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Title:	Better Care Fund Update
Report of:	Cllr Rachael Robathan, Chair, Health and Wellbeing Board
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1. Executive Summary

- 1.1 This paper is the regular update requested by the Health and Wellbeing Board on progress with the development of the Better Care Fund (BCF).
- 1.2 The report includes an outline of the policy context for the BCF for 2016/17 which includes information on the introduction of two new national conditions, performance metrics and timeline for implementation. In addition to this the report provides a summary of the Q3 BCF submission that occurred in February 2016, as well as an update on the on-going negotiations between health and social care regarding the 2016/17 BCF allocations.

2. Key Matters for the Board

- 2.1 The Board are asked to note the:
 - Changed conditions of access relating to the BCF and the development of local plans to address these new conditions and that Health and Wellbeing Board will be asked to agree the high-level plan and BCF operational plans;

- Submission of Quarter 3 BCF reporting in February and the outstanding conditions;
- 2016/17 allocations for the Tri-Borough area (and the combination of social care capital grant (SCCG) and disabled facilities grant (DFG) into a single funding stream) and the on-going negotiations between health and social care leading to an intended agreement by the end of March;

3. The Better Care Fund 2016/17 Update

3.1 In October 2015 Ministers announced that the Better Care Fund (BCF) would be extended until at least 2017. Further detail was provided in the Comprehensive Spending Review (CSR) on 25 November 2015. The key points regarding integration and the Better Care Fund (BCF) were:

- the BCF will continue into 2016-17, maintaining the NHS' mandated contribution in real terms over the Parliament;
- from 2017 the government will make funding available to local government, worth £1.5 billion in 2019-20, to be included in the BCF;
- areas will be able to graduate from the existing BCF programme management arrangements once they can demonstrate that they have moved beyond its requirements; and
- there will be a commitment of over £500 million by 2019-20 for the Disabled Facilities Grant.

4. The Better Care Fund Policy Framework

4.1 On 8 January 2016, the Department of Health (DH) and Department for Communities and Local Government (DCLG) published the Better Care Fund Policy Framework setting out the way in which the BCF will run during 2016-2017. The framework covers the legal and financial basis of the fund, conditions of access, national performance metrics, and the assurance and approval process to be used for local plans.

4.2 In 2016-17, the mandated minimum BCF will be increased to £3.9bn (comprising £3.519bn of the overall allocation to CCGs and £394m Disabled Facilities Grant) but flexibility to pool more than the mandated minimum will remain.

4.3 The £1bn payment for delivering on the performance framework has been removed for 2016-17 and replaced by two new national conditions requiring local areas to:

- (a) fund out-of-hospital services; and

(b) develop plans for reducing delayed transfers of care (DTOC).

Plans must also demonstrate how they meet a range of other national conditions such as how they will:

- Continue to protect local adult social care services;
- Provide seven-day services across health and social care;
- Facilitate better data sharing between health and social care based on the NHS number;
- Ensure a joint approach to assessments and care planning with a named accountable professional for integrated packages of care covering a specified proportion of the population; and
- Each agreement with local acute health and care providers on the impact of local plans.

4.4 The first stage for the assurance of local plans will be sign-off by Health and Wellbeing Board (HWB) who will agree narrative high-level plans, BCF operational plans and confirm that their local BCF plans meet stipulated national conditions.

4.5 This will be followed by a process of regional moderation and assurance which will be “proportional to the perceived level of risk in the local system”. Recommendations made at a regional level to approve the plans of high risk areas will be quality assured by the Integration Partnership Board (comprising DH, DCLG, NHS, LGA and ADASS) with final decisions on approval made by NHS England. The three boroughs are unlikely to be regarded as high risk areas.

4.6 Local areas will be expected to maintain progress made against national performance metrics set out in the 2015-16 policy framework, which include:

- Admissions to residential care homes;
- Effectiveness of reablement;
- Delayed transfers of care;
- Patient/service user experience; and
- Locally proposed metrics (as agreed in 2015-16 plans).

4.7 Implementation of local plans formally begins from 1 April 2016. Requirements and timings for submissions will be confirmed in the detailed planning guidance which was expected in late January but is yet to arrive.

5. Quarter 3 Better Care Fund Submissions

5.1 The Quarter 3 Reporting template used to report BCF performance for the period 1 October to 31 December 2015 was released in January. Final Submission of the completed return was submitted by the deadline of noon on 26 February.

5.2 The scope of the Q3 return was extended with further detail required on the use of NHS number across care settings, revised questions on plans for Personal Health Budgets and additional questions on Multi-Disciplinary/Integrated Care Teams in both non-acute and the acute settings.

5.3 As deadlines did not align with scheduled HWB meeting dates, Q3 returns went to Chairs and Vice-Chairs meetings for sign-off.

5.4 The outstanding conditions in the three boroughs are as follows:

- Are the 7 day services to support patients being discharged and prevent unnecessary admission at weekends in place and delivering?
- Is the NHS Number being used as the primary identifier for health and care services?
- Is a joint approach to assessments and care planning taking place and where funding is being used for integrated packages of care is there an accountable professional?

6. BCF Allocations and Technical Planning Guidance

6.1 The 2016-17 allocations for each Health and Wellbeing Board area were published in early February. The statutory minimum fund which must be pooled across the Triborough in 2016-17 is £47,272,000. The total agreed pooled BCF fund in 2015-16 was £153,257,115 which exceeds the statutory minimum requirement;

6.2 In a change from the breakdown of the fund in 2015-16, the 2016-17 allocations combine the social care capital grant (SCCG) and disabled facilities grant (DFG) into a single funding stream.

6.3 Detailed technical planning guidance for the BCF is still outstanding. In the meantime, negotiations between health and social care are on-going regarding

the value of the total BCF pooled fund in 2016-17. Officers aim to have an agreement in place by the end of March for the start of the new financial year.

7. Legal Implications

7.1 As referred to in para 8.2 above, the legal basis for the Better Care Fund is set out in the Better Care Fund Policy Framework issued in January 2016. The implementation of the local plan begins on 1st April 2016. We await more detailed guidance as to the requirements for the local plan.

8. Financial Implications

8.1 N/A

Please remember that if you wish the information you are providing in this report to remain confidential, we may be able to accommodate you. Please contact apalmer@westminster.gov.uk for guidance.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact:

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