

REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting: 7 January 2016

Subject: **INFORMATION REPORT – Better Care Fund (BCF) progress report**

Responsible Officer: Bernie Flaherty, Director of Adult Social Care, Harrow Council & Javina Segal, Chief Operating Officer, Harrow CCG

Exempt: No

Wards affected: All

Enclosures: n/a

Section 1 – Summary

This report sets out progress on the BCF in the first 2 quarters of 2015/16 and looks at the feedback from the PA Consulting review.

FOR INFORMATION

Section 2 – Report

The Health & Wellbeing Board agreed the Harrow BCF at its meeting on 8th January 2015. This report provides an update on progress made over the first 2 quarters of the year 2015/16.

The agreed value of the Better Care Fund in Harrow is £14.373m, £1.190m of which reflects the continuation of historic capital funding in relation to Disabled Facility and Community Capacity Grants. The balance of £13.183m is allocated to three agreed schemes.

A section 75 agreement between the Council and the Clinical Commissioning Group (CCG) is in place to underpin the agreement.

Agreed Schemes

The BCF agreed 3 schemes.

1. Whole Systems Integrated Care Programme - £3.023m

This included the expansion of the Integrated Care Pilot to provide an end to end case management service, together with the roll out of multi-disciplinary teams to provide personalised long term care and support for individuals at high risk of hospital admission, beginning with older people with one or more long term conditions.

2. Transforming Community Services - £4.749m

This included better aligning CCG community services to primary care, aligning CCG Short Term Assessment, Reablement and Rehabilitation Service (STARRS) better with community care, establishing a single point of access to community services and the CCG redesigning the pathway for the urgent assessment of mental illness with a focus on avoiding acute admissions and delivering care in community setting.

Through the re-commissioning and re-configuration of community services, services provided in the community will be better aligned with GP practices and the range of services provided will be increased

3. Protecting Social Care - £5.411m

To ensure that the social care provision essential to the delivery of an effective, supportive whole system of care is sustained. The scheme includes access and assessment from the acute and community sector, a Reablement service, a diverse range of services to meet eligible needs through personal budgets and comprehensive and effective safeguarding and quality assurance services, including support to carer's.

National Conditions

The BCF also agreed a plan to deliver the national conditions as set out by NHS England. The conditions are as follows:

- 1) Protection of social care services
- 2) 7 day services to support patients being discharged
- 3) Data sharing - NHS Number being used as the primary identifier for health and care services and appropriate agreements in place
- 4) Joint assessments and lead professionals in place for high risk populations
- 5) Agreement on the impact of changes with the acute sector

NHS England quarterly monitoring

As part of the overall assurance process for the BCF all areas are required to complete a joint progress report, the quarter 2 report was submitted to NHSE 27 November 2015. This confirmed steady progress on all the agreed schemes and national conditions. This progress suggests that we are on course to deliver by the end of the BCF period and work has now started to design the 2016/17 BCF. The new BCF will build on the successful delivery of the 2015/16 schemes.

In August 2015 PA Consulting were commissioned by NHSE completed a review of Harrow's BCF. The headlines from this review are as follows:

- Harrow's original assessment of its readiness for Better Care Fund implementation represented relatively low levels of confidence in its ability to deliver the Better Care Fund initiatives. However, since completing this survey there has been quantitative improvement (reduction in emergency admissions and delayed transfers of care) as well as qualitative improvement (working relationships) reported by the organisations.
- There is a superordinate challenge for the Health and Wellbeing Board in considering how it could improve leadership of system wide planning (strategic, financial and operational) including obtaining the correct information to drive its decision making and delivery improvement for the local residents.
- There are some crucial steps to consider, especially in joint financial planning that would provide mutual benefit in achieving long-term financial resilience in Harrow. There continues to be potential for dissonance between health and social care regarding the transfer of funding if mechanisms to improve transparency of value for money (in either investing in new or sustaining existing services) are not better established. Although improvements can be made we have seen

evidence that the health and social care system has plans in place to drive this.

Section 3 – Further Information

n/a

Section 4 – Financial Implications

Both the Council and CCG continue to face financial challenges and optimising the allocation of BCF resources proved very difficult for both organisations. The HWBB at its meeting on 8th January 2015 noted that the minimum funding transfer to protect social care from 2016/17 would be £6.529m.

The national picture for the finances of the public sector remains very challenging. Projections by London councils, based on the governments spending plans, are for reductions of over 30% over the next three years. As a result, this is likely to translate into further significant grant cuts in the coming years although projections show on-going pressures on the Council's budgets, driven largely by legislative pressures and growing complexity of required care levels.

In the coming months both organisations will be reviewing commissioning intentions and financial plans. Cabinet received a report in July which set out an estimated budget gap of £52.4m for the three year period 2016/17 to 2018/19, and for indicative purposes allocated targets to directorates. This resulted in a savings target of £28.240m for the former Community Health and Wellbeing division, which includes Adult Social Care where the majority of these savings would need to be identified.

Cabinet received a draft budget at its meeting in December with the final budget going to Cabinet and Council in February 2016.

Section 5 - Equalities implications

Was an Equality Impact Assessment carried out? No

Section 6 – Council Priorities

The Council's vision:

Working Together to Make a Difference for Harrow

The BCF will improve the following priorities of the organisation.

- Making a difference for the vulnerable

- Making a difference for communities

STATUTORY OFFICER CLEARANCE (Council and Joint Reports)

Name: Donna Edwards	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 29.12.15		

Ward Councillors notified:	NO
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Section 7 - Contact Details and Background Papers

Contact: Jonathan Price, Head of Strategic Commissioning, People Directorate, ext. 2963