

Health and Well-Being Board
Tuesday, 3 March 2015, 2.00 pm, Council Chamber, County Hall, Worcester

Membership

Full Members (Voting):

Mr M J Hart (Chairman)	Worcestershire County Council
Dr C Ellson (Vice Chairman)	South Worcestershire CCG
Mrs S L Blagg	Worcestershire County Council
Mrs E A Eyre	Worcestershire County Council
Mr Simon Hairsnape	Redditch and Bromsgrove CCG / Wyre Forest CCG
Mr B Hanford	NHS England
Mr A I Hardman	Worcestershire County Council
Richard Harling	Director of Adult Services and Health, Worcestershire County Council
Dr A Kelly	South Worcestershire CCG
Clare Marchant	Chief Executive, Worcestershire County Council
Peter Pinfield	Healthwatch, Worcestershire
Gail Quinton	Director of Children's Services, Worcestershire County Council
Dr Simon Rumley	Wyre Forest CCG
Dr Jonathan Wells	Redditch and Bromsgrove CCG

Associate Members

Hannah Campbell	South Worcestershire District Councils
Mrs C Cumino	Voluntary and Community Sector
Mrs A T Hingley	North Worcestershire District Councils
James Baker	West Mercia Police

Agenda

Item No	Subject	Presenter	Page No
11	Review of Urgent Care Patient Flow	Richard Harling/ Carl Ellson	146 - 149
12	Better Care Fund	Frances Martin	150 - 157
15	Future of Acute Hospitals in Worcestershire	CCGs	Verbal Update

To obtain further information or a copy of this agenda contact Kate Griffiths, Committee Officer on Worcester (01905) 766630 or Kidderminster (01562) 822511 (Ext 6630) or minicom: Worcester (01905) 766399 email: KGriffiths@worcestershire.gov.uk

All the above reports and supporting information can be accessed via the Council's website.

Date of Issue: Thursday, 19 February 2015

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Urgent Care update

Agenda item 11

Date	24 February 2014																		
Author	Dr Richard Harling, Director of Adult Services and Health; Dr Carl Ellson, Accountable Officer South Worcestershire CCG an Urgent care Lead																		
Recommendations	<p>1. Members are asked to note the update on urgent care</p>																		
Background	<p>2. 2014/15 has seen an increase in demand on health and adult social care services both nationally and locally. Local analysis shows:</p> <ul style="list-style-type: none"> At the end of January 2015, there had been 7,000 more A&E attendances in Worcestershire than the same period in the previous year – an increase of 7.5% or about 23 per day. The table below shows that this increase was particularly noticeable in May, June and November. However, the increase has been lower in recent months and January saw the first month where there was a reduction on the previous year. Within these overall numbers, there has been a noticeable increase in older and sicker patients. Attendances for those aged 75 or over are up 11.9% on last year and the increase was particularly significant in November and December. The increase in January was smaller, but continued to be significant. <p>A&E Attendance monthly change to prior year</p> <table border="1"> <thead> <tr> <th>Month</th> <th>All Ages</th> <th>>75</th> </tr> </thead> <tbody> <tr> <td>Apr</td> <td>4.3%</td> <td>2.4%</td> </tr> <tr> <td>May</td> <td>11.3%</td> <td>13.1%</td> </tr> <tr> <td>Jun</td> <td>13.4%</td> <td>16.6%</td> </tr> <tr> <td>Jul</td> <td>5.4%</td> <td>11.2%</td> </tr> <tr> <td>Aug</td> <td>5.4%</td> <td>10.3%</td> </tr> </tbody> </table>	Month	All Ages	>75	Apr	4.3%	2.4%	May	11.3%	13.1%	Jun	13.4%	16.6%	Jul	5.4%	11.2%	Aug	5.4%	10.3%
Month	All Ages	>75																	
Apr	4.3%	2.4%																	
May	11.3%	13.1%																	
Jun	13.4%	16.6%																	
Jul	5.4%	11.2%																	
Aug	5.4%	10.3%																	

Sep	9.8%	6.9%
Oct	7.5%	14.6%
Nov	12.0%	21.0%
Dec	7.7%	16.1%
Jan	-0.4%	8.3%

- There has not been a corresponding increase in emergency admissions. Whilst admissions were higher than previous years over the summer months, they have been lower over the winter months. In particular, admissions were significantly lower in December and January.
- However, once again the profile of older and sicker patients demonstrates the challenge. Emergency admissions for patients aged 75 and over are 4.1% higher this year overall but the largest increases came July and August, whereas the increases in the most recent months have been lower.

