

HEALTH AND WELLBEING BOARD			
Report Title	Integrated health and social care – Better Care Fund		
Contributors	Executive Director for Community Services and Chief Officer, Lewisham Clinical Commissioning Group	Item No.	5
Class	Part 1	Date:	25 March 2014
Strategic Context	See body of report		

1. Purpose

This report provides members of the Health and Wellbeing Board with an update on the Better Care Fund (BCF) plan and seeks their agreement to its submission on 4 April 2014. Members are asked to note the comments received on the draft plan following its submission to NHS England on 14 February 2014 and to agree that, subject to the inclusion of the additional information set out in this report, the final version be submitted on 4 April.

2. Recommendations

Members of the Health and Wellbeing Board are recommended to:

- note that the review of all BCF plans was carried out by a team consisting of representation from NHS England's local area teams, integrated care team, with local authority input provided by the London Social Care Partnership and London Councils.
- note the feedback received from the national health and social care team. The feedback is set out at paragraph 7.
- in response to the feedback received, note that additional work outlined in paragraph 7 is taking place to provide the detail requested, particularly on the plans for 7-day working and on the potential impact on providers.
- agree that the Chair and Vice Chair of the Health and Wellbeing be given responsibility on behalf of the Board for final sign off of the plan prior to its submission on 4 April.

3. Policy Context

The activity of the Health and Wellbeing Board is focused on delivering the strategic vision for Lewisham as established in *Shaping our Future – Lewisham's Sustainable Community Strategy* and in Lewisham's Health and Wellbeing Strategy.

The work of the Board directly contributes to *Shaping our Future's* priority outcome that communities in Lewisham should be *Healthy, active and enjoyable - where people can actively participate in maintaining and improving their health and wellbeing.*

The Health and Social Care Act 2012 requires the Health and Wellbeing Board to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area.

4. Strategic Context

The Better Care Fund (BCF) sits as part of a wider strategic approach and will be used to support the aims of the Adult Integrated Care Programme in particular the activity that seeks to provide the most effective personalised care and support where and when it is most needed and to achieve better outcomes for older and disabled people. The focus of this work is to establish better co-ordinated and planned care closer to home, thus reducing demand for emergency/crisis care in acute settings and preventing people from requiring mental health and social care services.

The Better Care Fund plan also aligns to Lewisham's Clinical Commissioning Group's Commissioning Strategy 2013 -18 which sets out the framework for how the CCG intend to commission local health services during the next two years. This will include working more effectively with GP practices and building on the strong local collaborative work that is taking place with local providers, and further strengthening partnership working with the public.

5. Background

The Better Care Fund was announced as part of the 2013 Spending Round. The national policy guidance 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', with the resultant reduction in unnecessary hospital admissions and in appropriate lengths of stay.

The Government also announced an extra £200m to be transferred from health to social care in 2014/15. The associated guidance states that Councils should use the additional £200m to prepare for the implementation of pooled budgets in April 2015 and to make early progress against the national conditions and the performance measures set out in the locally agreed plan.

The indicative allocations for Lewisham are £6.1m in 2014/15 and £19.74 in 2015/16 plus £1.374 from existing local authority capital.

It is important to note that the additional funding is not new money. The funding to be transferred from the CCG to the Council in 15/16 is money that is already committed to funding existing services.

6. Draft Better Care Fund Proposal – outcomes measures

The draft Better Care Fund proposal included the five national metrics with the additionally chosen local indicator on the quality of care for people with long term conditions – as shown below. In addition, to measure the success of the work being delivered by the Adult Integrated Care Programme a wider set of outcomes will be measured. This wider set is drawn from the Public Health, NHS and Adult Social Care Outcomes Frameworks.

National Metrics

- patient / service user experience;
- admissions to residential and care homes;
- avoidable emergency admissions;
- effectiveness of reablement
- delayed transfers of care;

Local indicator

- Proportion of people feeling supported to manage their (long term) condition

7. Feedback from review of draft Better Care Fund plan

A review of all BCF plans was carried out by a team consisting of representation from NHS England's local area teams, the integrated care team, and with local authority input provided by the London Social Care Partnership and London Councils. The outcomes of this review were then fed into the overarching assurance process conducted by local area teams to align BCF and operating plans.

