

<b>Meeting:</b>	<b>Health and wellbeing board</b>
<b>Meeting date:</b>	<b>21 April 2016</b>
<b>Title of report:</b>	<b>Better care fund plan 2016/17</b>
<b>Report by:</b>	<b>Joint commissioning better care fund manager</b>

## **Classification**

Open

## **Key decision**

This is not a key decision.

## **Wards affected**

Countywide

## **Purpose**

To approve the draft Herefordshire Council and Herefordshire Clinical Commissioning Group (CCG) joint submission for the Better Care Fund (BCF) 2016/17 and to note the assurance and final sign off arrangements for the submission.

## **Recommendation(s)**

**THAT:**

- (a) the health and wellbeing board (HWB) approves the draft Better Care Fund (BCF) plan and pooled budget for 2016-17 submission;**
- (b) agreement that the final submission will be delegated to the director for adults and wellbeing at Herefordshire Council, chief officer at the CCG and the chair of the health and wellbeing board on 25 April 2016; and**
- (c) the progress on the national conditions is agreed for 2016/17.**

## Alternative options

- 1 There are no alternative options as the return is a requirement of the national BCF programme.

## Reasons for recommendations

- 2 The BCF has been established by the government to provide funds to local areas to support the integration of health and social care. It is a requirement of the BCF programme that the delivery plan and pooled budgets for the local area for 2016/17, which are required submissions are formally signed off by the health and wellbeing board
- 3 The final submission for the BCF plan to NHS England is on 25 April 2016, therefore delegated authority to the accountable officers for final sign off has been recommended allowing for any amendments that may be required.
- 4 The BCF plan provides an update on the deliverables to date and sets out the intentions for delivering the national conditions and key lines of enquiries required as part of the BCF.

## Key considerations

- 5 The BCF programme aims to deliver better outcomes and greater efficiencies through more integrated services for older and disabled people. A key principle of the BCF is to use a pooled budget approach in order for health and social care to work more closely together.
- 6 The following national conditions are the requirements for the better care fund plans 2016/17:
  - a. that a BCF plan, covering a minimum of the pooled fund specified in the spending review, should be signed off by the HWB itself and by the constituent councils and CCGs;
  - b. a demonstration of how the area will meet the national condition to maintain provision of social care services in 2016/17;
  - c. confirmation of agreement on how plans will support progress on meeting the 2020 standards for seven day services, to prevent unnecessary non-elective admissions and support timely discharge;
  - d. better data sharing between health and social care, based on the NHS number;
  - e. a joint approach to assessments and care planning and ensure that, where funding is used for integrated packages of care, there will be an accountable professional;
  - f. agreement on the consequential impact of the changes on the providers that are predicted to be substantially affected by the plans;
  - g. that a proportion of the areas allocation is invested in NHS commissioned out-of-hospital services; and

- h. agreement on a local action plan to reduce delated transfers of care.
- 7 In addition, the BCF plan has 73 key lines of enquiry that it needs to address in the context of delivering a joint approach to the national conditions. Appendix one shows the 2016/17 plan and appendix two is the key lines of enquiries.
- 8 The Herefordshire BCF plan 2016/17 demonstrates the progress made on the 2015/16 intentions, details key milestones for 2016/17 and describes the future vision for the county. This plan is a key component of, and wholly consistent with, the system wide transformation of Herefordshire's health and social care economy.
- 9 The One Herefordshire plan, which has been developed through an alliance of all the Herefordshire health partners, provides the fundamental context and approach that underpins the BCF plan 2016/17. The BCF plays a key enabling role in delivering our system wide vision by creating a substantial pooled budget between the council and CCG for the delivery of community based services, residential and nursing provisions and the protection of adult social care that are strongly focused on shared aspirations.
- 10 The BCF assurance timetable consists of three key submission dates – 2 March, 21 March and 25 April 2016. The document located in Appendix one of this report is the draft plan, which was presented during submission two (21 March 2016).
- 11 Feedback has been received following the submission on 21 March, which shows the areas that Herefordshire has met, partially met or not met against the key lines of enquiry. In order for the Herefordshire BCF plan to be approved, further detail will need to be provided on areas that have partially met or not met. This is currently being developed and the recommendation of this report is for delegated authority to the accountable officers of the council and CCG to provide oversight and agreement on the final submission.
- 12 The HWB is responsible for reviewing whether the BCF submission are in line with and have given due regards to the health and well being strategy via quarterly reports from the joint commissioning board (JCB). Oversight and responsibility for the BCF is embedded within the senior leadership team of both adults and wellbeing within the council and the CCG. The better care fund partnership group acts as the key problem solving vehicle and is accountable to the JCB. The JCB currently receives a monthly highlight report from this group with key decisions and issues being escalated to the board for resolution as appropriate. It is recommended that these current governance arrangements continue during 2016/17.

