

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Cllr Mohammed Khan, Executive Member for Health & Adult Social Care
DATE:	11 th March 2015

SUBJECT: Better Care Fund

1. PURPOSE
 The purpose of this report is to:

- Update Health and Wellbeing Board members on formal approval of Blackburn with Darwen's Better Care Fund Plan
- Provide an update on the development of the formal Section 75 agreement between the Local Authority and CCG to support BCF delivery
- Provide an update on BCF budget and performance reporting
- Outline progress in relation to the delivery of the BCF plan since the previous report to Board members in December

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

Health and Wellbeing Board members are recommended to:

- Note that Blackburn with Darwen's Better Care Fund plan has been formally approved
- Note Section 75 development and agreed sign off process
- Note the BCF agreed budget for 2015/16 and performance reporting
- Note the progress made in delivering the BCF plan
- Accept at the next meeting of the Board in June 2015 a report outlining feedback on progress and performance updates

3. BACKGROUND

Blackburn with Darwen Better Care Fund Plan submission was made on behalf of the Health and Wellbeing Board on 19th September 2014, after agreement at the Board development session on 9th September. The full plan was circulated to HWBB members in December 2014.

4. RATIONALE

The Better Care Fund provides an opportunity through pooled budget arrangements to transform local services so that people are provided with better integrated care and support. The BCF brings together NHS and Local Government resources, and provides 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 at scale and pace.

The Fund creates an opportunity to create a shared plan for the totality of health and social care activity and expenditure that will have benefits way beyond the effective use of the mandated pooled budget. It also encourages Health and Wellbeing Boards to extend the scope of local plans and pooled budgets.

5. KEY ISSUES

5.1 Feedback on submission

Formal confirmation that Blackburn with Darwen's Better Care Fund plan had been '**Approved**' was received by the Chair of the HWBB on 19th December 2014. The BCF funding will be made available subject to the following standard conditions which apply to all BCF plans:

- The Fund being used in accordance with your final approved plan and through a section 75 pooled fund agreement;
- The full value of the element of the Fund linked to non-elective admissions reduction target will be paid over to CCGs at the start of the financial year. However, CCGs may only release the full value of this funding into the pool if the admissions reduction target is met. If the target is not met, the CCG(s) may only release into the pool a part of that funding proportionate to the partial achievement of the target. Any part of this funding that is not released into the pool due to the target not being met must be dealt with in accordance with NHS England requirements.

The formal approval letter outlined that Health and Wellbeing Boards may want to revisit their ambitions for the level of reduction of non-elective hospital admissions, in light of their experience of actual performance over the winter. Any such review should include appropriate involvement from local authorities and be approved by HWBB. Initial discussions have taken place across the Local Authority and CCG resulting in the view that previously agreed trajectories should not change.

5.2. Section 75 agreement

There is a statutory requirement for the BCF funds to be managed via pooled funding arrangements from April 2015. Failure to manage the funding in this way would result in the CCG and the Local Authority not receiving the allocated BCF funding. The Section 75 agreement between the CCG and the Local Authority sets out the framework for creating and managing the pooled funds for BCF, along with arrangements for management of other transactions agreed between the CCG and Local Authority for non-pooled funds in relation to Health and Social Care integrated services.

The BCF, managed and operated through the Section 75 agreement, will contribute towards health and social care integration, and improve the health and well-being of the residents of BwD. Integration of health and social care services and joint working is an important part of the BwD Joint Health and Wellbeing Strategy.

Matters covered in the Section 75 Agreement include:

- The aims and objectives of agreement
- Governance and decision-making arrangements, which includes the involvement of the Health and Wellbeing Board, Council Executive Board and the CCG Governing Body. Operational matters will be considered by the Joint Commissioning Recommendations Group and the Executive Joint Commissioning Group
- Scheme Specifications detailing operational arrangements of the 12 schemes contained in the Better Care Fund Plan
- Other Integrated Arrangements, currently LSCB and the Integrated Commissioning Network
- Financial framework focusing on pooled and non-pooled budgets, financial contributions of the partners, overspends and underspends, capital expenditure, risk sharing arrangements and VAT
- General operational arrangements, such as standards and conduct of service, managing conflicts of interests, information sharing and review
- Dispute resolution process

It will be possible to include additional schemes and other integrated arrangements to the Section 75 Agreement, subject to compliance with relevant legislation and guidance and the aims/objectives

as stated in the agreement.

