## Southend-on-Sea Borough Council

**Joint Report of** 

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to

Health and Wellbeing Board

On

29<sup>th</sup> June 2015

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For discussionFor information<br/>onlyXApproval<br/>requiredX

## Better Care Fund – Quarter 4 FY 2014 / 2015 return

## Part 1 (Public Agenda Item)

1.1. A Better Care Fund plan (BCF) was submitted to the Department of Health (DoH) on 14th April 2014. A subsequent update to the plan was submitted on 27th June 2014. On a national basis the DoH requested that Health and Wellbeing Boards (HWB) resubmit BCF plans on 19th September 2014. Southend's HWB, through delegated powers, submitted the BCF plan on 19th September 2014.

Following a nationally led review process Southend's BCF plan was formally approved in December 2014. Southend HWB has an obligation to submit quarterly reports to the national BCF taskforce for the duration of the BCF fund.

- 1.2. This paper recommends that the HWB;
  - 1.2.1. notes the submitted BCF return for Q4 2014 / 2015; and
  - 1.2.2. approves the proposed approval process for subsequent BCF quarterly returns
- 1.3. SBC has responsibility for commissioning and/or providing social care services on behalf of the population of the borough of Southend-on-Sea.
- 1.4. SCCG has the responsibility for commissioning health services pursuant to the National Health Service Act 2006 (the 2006 Act) in the borough of Southend-on-Sea.
- 1.5. The Better Care Fund has been established by the Government to provide funds to local areas to support the integration of health and social care and to seek to achieve the National Conditions and Local Objectives.
- 1.6. Southend's Better Care Fund was submitted by the Health and Wellbeing Board on 19 September 2014, and achieved NHS England approval in December 2014 – the first approved Better Care Fund in the East of England. The financial effects of the Better



Care Fund have been fully incorporated into both the 2015/16 Council budget and the CCG 15/16 operational plan.

- 1.7. It is a requirement of the Better Care Fund that the CCG and the Council establish a pooled fund.
- 1.8. Section 75 of the 2006 Act gives powers to local authorities and 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 prescribed NHS functions, regardless of original source.
- 1.9. The purpose of the S75 Agreement is to set out the terms on which the Partners 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 a means through which the Partners will pool funds and align budgets as agreed between the Partners.
- 1.10. On 31 March 2015 SBC and SCCG agreed and signed a Section 75 agreement specifically to create the Southend Better Care Fund for FY 2015 / 2016 and beyond.
- 1.11. Southend, through the Section 75 agreement, is required to submit quarterly returns to the BCF national taskforce which highlight performance of the Southend BCF against the 6 national conditions (please refer to section 3.11.3).
- 1.12. The BCF Quarterly reports are also intended to monitor progress towards achieving the targeted 3.5% reduction in non-elective admissions which will result in the release of the pay for performance element of the BCF fund noted in section 3.11.4.
- 1.13. The Better Care Fund
  - 1.13.1. The national £3.8 billion Better Care Fund (BCF) was announced by the Government in the June 2013 Spending Round, to support transformation and integration of health and social care services to ensure local people receive better care. The BCF is a pooled budget of NHS and Local Authority monies that shifts resources into social care and community services for the benefit of the NHS and local government.
  - 1.13.2. Following agreement by Ministers in June 2014, £1 billion of the NHS additional contribution to the BCF will now either be commissioned by the NHS on out of hospital services or be linked to a corresponding reduction in total emergency admissions. Protection of social care remains a top priority, and the revised plans must reflect this clear policy intention.
  - *1.13.3.* In general, the content of the plans are locally agreed, but there are some nationally mandated elements. These are the 6 national conditions and include:
    - Plans to be jointly agreed;
    - protection for social care services (not spending);
    - As part of agreed local plans, 7 day working in health and social care to support patients being discharged and prevent unnecessary admissions at weekends, aligned to;
    - better data sharing between health and social care, based on the NHS number ensure a joint approach to assessments and care planning;
    - ensure that, where funding is used for integrated packages of care, there will be an accountable professional;
    - agreement on the consequential impact of changes in the acute sector.

