

HEALTH AND WELLBEING BOARD			
Report Title	Adult Integrated Care Programme, Better Care Fund and Joint Commissioning Intentions		
Contributors	Executive Director for Community Services and Chief Officer, Lewisham Clinical Commissioning Group	Information Item	D
Class	Part 1	Date:	20 January 2015
Strategic Context	Please see body of report		
Pathway	An update on the Adult Integrated Care Programme is presented at every Health and Wellbeing Board meeting.		

1. Purpose

- 1.1 This report provides Members of the Health and Wellbeing Board with an update on Lewisham's Adult Integrated Care Programme, the Better Care Fund and the Joint Commissioning Intentions for Integrated Care.

2. Recommendations

- 2.1 Members of the Health and Wellbeing Board are recommended to:

- Note the update provided on the Adult Integration Care Programme;
- Note the latest update on the Better Care Fund submission;
- Note the joint public engagement exercise is in progress on the Joint Commissioning Intentions for Integrated Care;
- Note and comment on the Joint Commissioning Intentions which will be progressed through the Adult and Children and Young People's Joint Commissioning Groups, as well as through discussion with providers.

3. Strategic Context

- 3.1 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.
- 3.2 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.
- 3.3 The Health and Social Care Act 2012 placed a duty on Health and Wellbeing Boards to prepare and publish joint health and wellbeing strategies to meet the needs identified in their joint strategic needs

assessments. Lewisham's Health and Wellbeing Strategy was published in 2013.

- 3.4 The Health and Social Care Act 2012 also places a specific duty on the CCG to include the relevant Health and Wellbeing Board in the preparation of their commissioning plans and when making significant revisions to those plans. The Health and Wellbeing Board must be provided with a draft commissioning plan and the CCG must consult the Board as to whether it considers the plan takes proper account of the Health and Wellbeing Strategy. The Health and Wellbeing Board's opinion on the final plan must be published within the operating plan. Health and Wellbeing Boards can refer plans to NHS England if they do not think the joint Health and Wellbeing Strategy has been taken into proper account.
- 3.5 The Health and Social Care Act 2012 also requires Health and Wellbeing Boards 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.
- 3.6 In response to the Government's stated ambition to make joined up and coordinated health and social care the norm by 2018, the Health and Wellbeing Board agreed in 2013 to increase the scale and pace of integrated working across health and social care in Lewisham and established the adult integration care programme.

4. Adult Integrated Care Programme (AICP)

- 4.1 In October, the Programme Board asked officers to re-examine the programme's structure to make sure that it was aligned with, and able to support, the delivery of the key commitments outlined in various integration documents to date and meet the Better Care Fund requirements.
- 4.2 As part of this, officers were also asked to undertake a project prioritisation exercise, consulting colleagues as appropriate, and to identify the resources available to progress them.
- 4.3 Officers undertook this exercise and reconfirmed that there were 38 key projects within the Adult Integrated Care Programme. Officers recommended that these projects be realigned under five schemes to mirror the BCF schemes. Previously the programme had 10 workstreams but this had led to some fragmenting of the programme and some difficulty in ensuring that all project leads were aware of related activity in other areas.
- 4.4 Projects will fall under one of the following schemes:
 - Prevention and Early Intervention
 - Primary Care

- Neighbourhood Community Care
- Enhanced Care and Support
- Supporting Enablers

4.5 Of the 38 projects, members confirmed that a number of key areas should be prioritised for immediate focus and resources directed to supporting their delivery to ensure that significant progress can be made over the forthcoming months. These priority projects were agreed as:

1. Integrated information and advice
2. Preventative pathways and system redesign – UTIs, Dementia and Falls
3. Long term conditions and over 75s
4. Delivery of consistent and high quality care
5. Establish Neighbourhood Community Team, including mental health
6. Implement effective integrated working (including risk stratification, joint policies, tools and collaborative care planning)
7. Establish model for carers' assessments
8. Establish effective Rapid Response
9. Creating coherent and viable range of "Step up" support in the community
10. Creating coherent and viable range of "Step down" support in the community
11. Effective programme management - including activity and financial modelling and benefit realisation
12. Agree and implement workforce development plan
13. Establish effective communication and engagement plan and process
14. Effective use of technology to support integration, and health and care.

4.6 Officers are continuing to confirm the resources, both in terms of staffing and funding, that have been allocated to these areas of work and to prepare a resourcing plan for the Board to agree. Officers have been asked to report back to the programme board on 6 February 2015.