5.3. Performance reporting

A performance reporting template has been developed that will be presented to HWBB members on a quarterly basis. The template outlines performance against agreed targets for the following BCF indicators previously agreed by HWBB members:

- Reduction in non-elective emergency admissions
- Reduction in delayed transfers of care
- Reduction in long term residential care admissions
- Improve effectiveness of reablement
- Improving diagnosis rates of dementia
- Patient experience measure- support to manage long term condition (GP survey measure)

5.4 Finance reporting

All services in the BCF plan will be operated as a pooled fund. Members will recall the requirement for a Pay for Performance aspect (P4P) which is included within the BCF budget and which will be released to the Pooled Fund in proportion to achievement of the non-elective admissions target. The first reporting period data for non-elective admissions (January-March 2015) will be available in June 2015. Finance reports will be issued to Executive Joint Commissioning Group members monthly and Health and Wellbeing Board members quarterly.

5.5 Aligning local BCF plans with CCG Operating Plan

There is a need to ensure that CCG planning is aligned to Better Care Fund to support the joining up of health and care services as outlined within the refreshed Everyone Counts guidance. There is clear reference to BCF schemes and delivery within both the CCG 5 Year plan and refreshed Operating Plan for 2015/16.

5.6 Better Care Fund plan- delivery update

Scheme	Progress
Dementia services	Dementia co-ordinator in post and plans to develop dementia friendly communities will be in place by April 2015
Voluntary sector	Integrated Information Advice and Guidance offer through consortia approach will commence April 2015
Integrated offer for carers	Review of existing services for carers undertaken and plan in place for integrated offer to commence April 2015
Integrated Locality Teams	Virtual integrated locality teams within 4 localities will be fully operational by April 2015
Directory of Services/Co-ordination Hub	Directory of Services commenced December. Communication and engagement is ongoing across primary care to raise awareness and profile.
Intensive Home Support	Plans are in place to fully roll out this new service by May 2015
Intermediate Care and integrated discharge	Pennine Lancashire integrated discharge team in development which will support the development of a Discharge to Assess model. Intermediate care beds have been jointly commissioned across health and social care from November 2014 to support a more flexible approach.

5.7 Communication and workforce development

A DVD has been produced to support communication, engagement and staff development in

relation to integrated locality working. The film features key leaders and operational staff across health and social care promoting their experiences of integrated care locally and a service user talking about how the new ways of working has impacted on their experience and outcomes.

6. POLICY IMPLICATIONS

Policy implications relating to the Better Care Fund plan were considered and reported to Health and Wellbeing Board members prior to submission of the plan.

7. FINANCIAL IMPLICATIONS

Financial implications relating to the Better Care Fund plan were considered and reported to Health and Wellbeing Board members prior to submission of the plan.

8. LEGAL IMPLICATIONS

8.1 The Section 75 agreement between the CCG and the Local Authority sets out the framework for creating and managing the pooled funds for BCF, along with arrangements for management of other transactions agreed between the CCG and Local Authority for non-pooled funds in relation to Health and Social Care integrated services. The Section 75 Agreement will be under section 75 of the National Health Service Act 2006 which gives powers for local authorities and NHS bodies (including Clinical Commissioning Groups) to establish and maintain pooled funds out of which payment may be made towards expenditure incurred in the exercise of prescribed local authority functions and NHS functions.

8.2 The Section 75 Agreement will set out the terms on which the Council and CCG have agreed to collaborate and to establish a framework through which the partners can secure the future position of health and social care services through lead or joint commissioning arrangements. It is also the means through which the partners can pool funds and align budgets as agreed between them. The agreement will operate in accordance with the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000 (as amended) and other relevant the legislation and national guidance.

8.3 Section 21 of the Care Act 2014 includes a requirement that payments by the NHS Commissioning Board to a CCG for purposes relating to service integration must include a condition that these payments are transferred into one or more pooled funds subject to arrangements under section 75 of the National Health services Act 2006.

9. RESOURCE IMPLICATIONS

Resource implications relating to the Better Care Fund plan were considered and reported to Health and Wellbeing Board members prior to submission of the plan.

10. EQUALITY AND HEALTH IMPLICATIONS

Equality and Health implications relating to the Better Care Fund plan were considered and reported to Health and Wellbeing Board members prior to submission the plan.

11. CONSULTATIONS

The details of engagement and consultation with service providers, patients, service users and the public has been reported to Health and Wellbeing Board members throughout development of the local BCF plan. Full details of engagement can be found within the narrative submission. Progress is being made to ensure public, service user and provider engagement in delivery of plans is in place.

VERSION:	4.0
-----------------	------------

CONTACT OFFICER:	Claire Jackson Programme Director- Integrated Commissioning 01254 282070
DATE:	2 nd March 2015
BACKGROUND PAPER:	