## Community impact

- 13 The BCF plays a key enabling role in delivering the system wide vision, as detailed within the One Herefordshire report: *'The vision for the local health and care system in Herefordshire is one where strong communities encourage individual citizens to live healthy lives and offer support when this is required for them to maintain their independence, with sustainable, aligned health and care services for local people'*.
- 14 In developing the BCF plan 2016/17, insights from the Herefordshire joint strategic needs assessment (JSNA) have been used to understand the current and future population trends as well as the real and predicted changes in use of unplanned care and those being supported through primary care and social care services.

## Equality duty

- 15 The council is committed to equality and diversity using the Public Sector Equality Duty (Equality Act 2010) to eliminate unlawful discrimination, advance equality of opportunity and foster good relations.
- 16 It is not envisaged that the recommendations in this report will negatively disadvantage the following nine groups with protected characteristics: age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 17 The BCF programme aims to deliver better outcomes for older and disabled people and supports the council in proactively delivering it's Equality duty under the act.

## Financial implications

- 18 Herefordshire's minimum fund contributions and indicative additional contributions from each partner are summarised below. This table also sets out any changes from funding levels in 2015/16. The final budget contributions for the additional pool will be based on the cost of care for current clients as at the end of February 2016. The current figures are based upon December clients and will be updated.

### Overview of contributions 2016/17 versus 2015/16

£'000	Ref No.	Source	Funding by council	Funding by CCG	Total 2016/17	Total 2015/16*1	Increase *2 (Decrease)
Protection adult social care	1	Minimum		4,541	4,541	4,520	21
Care Act	2	Minimum		460	460	458	2
Community health and social care	3	Minimum		6,748	6,748	6,716	32
<b>Sub total minimum fund</b>		Minimum		<b>11,749</b>	<b>11,749</b>	<b>11,694</b>	<b>55</b>
DFG (2015/16 figures including social care capital)	4/5	Min Fund	1,558		1,558	1,356*2	202

Further information on the subject of this report is available from  
Amy Pitt – joint commissioning better care fund manager on Tel (01432) 383758

Care home market management	6	Additional	19,090	8,621	27,711	27,048	663
<b>Total indicative BCF</b>			<b>20,648</b>	<b>20,370</b>	<b>41,018</b>	<b>40,098</b>	<b>920</b>

\*1 The figure reported for the BCF budget for 2015/16 is lower than the budget included in the approved plan. This is because at the time of submission, the exact criteria for the additional pool contributions had not been finalised, and final contributions were confirmed at a lower level as out of county placements were excluded from the final pool. Overall funding for 2016/17 is expected to be consistent with 2015/16, but is not yet finalised.

\*2 in 2015/16, the social care capital contribution was £490k and DFG was £866k

\*3 increase in the minimum BCF provisionally allocated pro rata

- 19 The minimum fund includes the former carers breaks and reablement funding at the same level as 2015/16, in line with the original BCF allocations and assumptions.
- 20 The Herefordshire BCF plan maintains the schemes identified in the 2015/16 BCF submission.
- 21 Allocation of the funding for the protection of adult social care has been rebalanced in some areas to reflect financial efficiencies achieved in year through recommissioned services (carers support), which do not result in reduced service provision and to enable the resources to be allocated to meet other service pressures such as deprivation of liberty safeguards (DOLs) demand. Funding also reflects the redesign of social care teams to provide better support to crisis response, facilitating hospital discharge and closer working with health teams.
- 22 The BCF will be managed through a section 75 pooled budget arrangement. A section 75 agreement, specifically in relation to the implementation of the BCF plan, is in place. On 17 March 2016, Cabinet approved the recommendation for this agreement, along with an existing section 75, to be consolidated into a single section 75 agreement.

## Legal implications

- 23 For 2016/17, the agreed budget will be managed through the existing section 75 agreement between the council and the CCG. A single section 75 agreement will be completed for September 2016, as agreed by Cabinet on 17 March 2016.
- 24 Section 75 of the National Health Service Act 2006 contains powers enabling NHS bodies (as defined in section 275 and 276 of the NHS Act 2006) to exercise certain local authority functions and for local authorities to exercise various NHS functions. The parties entered into a section 75 agreement in exercise of those powers under and pursuant of the NHS Regulations 2000.

## Risk management

- 25 The risk of not approving the draft BCF plan 2016/17 will delay the response to NHS England and will result in a late submission.
- 26 A risk register, specific to the BCF 2016/17, has been developed and included within

the draft document, located at Appendix one. Risks are also identified within the adult wellbeing directorate risk register and will be escalated as appropriate.

- 27 At this stage of the assurance process, Herefordshire has taken up the offer of regional support to develop the local approach to risk share arrangements. This support will be used to consider the options for risk share arrangements in relation to non-elective admissions, delayed transfers of care and the additional aligned fund contained within the BCF plan for 2016/17. There are currently no formal risk share arrangements in place for 2016/17.

## **Consultees**

- 28 Public engagement is not required for this return however consultation with officers within the council and CCG have been undertaken to ensure an accurate response.

## **Appendices**

Appendix one - Better Care Fund 2016/17 (submission two 21 March 2016)

Appendix two – Key lines of enquiry template

## **Background papers**

- None identified