan 2015	CCG Accountable Officer
LA Commissioning Support Allocated for BCF Scheme 1.2 - Community Health and Social Care Redesign	9 <sup>th</sup> Jan 2015	LA Director Adults & Wellbeing
Joint Commissioning Board Terms of Reference presented to CCG Governing Body	Jan 27 <sup>th</sup> 2015	CCG Accountable Officer
Final Section 75 and Risk Share Agreement, (MoU) and Risk Register for pooled budget arrangements agreed Agreement at BCF Partnership Group prior to sign off at Joint Commissioning Board February)	January 2015	CCG Director of Operations
Scheme 2.1 Managing the Care Home Market Baseline Service Measures in Place and Verified	January 2015	LA Lead Commissioner
Scheme 2.1 Managing the Care Home Market Performance Indicators, Benefit and Impact Measures – Dashboard Agreed	January 2015	LA Lead Commissioner
Scheme 2.1 Managing the Care Home Market Profile of Current Referrals and Referee's	January 2015	LA Lead Commissioner
BCF Targets, Indicators and Outcome and Indicators for all schemes and activities finalised and agreed Sign off at JCB	February 2015	CCG Director of Operations & LA Assistant Director Commissioning
Scheme 2.1 Managing the Care Home Market Profile of Current Service Provision	February 2015	LA Lead Commissioner
Draft Outcome Specification for Community Health and Social Care Redesign for Sign Off Sign off at JCB	February 2015	CCG Lead Commissioner
Delivery Model Options for Preferred Community Health and Social Care Redesign Decision Sign off at JCB	March 2015	Workstream Project Manager
Final Specification & Model for Community Health and Social Care Redesign Agreed Sign off at JCB	April 2015	CCG Lead Commissioner
Implementation Plan for delivery of Community Health and Social Care Redesign Agreed	April 2015	CCG Lead Commissioner

Deliverable	Due Date	Owner
Sign off at JCB		
Implementation of agreed model of Community Health and Social Care	April – Sept 2015	CCG Lead Commissioner & Providers
Final BCF Plan and allied activities Agreed	Feb 26 <sup>th</sup> 2015	LA Director Adults &
Includes agreement to Joint Commissioning Plan intentions for 2015/16		Wellbeing
Sign off at Local Authority Cabinet		
Final BCF Plan and allied activities Agreed Includes agreement to Joint Commissioning Plan intentions for 2015/16 Sign off at CCG Governing Body	February 2015	CCG Accountable Officer
BCF Performance Dashboard Agreed as part of Integrated Performance Report	February and March 2015	CCG Director of Operations & LA
Initial sign off at BCF Partnership Group		Assistant Director Commissioning
Sign off at Joint Commissioning Board		Continuesioning
New Joint Commissioning Board Commences	March 2015	LA Director Adults & Wellbeing & CCG Accountable Officer
BCF Performance Management Framework implemented	March 2015	CCG Director of Operations & LA Assistant Director Commissioning
Scheme 2.1 Managing the Care Home Market Options Appraisal Report – Preferred Option Agreed Sign off at JCB	March 2015	LA Assistant Director Commissioning
Scheme 2.1 Managing the Care Home Market Preferred Option Implementation Plan Agreed Sign off at JCB	March 2015	LA Assistant Director Commissioning
Better Care Fund Plans 2015/16 including Pooled Fund and Section 75 arrangements commence	1 <sup>st</sup> April 2015	LA Director Adults & Wellbeing & CCG Accountable Officer
BCF Performance Management and Governance commences	April 2015 onwards	LA Director Adults & Wellbeing & CCG Accountable Officer