

Health and Wellbeing Board Supplemental Agenda

Date: Tuesday 8 June 2021

Agenda - Part I

10. **Integrated Better Care Fund (Pages 3 - 12)**
11. **Annual Public Health Report (Pages 13 - 18)**

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DRAFT FOR BRIEFING

REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting:	8th June 2021
Subject:	Better Care Fund 2020/21 and Planning for 2021/22
Responsible Officer:	Lisa Henschen Borough Director (Harrow), NW London CCG Angela Morris, Director of Adult Social Services
Public:	Yes
Wards affected:	List Ward(s) affected. All Harrow Wards
Enclosures:	Annexe A: 2020/21 NWL CCG and Council Schemes Annexe B: 2020/21 BCF Performance Report

Section 1 – Summary and Recommendations

This report provides the Health and Wellbeing Board with an update of the Better Care Fund Performance for 2020/21, and gives information on the approach being developed by Harrow Council and North West London CCG (NWL CCG) for the 2021/22 Better Care Fund.

Recommendations:

The Board is requested to:

- 1) Note the schemes funded by the Better Care Fund in 2020/21 and the Performance submission.
- 2) Note the approach to develop schemes for 2021/22

Section 2 – Report

Introduction

1. This report outlines the National context for the Better Care Fund and details about the NHS Better Care Fund (BCF) 2020-21 projects and the planning for 2021-22 and beyond.

National and Local Context

2. The Better Care Fund was established by the Government to provide funds to local areas to support the integration of health and social care and to seek to achieve the National Conditions and Local Objectives.
3. Since 2015, the Government's aims around integrating health, social care and housing, through the Better Care Fund (BCF), have played a key role in the journey towards person-centred integrated care. The aims have provided a context in which the NHS and local authorities work together, as equal partners, with shared objectives. The plans produced are presented and agreed by the Health and Wellbeing Board and represent a single, local plan for the integration of health and social care.
4. The Government's policy for integration continues:
 - the NHS Long Term Plan outlines objectives for joined-up care across the system with commitments to increased investment in primary medical and community health services to support new service models including an urgent response standard for urgent community support; integrated multi-disciplinary teams; NHS support to people living in care homes; the NHS Personalised Care model; an integration index; reducing Delayed Transfers of Care; and supporting local approaches to blend health and social care budgets, amongst other initiatives.
 - the Department of Health and Social Care published the White Paper Integration and innovation: working together to improve health and social care for all, on 11 February 2021, which sets out legislative proposals for a health and care Bill. The White Paper brings together proposals that build on the Long Term Plan with additional ones relating to the Secretary of State's powers over the system and targeted changes to public health, social care, and quality and safety matters.
5. In accordance with the Government's integration of health and social care, Harrow is now part of the North West London Integrated Care System (ICS) across 8 local authority and CCGs. Locally the Integrated Care Partnership (ICP) is established through the Harrow Health and Care Executive (HHaCE) and Joint Management Board, with representatives from the PCNs, health providers, VCS and the local Authority.

6. The Council and NWL CCG have developed BCF schemes that contribute to developing integration across health and social care which have been agreed by the Health and Wellbeing Board. As the integration agenda progresses, it is proposed that there is consideration of the role of the ICP and HHaCE