Emergency admissions monthly change to prior year

Month	All Ages	>75
Apr	-0.5%	5.0%
May	1.1%	4.3%
Jun	1.2%	4.2%
Jul	1.9%	7.2%
Aug	4.5%	6.5%
Sep	-0.8%	1.2%
Oct	0.2%	1.5%
Nov	-1.3%	4.1%
Dec	-5.9%	4.7%
Jan	-9.7%	2.3%
Apr - Sep	1.2%	4.7%
Oct - Jan	-4.2%	3.1%

Hospital discharge pathways

3. Most discharges from hospital will be simple: the individual will require limited further support after leaving hospital and only for a short period. Some (around a quarter) are more complex: the individual's abilities may have reduced compared to pre-admission and they may require some ongoing rehabilitation and support, and in some cases long term care.
4. The local NHS and the Council have established a new Patient Flow Centre to co-ordinate complex discharges. We

now have three main discharge pathways that allow people to 'step down' from the acute hospital to a more appropriate setting:

- Pathway 1 allows people to be discharged with support and rehabilitation at home to enable them to recover and plan for any longer term care needs – this service is provided by the Council's in-house Promoting Independence / Urgent Home Care service.
- Pathway 2 allows people to be discharged to a bed for ongoing care and rehabilitation to enable them to recover and plan for any longer term care needs – this service is provided by the community hospitals as well as the Council's units: Timberdine, Howbury and the Grange.
- Pathway 3 is for people who are unlikely to go home and is to provide an opportunity for further assessment and for them and their families to plan for their longer term care needs – this service is provided by local residential and nursing homes

Delayed discharges

5. These arrangements have been successful at increasing the number of complex discharges:
 - In December 2014 the number of complex discharges increased by 69% compared to the same month last year to an average of 14-15 patients a day.
 - In January 2015 the number of complex discharges increased by 48% compared to the prior year with an average of 16-17 patients per day.
6. However in the face of the additional pressures, the number of delayed discharges has increased. The number of days delayed up till the end of December 2014 is shown in the table below.

Delayed days for Worcestershire residents Apr-Dec 2014	Acute hospital beds	Non Acute and community hospital beds
Adult social care	695	3,109
NHS only	10,178	3,639
Both	1,444	522

Funding

7. Funding for hospital discharge pathways comes from a variety of sources. Much of it is part of core NHS expenditure. Other sources include the Better Care Fund,

Action ongoing

NHS winter pressures monies, and an additional award from the Department of Health to the Council.

8. The local NHS, the Council and the VCS are working together to respond to the additional demand – we are:
 - Supporting local command and control arrangements and strategic discussions about additional capacity
 - Increasing capacity in Hospital Social Work and Rapid Response Social Work Teams, increasing their hours to cover 7 days and using them flexibly across acute and community hospitals to complete assessments as quickly as possible.
 - Increasing capacity in Pathway 1: additional staff have been recruited or redeployed and an extra 6 people a day are currently being discharged with support at home.
 - Providing additional temporary capacity in Pathway 2 beds including opening of additional community hospital wards and additional beds at Howbury and the Grange.
 - Commissioning additional home care to allow people to move from acute and community hospitals and 'step down' arrangements into longer term care at home.
 - Piloting 7 day working with local home care providers so that they can take new referrals at weekends.
 - Piloting a voluntary sector scheme to support self-funders in NHS beds to help them plan and arrange their long term care.
9. The VCS has also received additional DH funding, which will be used to support:
 - A British Red Cross Rapid Response Enhanced Assisted Discharge scheme.
 - Scaled up Home from Hospital scheme.
 - Confused patient support service in hospital.
10. A review of discharge pathways is planned for 23 February and 09 March and partners continue to work together to ensure accurate and consistent presentation of data.