5. The Better Care Fund

5.1 Members will recall that the revised Lewisham BCF plan was submitted on 19 September 2014. As reported verbally at the last meeting, Lewisham's Better Care Fund was initially "approved with support".

5.2 Lewisham was asked to provide further information or evidence to mitigate risk areas highlighted by the Nationally Consistent Assurance Review (NCAR). Lewisham was asked to amend the scheme details that had been set out in Annex 1 of the BCF plan to include the investment requirements. In addition Lewisham was asked to provide

further details about plans to deliver the risk sharing arrangements across the partnership. This further information was submitted to NHS England at the end of November.

- 5.3 On 11 December, colleagues from NHS England informed the Council and the CCG that, following review and regional moderation, NHS England had recommended to the national team to approve Lewisham's BCF plan in full.
- 5.4 We have been informed that the results of the national agreement will be announced in mid-December but these have not been received at the time of despatch.
- 5.5 Work is underway to establish a new section 75 agreement for the Better Care Funds with Lewisham Council as part of taking forward appropriate risk sharing arrangements across the partnership.

6. Joint Commissioning Intentions for 2015/16-2016/17

- 6.1 The Joint Commissioning Intentions for Integrated Care 2015/16 – 2016/17, discussed at the last Health and Wellbeing Board meeting, are now out for a joint public consultation– 'Have your say' - until 23 January 2015.
- 6.2 A full copy of the Joint Commissioning Intentions for Integrated Care 2015/16 – 2016/17 can be found at:

<http://www.lewisham.gov.uk/news/Pages/Lewisham-Council-and-Lewisham-CCG-want-to-know-your-health-and-social-care-priorities.aspx>

Or at:

<http://www.lewishamccg.nhs.uk/get-involved/Pages/Have-your-say.aspx>

- 6.3 A summary version has been produced to facilitate wider engagement with the public and local stakeholders, which is shown at Appendix 1. Also an online questionnaire has been developed and discussions are being held with local voluntary and community groups, supported by Lewisham Healthwatch.
- 6.4 The outcome of this public engagement exercise will be considered by the Public Engagement Group (PEG) at the end of January 2015 and the conclusions will inform the 'translation' of the joint Commissioning Intentions into the CCG's Operating Plans for 2015/16 and 2016/17.
- 6.5 The Health and Social Care Act 2012 requires the Health and Wellbeing Board to provide an opinion on whether the CCG's Operating Plan has taken proper account of the Health and Wellbeing

Strategy. The Board's opinion on this issue is required to be published within the CCG's Operating Plan.

- 6.6 The Health and Wellbeing Board is being asked to note and review the Joint Commissioning Intentions for Integrated Care, to consider whether the plans have taken proper account of the Health and Wellbeing Strategy.

7. Financial Implications

- 7.1 There are no financial implications arising from this report. Any proposed activity or commitments arising from the Adult Integration Programme or the Joint Commissioning Intentions and Operating Plan will need to be agreed by the delivery organisation concerned and be subject to confirmation of resources. The funding available in future years will of course need to take account of any required savings or any other reduction in overall budgets and national NHS planning guidance, which is expected in late December 2014.

8. Legal implications

- 8.1 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.
- 8.2 Where there is an integration of services and/or joint funding, then this is dealt with as an agreement under S 75 NHS Act 2006 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.
- 8.3 The Health and Social Care Act 2012 places a specific duty on the CCG to include the relevant Health and Wellbeing Board in the preparation of their commissioning plans and when making significant revisions to those plans. The Health and Wellbeing Board must be provided with a draft plan and consult the Board as to whether it considers the plan takes proper account of the Health and Wellbeing Strategy. The Health and Wellbeing Board's opinion on the final plan must be published within the commissioning plan. Health and Wellbeing Boards can refer plans to NHS England if they do not think the joint Health and Wellbeing Strategy is being taken into proper account.

9. Crime and Disorder Implications

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

10. Equalities Implications

- 10.1 Although there are no specific equalities implications arising from this report, the draft commissioning intentions address current health and care inequalities as identified in the JSNA.

11. Environmental Implications

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

12. Conclusion

- 12.1 This report sets out the progress of the adult integration care programme, the Better Care Fund and the draft joint Commissioning Intentions to date and invites members to note and comment on this report.

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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

or

Susanna Masters, Corporate Director, NHS Lewisham Clinical Commissioning Group, on 020 3049 3216 or by email on susanna.masters@nhs.net