Government's Response to BCF and Covid

7. In response to the covid pandemic, the NHS have revised the approach to BCF. Health and Wellbeing Boards (HWBs) were advised that BCF policy and planning requirements would not be published during the initial response to the COVID-19 pandemic and that they should prioritise continuity of provision, social care capacity and system resilience and spend from ringfenced BCF pots based on local agreement in 2020 to 2021, pending further guidance. Given the ongoing pressures on systems, Departments and NHS England and NHS Improvement have agreed that formal BCF plans would not have to be submitted to NHS England and NHS Improvement for approval in 2020 to 2021.
8. HWB areas must, however, ensure that use of the mandatory funding contributions (Clinical Commissioning Group (CCG) minimum contribution, improved Better Care Fund (iBCF) grant and the Disabled Facilities Grant) has been agreed in writing, and that the national conditions are met.
9. HWBs will be required to provide an end of year reconciliation to Departments and NHS England/ Improvement, confirming that the national conditions have been met, total spend from the mandatory funding sources and a breakdown of agreed spending on social care from the CCG minimum contribution.
10. During 2020 to 2021, additional funding was made available to support the Hospital Discharge Service Policy, providing fully funded care for people discharged from hospital with additional care and support needs from 19 March 2020 to 31 August 2020, and up to 6 weeks reablement or rehabilitation from 1 September 2020 to 31 March 2021. HWB areas were asked to place the additional funding into a pooled fund governed by a section 75 agreement.
11. The Spending Review 2020 confirmed that the iBCF grant will continue in 2021 to 2022 and be maintained at its current level (£2.077 billion). The Disabled Facilities Grant will also continue and will be worth £573 million in 2021 to 2022.
12. The CCG contribution will again increase by 5.3% in line with the NHS Long Term Plan settlement.
13. The Policy Framework and Planning Requirements will be published in early 2021.

BCF in Harrow

14. Harrow Council and NWL CCG worked collaboratively to develop the joint Better Care Fund submission for 2019-20. The core elements of the submission were;
 - The promotion of independent living and,
 - The development of the Harrow Integrated Care System (ICS).
15. In reviewing the BCF activity and outcomes for 2019 - 20, both Harrow Council and NWL CCG considered that the approach to develop the BCF service model for 2020-21 should be more aligned, build upon the successes of 2019, seek to incorporate elements from the recently developed Health and Wellbeing Strategy and underpin the work to establish the Harrow ICP. However, in the context of covid and the guidance to HWBs, the schemes have been rolled forward. The 2020-21 schemes are presented at Annexe A and the performance return at Annexe B.
16. The Council and CCG agreed their BCF schemes for 2020-21 and the Hospital Discharge Service Policy as part of the s75 agreement and in accordance with Government requirements.

Harrow Council and NWL CCG BCF Schemes for 2021-22

17. Although the BCF Policy Guidance has yet to be published, it is proposed that the joint approach for 2021-22 will consider how the BCF schemes are aligned to the ICP Out of Hospital Plan with a focus on prevention programmes as well as core BCF delivery objectives. Establishing a shift towards prevention to evolve and develop over future years.
18. Harrow Council and NWL CCG will establish a task and finish group to develop the proposals for 2021-22 and metrics for the schemes.
19. In addition, it is also proposed that the governance arrangements will be reviewed to include the ICP HHaCE. This approach will contribute to the Council and CCG increasing collaboration and exploring joint commissioning within the ICP.

Financial Implications

20. In accordance with BCF conditions, all funding elements have been jointly agreed by local authority and CCG partners with the relevant amounts included in the respective organisational budgets.
21. The value of the BCF in 2019-20 totaled £23.474m.
22. The value of the pooled funds for 2020-21 total £24.460m and are funded as follows:
 - a. CCG minimum contribution of £16.271m
 - b. Local authority contributions of £8.189m
 - i. Disabled Facilities Grant (DFG) of £1.721m

ii. Improved Better Care Fund (iBCF) of £6.468m

23. Appendix A details the schemes, totaling £24.460m funded by the BCF which are summarised as :
- a. £9.835m Harrow CCG schemes
 - b. £14.625m Local authority schemes

24.

A similar amount is expected to be pooled in 2021-22 with the CCG minimum contribution being uplifted by 5.3% in line with the NHS Long Term Plan settlement, with the Council grants confirmed within the 2021-22 Local Government settlement at 2020-21 levels.

25. Areas can agree to pool additional funds into their BCF plan and associated Section 75 agreement. The mandatory contributions for 2020-21, including the NWL CCG minimum funding will be determined following guidance from NHS England.

Legal Implications/Comments

26. Nil

Risk Management Implications

27. Each scheme within the BCF Plan has been risk assessed as part of ongoing delivery. Risk Assessments are available for each.

Equalities implications / Public Sector Equality Duty

28. Each scheme has undergone Quality Impact and Equality Impact Assessment prior to implementation. Assessments are available from NWL CCG on request.