The feedback from the local area team on Lewisham's draft plan – attached as Annex A - on 26 February 2014 and further feedback given on 3 March was that it evidenced Lewisham's good governance arrangements for the integration of health and care and the team acknowledged the strategy that was in place for integration. However the feedback also identified the need for the plan to contain more concrete milestones and better descriptions of the specific activity that will take place to achieve the national outcomes.

Lewisham will therefore need to provide more detail in the plan, in particular on the overall impact on Lewisham's provider sector and on its plans for 7 day working.

In order to address the issues raised in the feedback, Council, CCG and Lewisham and Greenwich Healthcare Trust officers are working together to provide more detail on the proposed BCF spend and to agree appropriate milestones. In addition the plan will include more information on the plans for investment and disinvestment and confirm more clearly the benefits that will be realised as a result.

The additional narrative will include details specifically on how discharge planning and implementation will be improved on a 7 day basis and a more detailed assessment on the impact of the Plan on local acute providers' capacity plans to ensure that there is alignment between the commissioners and providers planning assumptions.

On 12 March, NHS England issued a further update of the BCF technical guidance and issued a revised Part 2 template. Officers are reviewing this latest guidance to ensure the final submission reflects the latest guidance.

Unfortunately it has not been possible to complete this work prior to despatch of this report. At the Health and Wellbeing Board meeting a verbal update on progress will be provided. Meanwhile the Board is asked to note the additional information that will be provided and to agree that the Chair and Vice Chair be given responsibility for final sign off of the plan.

8. Access to the Better Care Fund

Access to the Better Care Fund is dependent on the submission of a two year plan which outlines how Lewisham will use the fund to support integration and meet the national conditions. The latest draft of Lewisham's Better Care Fund Plan is attached as Annex A. The plan will be submitted as part of the CCG's draft submissions on their 2 year operating plans.

9. Financial implications

The attached plan sets out how the Better Care Fund will be used over the period 2014/15 and 2015/16.

The funding available through the Better Care Fund is the minimum for pooling but both the CCG and the Council can pool greater amounts if they choose.

The sum transferred from health is presented in the Council's financial settlement as new funding but members should note that the majority is not increased funding to the system; the transfer of funding from the CCG to the pooled funding is not additional funding as it is already committed to existing health services.

Given the requirement for adult social care to contribute to savings of £25m (to the Council's overall £95m savings target by 2017/18), and for the CCG to deliver savings of £25m by March 2016 and thereafter in the region of £10m per annum, the plans have been designed to support system change and to

realise associated benefits. The Better Care Fund can be used to maintain services that would otherwise need to be reduced or ended, and part will be used in this way. Further, part will be used to prepare for implementation of the Care Bill.

10. Legal implications

As part of their statutory functions, Members are required to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area, and to encourage persons who arrange for the provision of health-related services in its area to work closely with the Health and Wellbeing Board.

The legal framework under which the NHS is transferring funds to the Authority is S256 of the National Health Service Act 2006 (the Act). The paying NHS body must be satisfied that the payment secures an effective use of public funds. This is usually managed through a Memorandum of Understanding which is likely to be agreed with the CCG.

Where there is an integration of services and or joint funding, then this is dealt with under an agreement under S 75 of the Act which sets out the governance arrangements for the delivery of services, and where relevant any delegation of functions from one party to another and the respective budget contributions of the local authority and the CCG in relation to the services.

11. Crime and Disorder Implications

There are no specific crime and disorder implications arising from this report or its recommendations

12. Equalities Implications

There are no specific equalities implications arising from this report or its recommendations.

13. Environmental Implications

There are no specific environmental implications arising from this report or its recommendations.

14. Conclusion

As highlighted above, further work will be undertaken between the publication of this report and the final submission date to provide the required detail in the plan as suggested by the local area team in its feedback.

If there are any queries on this report please contact Sarah Wainer, Head of Strategy, Improvement and Partnerships, Community Services Directorate, Lewisham Council, on 020 8314 9611 or by email sarah.wainer@lewisham.gov.uk