Implementing the 2015/16 Better Care Fund Plan – Section 75 Agreement

Agenda item 12

Date	3 March 2015																
Board Sponsor	Richard Harling																
Author	Sue Morgan																
Relevance of paper	<p>Priorities</p> <table border="0"> <tr> <td>Older people & long term conditions</td> <td>Yes</td> </tr> <tr> <td>Mental health & well-being</td> <td>Yes</td> </tr> <tr> <td>Obesity</td> <td>No</td> </tr> <tr> <td>Alcohol</td> <td>Yes</td> </tr> <tr> <td>Other (specify below)</td> <td>Yes</td> </tr> </table> <p>Partnership working through integrated commissioning</p> <p>Groups of particular interest</p> <table border="0"> <tr> <td>Children & young people</td> <td>Yes</td> </tr> <tr> <td>Communities & groups with poor health outcomes</td> <td>Yes</td> </tr> <tr> <td>People with learning disabilities</td> <td>Yes</td> </tr> </table>	Older people & long term conditions	Yes	Mental health & well-being	Yes	Obesity	No	Alcohol	Yes	Other (specify below)	Yes	Children & young people	Yes	Communities & groups with poor health outcomes	Yes	People with learning disabilities	Yes
Older people & long term conditions	Yes																
Mental health & well-being	Yes																
Obesity	No																
Alcohol	Yes																
Other (specify below)	Yes																
Children & young people	Yes																
Communities & groups with poor health outcomes	Yes																
People with learning disabilities	Yes																
Item for	Information and assurance																
Recommendation	<p>1. That the Health and Well-being Board is asked to:</p> <ul style="list-style-type: none"> a) Note the list of services to be commissioned under the Section 75 Agreement in 2015/16. b) Note the governance arrangements in place to monitor commissioning under the Section 75 Agreement. c) Note the financial contributions from partner organisations (subject to finalisation of allocations and contracts). 																
Background	<p>2. The Health and Well-being Board in January 2015 approved the revision of the Section 75 Agreement for 2015/16 to reflect the Better Care Fund Plan, other emerging priorities, operating models and commissioning intentions.</p> <p>3. Worcestershire's Better Care Fund Plan for 2015/16 was</p>																

signed off by the Health and Well-being Board at the meeting on 23 September 2014.

4. To implement the Better Care Fund Plan for 2015/16, partners are required to establish a Section 75 Agreement which incorporates commissioning arrangements for the schemes above.
5. The 2015/16 Section 75 Agreement should be viewed in the context of our longer term ambitions for integration as a set out in the Five Year Health and Care Strategy. In summary:
 - a. Segment the population using a predictive risk model.
 - b. Identify the 'high risk / high spend population.
 - c. Develop a capitated budget and commissioning strategy for this population, ensuring patient and carer engagement in designing the service models.
 - d. Commission fully integrated services that focus on prevention and care at home in order to avoid hospital admissions, based around primary care and recognising the contribution of the voluntary and community sector.
6. During 2015/16, we will be modelling the contract mechanisms needed to commission on the basis of (d) above with a view to recommending changes to the Section 75 Agreement for 2016/17.
7. The overall purpose of any Section 75 Agreement is to formalise partnership arrangements designed to jointly improve outcomes for patients and service users. A formal agreement under Section 75 of the NHS Act 2006 has been in place in Worcestershire since 2008.
8. It is proposed to revise the current Section 75 Agreement to incorporate the Better Care Fund Plan. This provides the opportunity to review the commissioning arrangements for services included in the current Section 75 Agreement. The Agreement will be amended to reflect emerging partnership priorities, operating models and respective commissioning intentions. The current Section 75 includes elements relating to adults and children (the Better Care Fund Plan is adults only). The opportunity has been taken to identify where services may no longer need to be commissioned under the Section 75 Agreement and remove these from the 2015/16 Agreement. It is important to note that removing service lines from the Agreement has no impact on the provision of services, but means that the governance arrangements for commissioning services sit outside the

formal partnership agreement, with individual organisations. (Organisations may still work together where appropriate).