Council Priorities

29. The decisions contribute to the Council priorities:
- Tackling poverty and inequality
 - Addressing health and social care inequalities

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

Name: Donna Edwards	<input type="checkbox"/>	on behalf of the* Chief Financial Officer
Date:		
Name: Sharon Clarke	<input type="checkbox"/>	on behalf of the* Monitoring Officer

Date: _____

Name: Paul Hewitt



Corporate Director people
Services

Date:

Section 4 - Contact Details and Background Papers

Contact: Johanna Morgan, Director People Services Strategy and Commissioning Johanna.morgan@harrow.gov.uk

Background Papers: None

NWL CCG and Harrow Council BCF Schemes 2019-20 and 2020-21

Table 1: NWL CCG Schemes

Scheme Name	2020-21	Description
Supported Discharge Services including Home First	£1,179,364	Reducing length of stay for complex patients in Acute Settings
Admission Avoidance Schemes including Rapid Response	£1,159,364	Reduce the number of patients having unplanned admissions to acute care by 5% when compared to 2019 / 20 activity
Extending Intermediate Care Services including Bedded Function	£1,619,364	Increasing patient throughput of IC services to reduce length of Stay and DTOCs
Implementation of Rewind Programme for Diabetes	£419,364	To reduce patient need for medications associated with Type II diabetes
Enhancement of Delayed Transfer of Care reduction services	£399,364	To maintain number so DToCs below three patients per day
Development of Clinical Team for Care Home Support	£439,364	To have a rapid response team to assist with complex patients in care home settings
Enhancement of Frailty Service for NWL CCG including Integrated Care Programmes	£739,364	To increase capacity of Frailty Services at LNW and within wider Harrow Community
Enhancement of Falls Service for NWL CCG including Integrated Care Programmes	£739,364	To increase capacity of Falls Services at LNW and within wider Harrow Community
Development of Complex Continuing HealthCare Packages	£1,239,364	Reduced level of DToCs associated with CHC delays
Enhancement of Social Prescribing Services	£539,364	Increased uptake of Social Prescribing service with 100% utilisation of capacity of Social Prescribing team
Provision of Social worker Input for Primary care Networks	£64,000	Increased uptake of Social Prescribing service with 100% utilisation of capacity of Social Prescribing team
Provision of Virtual Ward Services as part of Integrated Care programme	£839,364	Reduce the number of patients having unplanned admissions to acute care by 1.5% when compared to 2019 / 20 activity
Total	£9,377,004	Should be £.835m

Local Authority Schemes - £14.625m 2020-21

Table 2: Harrow Council Schemes

Scheme Name	2020-21	Description
Dwelling Adaptations	£1,721,553	Adaptation to private dwellings to enable residents to remain at home
Maintaining minimum standards	£947,300	Quality assurance & safeguarding support to care providers to ensure quality provision to keep people safe within their homes
Care Act & Deprivation of Liberties (DoLS)	£436,300	Care Act duties including the provision of advocacy, information and advice as well as DoLS services and support
Support to Carers	£1,537,812	Information, advice and support to carers to enable them to maintain their caring roles, including the provision of respite services
Supporting DToCs and safe hospital discharge	£1,426,400	A range of services to support safe and timely hospital discharge. This includes a social work team based at the hospital, support for the Home First service and access to both intermediate care beds and equipment.
Promoting Independence	£1,333,400	A range of services (including reablement and occupational therapists) to maximise independent living.
Integrated service support	£430,500	Co-located LA staff supporting development of integrated services
Managing community social care demand	£2,279,942	Support to provide social care services in both the community or residential settings for assessed Care Act eligible needs
Managing demand for residential placements	£3,217,860	Support for care provided in residential settings
Winter Pressures	£969,828	Flexible resources to meet emerging needs to support effective hospital discharges
Protecting Social Care	£324,290	General support for social care
Total	£14,625,185	



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Report for: **Health and Wellbeing Board**

Date of Meeting: **8th June 2021**

Subject: **Director of Public Health -
Carole Furlong's Annual Public
Health Report 2021:**

**Let's go outside - using nature
to recover**

Responsible Officer: Carole Furlong - Director of Public Health

Public: Yes

Wards affected: All

Enclosures: None

Section 1 - Summary and Recommendations

Report for Information

The report is titled 'Let's go outside - using nature to recover' and it describes the wealth of Harrow's green spaces and enjoying it and doing things in it can support our wellbeing.

