

8 Better Care Fund and the benefits of being a National Integration Pioneer

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Recommendation	<p>a) That the Health and Well-Being Board formally approves the submission of the 2015/16 Better Care Fund templates (Appendix 1 and Appendix 2) made to NHS England on 4 April and subject to formal ratification by WCC Cabinet and the three CCG Governing bodies in due course.</p> <p>b) That further iterations and details for the 2015/16 BCF plan are developed over the coming months.</p>
Background	<ol style="list-style-type: none">1. In the June 2013 Spending Round the Chancellor of the Exchequer announced the creation of an Integration Transformation Fund (ITF), to support the integration of health and social care. The funding is described as: “a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities”. It was renamed the Better Care Fund in December 2013.2. The 2015/16 fund, nationally worth £3.8bn, is made up of:<ul style="list-style-type: none">• £1.1bn already transferred in 2014/15 from the NHS to local authorities (Social Care in Support of Health monies).• £1.9bn further transfer from the NHS in 2015/16.• £0.3bn already in CCG baselines for Reablement.• £0.13bn already in CCG baselines for Carers' Grant.• £0.354bn capital funding from DH and DCLG – including the Disabled Facilities Grant (£220m).3. The Worcestershire Better Care Fund allocations are as follows:<ul style="list-style-type: none">• 2014/15 £10.485m• 2015/16 £33.507m (currently revenue funding) plus £3.686m (currently capital funding) = £37.193m.

Better Care Fund for Worcestershire 2015/16

4. It is important to note that the funding brings together NHS and Local Government resources already committed to existing core activity. It is not new money. Councils and CCGs will, therefore, have to redirect funds from these activities to invest in new shared programmes that deliver better outcomes for individuals.
5. Six national conditions have been established for the Better Care Fund:
 - Plans to be jointly agreed
 - Protection for social care services (not spending)
 - As part of agreed local plans, 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
 - Ensure a joint approach to assessments and care planning and 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.
6. The plans for Better Care Fund 2015/16 (as an enabler to the delivery of our agreed vision) have been developed through discussions of the Health and Well-being Board and its Strategic Partnership Group at formal and development meetings.
7. Following approval of the draft Fund plan in February, two workshops were held in March 2014 with members of the Health and Well-being Board and the Health and Social Care Strategic Partnership Group to identify the scale and scope of the Better Care Fund 2015/16.
8. An NHS England facilitated 'Windmill' simulation involving over 70 representatives from all aspects of Worcestershire's health and social care economy took place in April. The workshops and Windmill strengthened the consensus around moving at pace towards an integrated health and adult social care budget for those individuals with greatest need. Discussions will now progress to explore the key outcomes for patients, service users and carers, how this would work in practice and implications for governance arrangements and the county's provider network.

9. The scale of the Fund for 2015/16 is as follows;

- Integrated health and social care services for older people with complex needs £30,939,000
- Carers £1,260,000
- Disabled Facilities Grant £2,358,000
- Contribution to cost of implementing Care Bill £1,308,000
- To fund cost of systems development & changes required to meet needs of Care Bill £500,000
- Funding towards local authority supported living and Extra Care strategy £828,000
- **Total £37,193,000.**

10. For each of the national conditions outlined in paragraph 5, assurance of compliance will be provided to the Health and Well-being Board:

- Plans to be jointly agreed
Through HWB, SPG, Windmill event and on-going engagement
- Protection for social care services (not spending)
Recognising rising demand, pooling our resources will enable greater efficiency to maintain outcomes. Existing Future lives and CCG transformation programmes are now integrated projects in each locality
- As part of agreed local plans, 7-day services in health and social care to support patients being discharged and prevent unnecessary admissions at weekends
Commitment to extended primary care and integrated teams 7/7- developing through our Urgent care strategy
- Better data sharing between health and social care, based on the NHS number
Full agreement to principle - existing high % compliance
- Ensure a joint approach to assessments and care planning and ensure that, where funding is used for integrated packages of care, there will be an accountable professional
Central to 2020 vision and integrated primary/community/social care teams. Developing proposal for single 'complex case management'
- Agreement on the consequential impact of changes in the acute sector
Investment in enhanced community services is predicated on ambition to reduce avoidable emergency admissions. 5:40 cohort impact on acute capacity/activity will be modelled.

Benefits of being a national pioneer

11. In addition, the Health and Well-being Board can be assured that due consideration has been taken with regard to:
 - The extent of alignment with both the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy
 - How well aligned the plan is with local plans for housing and how the Disabled Facilities Grant (DFG) is used
 - The use of technology as an enabler for closer service integration and joint working
 - How outcomes and experience of care will be improved
 - How the plan is deliverable, affordable and increase VFM
 - How the plan does not result in a negative impact on the level and quality of mental health services
 - How patients and public engage in the development of the plan
 - How the plan has a risk mitigation plan, covering the impact on existing NHS and social care delivery and the steps that will be taken if activity volumes do not change as planned
 - How all partners can meet statutory responsibilities
 - How clearly the plan articulates the amount of money identified for Care Bill costs, and whether this is proportionate to the £135m allocated nationally.
 - The allocation of carer-specific support, including carers' breaks, and how supporting carers will help to meet key outcomes.
12. In the publication '*Integrated Care and support: our shared commitment*' the Department of Health (with all major national partners) set an ambition to transform people's experience of health and care by integrating services; putting individuals at the centre of planning their own care; and making divisions between organisations invisible to service users. The opportunity to be 'Integration Pioneers' was received with eagerness by senior leaders, patient and carer representatives and staff across our organisations in Worcestershire.
13. Over the last few months a number of benefits and opportunities afforded by our Pioneer status have arisen. Some of the most significant are summarised below;
 - a. Appointment of a **Senior Responsible Officer (SRO)** for the whole of the Pioneer support programme. The SRO will oversee all elements of the programme, represent national partners and pioneers on the programme board, update Ministers and influence policy

and delivery of better integrated care.

- b. Appointment of a **Senior Sponsor**. The Sponsor will support Worcestershire's 2020 vision, identify blockages or delays and escalate them to the SRO for action, help us to navigate national systems, provide advice and act as an additional conduit between national and local levels to inform priorities for the Pioneer programme as a whole and shape national policy.
- c. **Systems Leadership Support** from Public Health England through the expertise of an experienced Chief Executive and a leading practitioner in local government leadership development in England. Their purpose is to support the cross organisational leadership team here in Worcestershire.
- d. Support with developing **integrated Information and Communication Technology solutions**. Within Worcestershire there are currently multiple organisations running multiple IT systems many of which are operating in silos. An independent solution architect has been appointed from the Health and Social Care Information Centre (HSCIC) as part of our Pioneer support package to identify technical solutions to information sharing and rationalisation of the information systems currently in use.