9. In Worcestershire, the Section 75 Agreement incorporates three types of budget management:
 - a. Pooled - Includes the BCF, decision making is shared, budgets are managed by WCC and there are agreed arrangements for risk sharing.
 - b. Delegated – from the CCGs to be managed by WCC, with decision making, accountability and risk lying with the CCGs.
 - c. Aligned - WCC budgets managed alongside the CCG budgets with decision making, accountability and risk lying with WCC.
10. Reporting against the Section 75 Agreement is to Health and Well-being Board, via the Integrated Commissioning Executive Officers Group. Annex A sets out the governance arrangements.
11. Annex B sets out the service headings and the value of partner contributions to commissioning the services for 2015/16. Note that with the exception of Better Care Fund services, values are shown as at 2014/15 and are being updated. It specifically identifies those services agreed in the Better Care Fund Plan in September 2014. There are two proposed amendments to the allocation of funding to services included in the Better Care Fund Plan:
 - a. £522,000 of South Worcestershire CCG minimum contribution is allocated against palliative care services (instead of practice based social workers).
 - b. £865,000 currently proposed to support Demographic Pressures in Domiciliary Care, to be allocated to Resource Centres which better reflect the aims of the integration agenda.
12. Annex B also specifically identifies those services included in the 2014/15 Section 75 Agreement that will not be included in 2015/16. The change will not affect service delivery.

Reporting

2015/16 Section 75 Agreement

Annex A

Governance roles and responsibilities

Section 75 Governance

Body	Role
<p style="text-align: center;">Health and Wellbeing Board</p>	<ul style="list-style-type: none"> • Agree strategy • Agree BCF • Strategic oversight of S75
<div style="display: flex; justify-content: space-around;"> <div data-bbox="204 568 552 680" style="border: 2px solid blue; padding: 5px; text-align: center;"> <p>CCG governing bodies</p> </div> <div data-bbox="568 568 912 680" style="border: 2px solid red; padding: 5px; text-align: center;"> <p>WCC Cabinet</p> </div> </div>	<ul style="list-style-type: none"> • Key decisions in respect of their services • Corporate governance of finance, performance and quality in respect of their funding and services
<p style="text-align: center;">Accountable Officers (meeting as Integrated Commissioning Officers Executive Group)</p>	<ul style="list-style-type: none"> • Work up strategy and key decisions • Ensure implementation of strategy and key decisions • Operational governance of finance, performance and quality in respect of their funding and services
<p style="text-align: center;">Commissioners</p>	<ul style="list-style-type: none"> • Develop and consult on strategy • Implementation of strategy and key decisions • Oversight of commissioned services
<p style="text-align: center;">Service areas</p> <ul style="list-style-type: none"> • Children and families • Older people, physical and sensory impairments • Mental Health • Learning disabilities • Complex needs • Dementia • Carers • Prevention (adults) 	

Annex B - Services proposed to be commissioned under the 2015/16 Section 75 Agreement

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Service	1516 Proposals									Comments
	CCGs				Local Authority				Total Agreement	
	South Worcs	Redditch & Bromsgrove	Wyre Forest	Total	Local Authority	Better Care Fund	Public Health	Total		
£	£	£	£	£	£	£	£	£		
Adult Community Health Services	0	0	0	0	0	18,386,000	0	18,386,000	18,386,000	Better Care Fund 'health' schemes. 14-15 carried forward and new 15-16. This figure incorporates the 'Payment for Performance' element. Detail of all services and values was set out in the BCF Plan.
Adult Adult Recovery Services	1,027	0	0	1,027	1,496,000	6,230,000	0	7,726,000	7,727,027	Better Care Fund schemes including urgent homecare and Timberdine.
Adult Beds for Admission Prevention and Patient Flow	0	0	0	0	0	1,990,000	0	1,990,000	1,990,000	Better Care Fund schemes including 'Urgent and Unplanned' beds.
Adult Prevention	56,788	34,312	24,300	115,400	0	0	0	0	115,400	Commissioners clarifying whether this budget remains in the S75 Agreement for 15/16.
Adult Hospital and Rapid Response Assessment	13,991	8,453	5,978	28,422	1,148,900	898,000	0	2,046,900	2,075,322	To be removed from the S75 in 15/16. The majority of funding relates entirely to WCC Social Work teams (£8.6m in 14/15). BCF funded services are included in other headings.
Adult Older People Assessment and Care Management	0	0	0	0	0	0	0	0	0	Only GP Attached/Practice-based posts included. £522k BCF allocation is from SW minimum contribution which is now proposed to fund palliative care services- they This line to be amended.
Adult Practice-based Social Workers	0	0	342,000	342,000	353,400	522,000	0	875,400	1,217,400	Includes Access Centre.
Adult Access Services	0	0	0	0	363,000	352,000	0	715,000	715,000	c£41m of WCC funding to be removed from the S75 in 15/16. Only BCF included.
Adult Winter Pressures	0	0	0	0	0	1,200,000	0	1,200,000	1,200,000	In accordance with BCF conditions.
Adult Older people Care Act Eligible services	0	0	0	0	0	905,000	0	905,000	905,000	In accordance with BCF conditions.
Adult Carers	0	0	0	0	879,300	1,260,000	0	2,139,300	2,139,300	Now incorporates additional BCF funding.
Adult Care Act Implementation	0	0	0	0	0	1,808,000	0	1,808,000	1,808,000	In accordance with BCF conditions.
Adult Wheelchairs	883,933	528,431	374,101	1,786,465	0	0	0	0	1,786,465	Commissioned by ICU
Adult Integrated Community Equipment Service	477,103	289,062	204,053	970,218	1,118,000	456,000	0	1,574,000	2,544,218	REMOVE from S75 in 15/16. Combined funding of c£12m WCC core services.
Adult Social Care Capital	0	0	0	0	0	828,000	0	828,000	828,000	REMOVE from S75 in 15/16. c£48m of WCC core services.
Adult Disabled Facilities Grant	0	0	0	0	0	2,358,000	0	2,358,000	2,358,000	ADD to S75 in 15/16. Value?
Adult Counselling Services - R&B CCG only	0	115,149	0	115,149	0	0	0	0	115,149	To be incorporated in main Mental Health heading for 2015/16
Adult PD Assessment and Care management	0	0	0	0	0	0	0	0	0	REMOVE from S75 in 15/16. c£5m of WCC core services.
Adult Care Act Eligible Services - PD	0	0	0	0	0	0	0	0	0	REMOVE from S75 in 15/16. c£1m of WCC core services.
Adult LD Integrated Teams	0	0	0	0	1,527,700	0	0	1,527,700	1,527,700	To be incorporated in main Mental Health heading for 2015/16
Adult Care Act Eligible Services - LD	0	0	0	0	0	0	0	0	0	ADD to S75 in 15/16. Value is c£5.5m
Adult Learning Disabilities	2,564,211	1,539,205	1,090,814	5,194,230	325,900	0	0	325,900	5,520,130	REMOVE LINE - no funding shown
Adult Learning Disabilities - Complex Cases	0	0	0	0	0	0	0	0	0	REMOVE LINE - no funding shown
Adult MH Integrated Teams	0	0	0	0	2,594,300	0	0	2,594,300	2,594,300	REMOVE from S75 in 15/16. c£4m public health funding.
Adult Care Act Eligible Services - MH	0	0	0	0	0	0	0	0	0	Previously called 'integration project'
Adult Care Act Eligible Services - OAMH	0	0	0	0	0	0	0	0	0	
Adult MH Collaborative Payments	0	0	0	0	0	0	0	0	0	
Adult Adult Mental Health (includes OAMH) (see breakdown below)	25,022,396	14,717,683	10,446,475	50,186,554	0	0	0	0	50,186,554	REMOVE from S75 in 15/16. 14/15 ICU work on contracts now complete.
Adult Mental Health - Complex Cases	0	0	0	0	0	0	0	0	0	
Adult Substance Misuse	0	0	0	0	0	0	0	0	0	
Adult Supported Housing	0	0	0	0	0	0	0	0	0	
Adult Sexual Health	0	0	0	0	0	0	0	0	0	
Adult Locality prevention projects	0	0	0	0	0	0	960,000	960,000	960,000	
Adult Social Impact Bond	0	0	0	0	0	0	135,000	135,000	135,000	
Adult Funded nursing care	3,848,674	2,299,875	1,626,551	7,775,100	0	0	0	0	7,775,100	
Adult ICU team budget	144,000	86,651	55,276	285,927	1,214,000	0	383,000	1,597,000	1,882,927	
Adult ICU contracts	0	0	0	0	0	0	0	0	0	
Total Adult Section 75	7,989,727	5,027,550	3,873,559	16,890,836	11,349,764	37,193,000	1,478,000	50,020,764	66,911,600	

