

REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting:	2 November 2017
Subject:	INFORMATION REPORT: Better Care Fund 2017/19
Responsible Officer:	Chris Spencer, Corporate Director People Services Paul Jenkins, Chief Operating Officer, Harrow CCG (Interim).
Public:	Yes
Wards affected:	All
Enclosures:	Appendix 1 Harrow Better Care Fund Plan 2017-19 Appendix 2 Delayed Transfers of Care Target

Section 1 – Summary and Recommendations

This report sets out the agreed 2017/19 Better Care Fund Plan, together with further actions around the wider whole systems financial challenges.

For Information:

The Board is requested to:

- 1) Note the Better Care Fund (attached at Appendix 1) Plan, submitted to NHS England on 11th September 2017 in accordance with the mandated national deadline.
- 2) Note that subject to final sign off by NHSE the HWBB will be required to submit a quarterly return on progress of the plan. In addition the BCF Partners will be required to undertake a mid-point review to assess the impact of the plan

Section 2 – Report

Background

NHS England, the Department of Health (DH) and Department for Communities and Local Government (DCLG) published the Integration and BCF planning requirements for 2017-19 on 4th July 2017.

The document set out the detailed requirements for plans (including the CCG minimum BCF allocations) , based on the 2017-19 Integration and BCF policy framework published by the DH and DCLG on 31 March 2017. This includes detail on how the local health and care economy will jointly work towards implementing the 8 ‘high impact changes’ that support fully integrated working by April 2020.

The Better Care Support team (BCST) subsequently published draft guidance for officers involved in assurance process which set out the Key Lines of Enquiry that will be used to assure plans against.

The deadline for submitting final BCF plans is 1st November. Assurance will take place over one round for 2017-19, so plans should be agreed by the local Health and Wellbeing Board (HWB).

Government action on delayed discharges from hospital

The Government published a Written Ministerial Statement setting out the measures that it is putting in place to address delayed discharges from hospital in advance of this winter. These measures included a dashboard that reflects how local areas across England are progressing in their work to improve the interface between health and social care.

Indicative metrics for reducing delayed discharges from hospital

The Government published ambitions for reducing delayed transfers of care (DToCs) for each HWB in England, with expected reductions in both social care delays and NHS delays, based on local circumstances.

In light of the Government’s emphasis on managing transfers of care and DToCs, all areas were required to submit their indicative metrics for reducing DToCs (including ambitions for reductions in both social care attributable and NHS attributable delays) by 21st July.

Current situation

Attached at Appendix 1 is the submitted BCF Plan for Harrow for 2017-19.

The 2017-19 BCF plan sets out how the national conditions set out by NHS England will be delivered. The conditions are as follows:

- A jointly agreed plan.
- NHS contribution to social care is protected.
- Agreement to invest in NHS – commissioned out of hospital services.
- Implementation of the High Impact Change Model for Managing Transfers of Care.

In addition the plan aims to develop further our work on the enablers that support our approach to integrated working:

- Delivery of 7 days services across health and social care
- Improving data sharing between health and social care
- Developing a joint approach to assessments and care planning.

The plan comprises, and funds, the following revenue and capital schemes as follows:

	2017/18 £000	2018/19 £000
Transformation of Community Services	7,413	7,604
Whole Systems Integrated Care	2,464	2,537
Protecting Social Care	6,106	5,889
iBCF	3,628	4,643
Disabled Facilities Grants	1,293	1,406
TOTAL BCF Plan	20,904	22,079

The plan for 2018-19 has been uplifted by the required inflationary amounts, however the overall funding for social care has been reduced.

A section 75 agreement underpins the plan and enables the transfer of the funding from NHS England.

Further Actions

Recognising the financial challenges of the health and social care economy both organisations have committed to a mid term review. As a result, the revenue proposals indicate an agreed contribution of £6.106m for 2017-18 and £5.889m in 2018-19 – whilst the minimum contribution has been uplifted in line with the planning guidance, this funding is lower than the 2016-17 funding assumed within the Council's budget.

The mid term review is expected to consider the non-recurrent funding in relation to the Discharge to Assess pilot, and further protection of social care in light of the final approved CCG budget.

Financial Implications

Both the Council and CCG continue to face financial challenges and optimising the allocation of BCF resources remains a key priority of the plan. The HWBB should note that the amount of funding transferring to the Local Authority for 2016/17 was agreed at £6.558m.

The national picture for the finances of the public sector continues to remain very challenging. Projections by London councils based on the government spending plans are for additional reductions of over 30% over the next two 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 Councils budgets driven largely by the statutory responsibility on the council to meet the increase in demand relates to individual with complex care needs requiring higher intensity care provision. This national picture is reflected locally as the outturn position reported to Cabinet in June reported an overspend of £2.7m on the Adult Social Care budget.

Financial models to support the development of the local and NWL STP are being jointly developed by CCG CFOs. These plans are expected to assist in contributing to and achieving financial balance for health budgets. These plans will be presented as they are developed for consideration and approval through the relevant governance processes (CCG & LA), to ensure that any proposals can be delivered within the existing MTFs and financial plans.

The CCG has developed a recovery plan that has been submitted to NHSE. For 2017/18 the CCG is planning for £21.2m in year deficit ((6.5)% of recurrent resource limit). To deliver this plan the CCG will need to deliver a £17.5m QIPP (savings) plan.

In February, Council approved the budget for 2017/18, which included growth of £4.629m for Adult social care (funded by the 3% precept) to fund these underlying pressures and assumed the continuation of the BCF funding for the protection of social care at the 2016/17 levels given the commitment to steady state funding.

Equalities implications

Was an Equality Impact Assessment carried out? No

Council Priorities

The Council's vision:

Working Together to Make a Difference for Harrow

The Better Care Fund aims, through joint working between Health and the Council, to make a difference both for the vulnerable and for families.

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Name: Donna Edwards

on behalf of the*
Chief Financial Officer

Date: 25 October 2017

Ward Councillors notified:

NO

Section 4 - Contact Details and Background Papers

Contact: Donna Edwards, Finance Business Partner Peoples Directorate,
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Background Papers: