



wellconnected

joining up your health and care
in Worcestershire





The Better Care Fund Plan

Worcestershire
Health and Wellbeing Board
23rd September 2014

Context



- Better Care Fund (BCF) announced in June 2013
- To transform integration of health and social care through a single pooled budget
- Minimum contributions to a pooled budget (the ‘fund’) are mandated – this is **not ‘new’ funding**
- Revised Section 75 agreement (the legal arrangement to transfer funding into a ‘pool’ and agree how it is managed) will need to be put in place for April 2015
- The BCF is an integral part of our Five Year Strategy for Health and Social Care

Our 5 year health and care strategy



Our vision for health and care in Worcestershire

You plan your care with people who work together with you to understand you and your needs, allow you control and co-ordinate and deliver services that support you to achieve the outcomes important to you.

- A seamless health and social care system delivering high quality, timely and effective care;
- As much care and support provided in or as close to people's homes as possible;
- Individuals and families will be able to take greater responsibility and greater control over their own health and care;
- Specialist hospital services, primary care and community care provided from high quality safe environments, with appropriate qualified, supported and skilled staff working across 7 days.
- Investment in prediction, prevention and early intervention where we can be confident that this will reduce future demand on services;
- Residents helped with technology supported self care to ensure that specialist resources are focused more effectively on those in most need;
- Reduced differences between social groups in terms of health and social care outcomes;
- A financially sustainable model of care that targets the use of resources in those areas that will have greatest impact.

Submission and Assurance Requirements



- As delegation from July HWB: Chairman authorised submission of plan on 19th September
- Now subject to the national assurance process.
- Additional and more detailed information was required than in the April submission
- Payment for Performance (P4P) element based entirely on achievement of a planned reduction in non-elective admissions. The value and use of the P4P is nationally mandated.
- The 2014/15 element of the plan is unchanged from the previously agreed plan – monitoring reports are provided to the Health and Wellbeing Board.

2015/16 - Funding Sources



In 2015/16 the Worcestershire BCF will comprise the following contributions:

Organisation	Minimum contribution (15/16) (£,000)
Worcestershire County Council	
Disabled Facilities Grant	2,358
Capital Spending Social Care	1,328
NHS South Worcestershire CCG	16,866
NHS Wyre Forest CCG	6,572
NHS Redditch and Bromsgrove CCG	10,069
BCF Total	37,193

2015/16 – Funding Allocation (1 of 4)



Consistent with our Five Year Strategy for Health and Care we have allocated the pooled budget for 2015/16 to commission services in the following groups:

Summary	2015/16 (£'000)
Admission Prevention	11,796
Facilitated Discharge	8,254
Independent Living	7,459
Payment for Performance and ring-fenced fund	9,684
BCF Total	37,193

2015/16 – Funding Allocation (2 of 4)



Examples of the schemes under each heading are given below:

- Admission Prevention
 - Urgent and unplanned beds
 - Virtual wards
 - Enhanced care teams
 - Recovery project – urgent homecare



- Facilitated discharge
 - Discharge to assess beds
 - Enhanced interim packages of care
 - Timberdine nursing and rehabilitation unit
 - Resource centres
 - ‘Plaster of Paris’ placements

2015/16 – Funding Allocation (4 of 4)



- Independent living
 - Demographic pressures in domiciliary care
 - Integrated community equipment
- And the nationally mandated elements
 - Carers
 - Implementation of the Care Act
 - Disabled Facilities Grant

Payment for performance



Combined total of Performance and Ring-fenced Funds	9,684	Worcestershire's 'share' of the national £1bn
Financial Value of Non Elective Saving/ Performance Fund	2,657	The value of a proposed 3.5% planned reduction in non-elective admissions
Ring-fenced Fund	7,027	The balance of the P4P fund – which remains with the CCGs to commission out of hospital care.

2015/16 BCF requirements



The plan sets out how the Health and Wellbeing Board will meet the six national conditions

Plans to be jointly agreed

Protection for social care services (not spending)

7 day services in health and social care to support patients being discharged and prevent unnecessary admissions at weekends

Better data sharing between health and social care based on the NHS number

Joint approach to care assessments and planning – with accountable professional for integrated packages of care

Agreement on the consequential impact of changes in the acute sector

Population segmentation

- Developing our strategic plan to use BCF to support high risk individuals who require the most funding and for whom benefits of integration are greatest
- Identified four groups - require a different approach to the commissioning and provision of services

1

Normally healthy

but sometimes need some form of health or social care support, either through a planned or an emergency event, from which they fully recover and return to their previous way of life

2. One off significant event that results in them from moving from group one to group four and remaining there for a considerable time or for the rest of their lives.

3. “Rising tide” of health problems (which could be preventable) resulting in them moving from group one to group four and remaining there for a considerable time or for their rest of their lives

4

Normally unwell

and require some form of on going health and social care support to live their everyday lives.