Service
Children's CAMHS Service
Children's CAMHS Service - LAC (ISL)
Children's Paediatric Physiotherapy
Children's Paediatric Occupational Therapy
Children's Paediatric Speech Therapy
Children's Audiology
Children's Packages of Care
Children's Children's Respite Care (Ludlow Rd)
Children's Specialist School Nursing
Children's Community Paediatrics
Children's School Nursing
Children's Child development teams
Children's Health promotion
Sub Total Provider Arm
Children's Holiday Support Children with Disability
Children's Homestart
Children's Worcester Young Carer's Project
Sub Total Voluntary Sector
Children's Looked after Children
Children's Children's Complex Case
Children's Children's Palliative Care Local Auth only from 14/15
Children's Youth Offending Scheme
Children's CAMHS
Children's Speech Language & Communication needs (SCLN)
Children's Health Lifestyles
Children's Children with Disabilities
Children's Short Term Breaks
Children's Staffing
Total Children's Section 75
Total Adults & Children's Section 75

CCGs				Local Authority				Total Agreement		
South Worcs	Redditch & Bromsgrove	Wyre Forest	Total	Local Authority	Better Care Fund	Public Health	Total			
2,079,244	1,242,506	878,743	4,200,493	0	0	0	0	4,200,493		
109,434	65,395	46,250	221,079	0	0	0	0	221,079		
675,078	403,410	285,306	1,363,794	0	0	0	0	1,363,794		
506,937	302,933	214,245	1,024,115	0	0	0	0	1,024,115		
1,051,634	628,431	444,448	2,124,513	0	0	0	0	2,124,513		
223,998	133,856	94,667	452,521	0	0	0	0	452,521		
114,064	68,162	48,206	230,432	0	0	0	0	230,432		
307,384	183,685	129,909	620,978	0	0	0	0	620,978		
123,343	73,707	52,128	249,178	0	0	0	0	249,178		
929,320	555,339	392,755	1,877,414	0	0	0	0	1,877,414		
0	0	0	0	0	0	2,094,000	2,094,000	2,094,000		
0	0	0	0	0	0	982,393	982,393	982,393		
0	0	0	0	0	0	215,148	215,148	215,148		
6,120,436	3,657,424	2,586,657	12,364,517	0	0	3,291,541	3,291,541	15,656,058		
21,540	13,253	9,204	43,997	0	0	0	0	43,997		
0	0	0	0	0	0	65,000	65,000	65,000		
12,677	7,800	5,417	25,894	0	0	0	0	25,894		
34,217	21,053	14,621	69,891	0	0	65,000	65,000	134,891		
9,900	5,916	4,184	20,000	0	0	0	0	20,000		
836,547	429,128	298,164	1,563,839	0	0	0	0	1,563,839		
229,095	140,920	97,899	467,914	0	0	0	0	467,914		
32,946	20,281	14,088	67,315	0	0	0	0	67,315		
0	0	0	0	839,019	0	0	839,019	839,019		
0	0	0	0	189,000	0	0	189,000	189,000		
0	0	0	0	0	0	0	0	0		
0	0	0	0	4,051,405	0	0	4,051,405	4,051,405		
29,470	18,130	12,595	60,195	0	0	0	0	60,195		
0	0	0	0	0	0	0	0	0		
7,292,611	4,292,852	3,028,208	14,613,671	5,079,424	0	3,356,541	8,435,965	23,049,636		
0	0	15,282,338	9,320,402	6,901,767	31,504,507	16,429,188	37,193,000	4,834,541	58,456,729	89,961,236

Comments
Remove from 15/16 Section 75 Agreement. Public Health commissioned
Remove from 15/16 Section 75 Agreement. Public Health commissioned
Remove from 15/16 S75. Now 'Low level early help'. Funding delegated to early help commissioner.
REMOVE (£100k) DSG funding and governance is through Learning and Achievement Section within CHS Directorate.
£2,244,588 to be removed from S75 in 2015/16. Relates to social work team budget and WCC overnight short break units and is 'business as usual' through WCC social care.
REMOVE £564k (staff shown as fully WCC funded). Part of internal rebasing of staff budgets.

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