- 1.13.4. Locally in Southend, the Better Care Fund totals £12.772 million, of which £3.358 million has to be commissioned by the NHS on out of hospital services, of which £977,440 is subject to achieving the mandated target of 3.5% reduction in Total Emergency Admissions to Accident and Emergency. If that target is missed, all or part of the "pay for performance" element will be diverted away from the Better Care Fund pool to effectively pay for the "excess" A&E activity.
- 1.13.5. In line with national requirements, the Southend Better Care Fund is financed by £1.153 million Council contribution and £11.619 million CCG contribution. As required, the Council's contribution consists of two existing capital grants, namely Disabled Facilities Grant and Social Care Grant. Similarly, apart from £3.777 million transferred from NHS England to Southend CCG, in lieu of the value of the 2014/15 NHS Transfer Grant to the Council now incorporated into the Better Care Fund, the CCG contribution comes from its existing resources.
- *1.13.6.* Appendix 1 sets out a summary of the Southend Better Care Fund schemes.
- 1.14. The Southend BCF Q4 2014 / 2015 return
  - *1.14.1.* The BCF national taskforce require HWBs to submit quarterly returns for the duration of the BCF. The template for Q4 2014 / 2015 requires HWBs to supply data relating to;
    - Whether the Disabled Facilities Grant has been pass-ported to the relevant local housing authority;
    - Whether a section 75 agreement is in place to pool BCF funding in accordance with the nationally approved BCF plan; and
    - Whether the six national BCF conditions are being met or are on track to be met through the delivery of the national approved BCF plan;
  - 1.14.2. The Q4 2014 / 2015 reporting template also provides an ability to submit additional text and it is advised that this should be used to provide any information local areas feel is appropriate to support the return including explanation of any material variances against the plan and associated performance trajectory that was approved by NHS England.
  - *1.14.3.* Data not being collected in the Q4 2014 / 2015 return includes forecast and actual performance against the following metrics;
    - Actual non-elective admissions in to hospital (general & acute), all-age, per 100,000 population;
    - Permanent admissions of older people (aged 65 and over) to residential and nursing care homes;
    - Proportion of people with long term conditions who feel supported to manage their condition;
    - Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services; and
    - Delayed transfers of care (delayed days) from hospital per 100,000 population (aged 18+).

- *1.14.4.* The data noted in section 3.10 will be collected through pre-existing data sources and may form part of future BCF quarterly reporting requirements.
- *1.14.5.* The quarterly return was submitted on 29<sup>th</sup> May 2015 and signed off by the Chair and Vice Chair of Southend HWB. The return is at Appendix 2.
- 1.15. Future Southend BCF quarterly returns
  - *1.15.1.* Future BCF quarterly returns are required by the national BCF taskforce on the following dates;
    - 28<sup>th</sup> August 2015 regarding Q1 15/16
    - 27<sup>th</sup> November 2015 regarding Q2 15/16
    - 26<sup>th</sup> February 2016 regarding Q3 15/16
    - 27<sup>th</sup> May 2016 regarding Q4 15/16
  - 1.15.2. To ensure that there is appropriate engagement and timely sign off for the BCF quarterly returns it is proposed that the following process is approved by HWB for the returns noted in Section 3.13;
    - The Joint Executive Group (JEG), immediately prior to the required return, consider and approve the drafted return;
    - Following JEG sign off the Chair and Vice Chair of HWB sign off the quarterly return;
    - The quarterly return is submitted by the required deadline; and
    - The quarterly report is presented to the next HWB by the BCF pooled fund manager
- 1.16. The establishment of the BCF plan is a core national requirement to enable local areas to deliver the Better Care Fund ambitions. The BCF plan will contribute to the majority of the HWB strategic ambitions. Specifically;
  - *1.16.1.* Ambition 5. Living Independently; through the promotion of prevention and engagement with residents, patients and staff the BCF will actively support individuals living independently.
  - *1.16.2.* Ambition 6. Active and healthy ageing; through engaging and integrating health and social services within the community the services will be aligned to assisting individuals to age healthily and actively; and
  - 1.16.3. Ambition 9. Maximising opportunity; Overarching BCF; Southend is the drive to improve and integrate health and social services. Through initiatives within the BCF we will empower staff to personalize the integrated care individuals receive and residents to have a say in the care they receive.
- 1.17. The establishment of the BCF plan will support the delivery of HWB added value outcomes;
  - 1.17.1. Increased personal responsibility / participation;
- 1.18. The BCF sets out joint Council and CCG expenditure for 2015 / 2016.

- 1.19. <u>People Implications</u> None currently. Any implications for staff arising from the Better Care Fund will be managed under the relevant organisations HR procedures.
- 1.20. <u>Consultation</u> consultation, as required, will be carried out in accordance with any identified requirements.
- 1.21. <u>Legal Implications</u> None. The plans are compliant with Government requirements
- 1.22. <u>Equalities Impact Assessment</u> The BCF plan should result in more efficient and effective provision for vulnerable people of all ages.

None

Appendix 1	Southend BCF Summary	BCF update Clinical Exec 11th June 15.pr
Appendix 2	Southend BCF Q4 2014 / 2015 return	Southend BCF Quarterly Data Collec