

Southend-on-Sea Borough Council

Agenda
Item No.

**Better Care Fund Report
to
Health and Wellbeing Board**

On

26th March 2014

Report prepared by:
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Better Care Fund Submission

1. Purpose of Report

The draft Better Care Fund Plan, (BCF) was previously presented to the Health and Wellbeing Board on 11th February for sign off prior to initial submission. The Board is now asked to consider the final submission.

2. Recommendation

The Board is asked to

- 1) Agree the final plan
- 2) Agree delegated authority to Cllr Salter, Rob Tinlin, Simon Leftley, Melanie Craig and Paul Husselbee so any necessary additional information may added prior to the submission date of the 4th April

3. Background

- 1.1. The Government's intention is for health and social care commissioning and delivery to be integrated between the NHS and local government. This was outlined with the publication of Integrated Care and Support; Our Shared Commitment and guidance issued between October 2013 and December 2013 on the Integration Transformation Fund (ITF) latterly renamed the Better Care Fund (BCF). The shared commitment requires areas to achieve integration within 5 years and for Clinical Commissioning Groups to develop five year plans by June 2014.
- 1.2. The Better Care Fund submission attached to this report represents medium term plans covering a year of preparation (2014-15) and a year of delivery (2015-16). The Fund is intended to be a pooled fund created from existing funding streams with the expectation that monies are reallocated over the two year period to achieve the key objectives of the Better Care Fund.

- 1.3. There is no prescriptive blue print for implementation, however guidance issued on the 17th October encouraged Local Authorities and CCG's "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 fund. We encourage Health and Wellbeing Boards to extend the scope of the plan and pooled budgets."
- 1.4. The key aims of the fund are set out by Government and performance will be measured against these objectives.
- 1.5. The key aims are:
 - Protection for social care services.
 - Seven day working across health and social care to support hospital discharge and avoid hospital admission.
 - Data sharing.
 - Joint planning and assessments.
 - Identification of a lead accountable professional for joint packages of care.
 - Agreement on impact on the acute sector.
- 1.6. The Southend fund allocation is £687k for 14/15 and £12,772k for 15/16 of which £3,358k is potentially subject to pay-for-performance measures. The £3.8bn being made available through the Better Care Fund is not 'new' money. Additionally, it should be noted:
 - The application of the pooled fund must support adult social care services that also have a health benefit.
 - Local authorities must agree with Clinical Commissioning Group partners on how the funding is best used within social care and the expected outcomes.
 - Plans must be in line with responsibilities under the Health & Social Care Act and have regard to the Joint Strategic Needs Assessment for local populations, and existing commissioning plans for both health and social care.
 - Local authorities must demonstrate how the funding will make a positive difference to social care services/outcomes compared to service plans in the absence of the funding transfer.
- 1.7. The integration approach in Southend is being driven by a strategic alliance with the overarching aim of ensuring "that Southend is the healthiest town in England by 2020 for all residents from birth to old age". The alliance is comprised of:
 - Southend Borough Council
 - Southend Clinical Commissioning Group
 - Southend University Hospital NHS Foundation Trust
 - South Essex Partnership Trust
- 1.8. At a high level the integration will build on existing initiatives and trial new ways of working in the areas of:
 - Prevention
 - Commissioning
 - Service delivery

4. Next steps

- 4.1 The BCF Plan will be submitted to the Department of Health on the 4th April and will be effective from this date.
- 4.2 The work to make the plan a reality will be overseen by the Joint Executive Group of the Health and WellBeing Board. Regular reports will be made to the HWBB which will have overall responsibility for setting and agreeing strategic direction.

5. Corporate Implications

- 5.1 Contribution to Council's Vision and Critical Priorities:
- 5.2 Financial Implications – The BCF sets out joint Council and CCG expenditure over the next two years.
- 5.3 Legal Implications – None. The plans outlined are compliant with Government requirements
- 5.4 People Implications – None currently. Any implications for staff arising from the Better Care Fund will be managed under the relevant organisations HR procedures.
- 5.5 Property Implications - None
- 5.6 Consultation – This has been carried out as set out in the BCF Plan.
- 5.7 Equalities Impact Assessment - The BCF plan should result in more efficient and effective provision for vulnerable people of all ages.
- 5.8 Risk Assessment – There is a risk of reputational damage if the Plan is not submitted on time. Financial risk is discussed in the plan and contingencies are set out. The local authority will host the BCF monies on behalf of the LA and Southend CCG with a Section 75 agreement in place to manage risk share.

6. Background Papers

None

7. Appendices

Appendix 1 – Better Care Fund Plan, Parts 1 and 2