After a year where we have all spent much time in our homes and many people have suffered hardship and loss getting outside and seeing nature is a positive opportunity.

This report is therefore first and foremost for the residents of Harrow, who we hope will be inspired by the possibilities listed here to make the most of the range of green spaces on their doorstep as we come out of lockdown. We have tried to showcase the variety of opportunities available in the borough and hope that people find something that excites them.

This report is also for all health and wellbeing partners, anyone working with the public and for those working in service commission and public strategy. We hope that by outlining the benefits of green space on physical and mental wellbeing as well as the greater benefits to society, they will be inspired to enthusiastically promote green spaces to their clients and consider green space in their own projects.

Recommendations:

Recommendations for us at the council and led by me Carole Furlong

1. To have a conversation with our residents about how we can use green spaces to make us happier and more healthy
2. To ensure that access to green space is factored into decisions on new developments as stated in the Harrow Local Plan and by supporting a Health Impact Assessment (HIA) process for large housing and mixed-use developments which:
 - a. Prevent green space being unjustifiably lost to construction or new development
 - b. Increase provision of green space within new developments
3. To do more to promote use of green space as a key tool in tackling some of the inequalities within Harrow
4. To support maintenance and protection of existing green space in Harrow in accordance with Harrow Local Plan objectives
5. When resources allow to ensure and promote accessibility to green spaces by improving paths, signposts, and information on local green spaces, particularly in areas of Harrow with limited green space
6. To help Council staff to promote the use of green spaces to stay active, and how the natural environment can improve our mental wellbeing

Recommendations for you our residents

1. To find out where your nearest green spaces are and how you might get there
2. To get out and enjoy green space as a place to observe nature, to connect with friends and unwind from the stresses of the day
3. To use green spaces around your home more for leisure, exercise or growing, ideally by building into your weekly routine

Section 2 – Report

Financial Implications/Comments

There are no specific financial implications contained within the report, however it should be noted that there has historically been no dedicated budget for improvements around pathways or access for parks and open spaces. Works which have been undertaken have been funded via specific projects as part of the Green Grid or from limited Capital investment.

Any specific recommendations will need to be considered on a case by case basis subject to the identification of funding sources, including potential external funding sources.

Any longer term and ongoing funding requirement will need to be considered as part of the Council's annual budget setting process.

Legal Implications/Comments

The terms of reference for The Health and Wellbeing Board include

Develop and deliver a programme of work based on the Joint Commissioning priorities and the Joint Health and Wellbeing Strategy

- Shape future years joint commissioning
- Share Commissioning Intentions and common priorities
- Govern and quality assure the Health and Wellbeing Board work programme
- Be aware and discuss emerging policy and strategy

This report is in keeping with the overarching principle in the Local plan of enhancing residents' access to open space.

Risk Management Implications

None Identified.

Equalities implications / Public Sector Equality Duty

This report aims to reduce inequalities by improving and promoting access to green space for everyone in Harrow and by supporting a process for carefully

considering access to green space in decision making in adherence with the Harrow Local Plan.

Council Priorities

Please identify how the decision sought delivers these priorities.

- 1. Improving the environment and addressing climate change**
This report aims to highlight the benefits and support awareness and enjoyment of green space in Harrow. The recommendations commit to supporting and protecting green space provision in synergy with the Harrow Local Plan objectives.
- 2. Tackling poverty and inequality**
The recommendations commit to a series of action to improve access for all to green space and with particularly emphasis on areas with higher health inequalities in the borough.
- 3. Building homes and infrastructure**
The recommendations commit improving access for all to green space and reviewing how we can do this to reduce health inequalities in the borough. The report recommends that we maximise green space in new developments in synergy with the Harrow Local Plan objectives.
- 4. Addressing health and social care inequality**
The recommendations commit to improving access for all to green space and reviewing how we can do this to reduce health inequalities in the borough.
- 5. Thriving economy**

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

Name: Donna Edwards	<input type="checkbox"/>	on behalf of the* Chief Financial Officer
Date: 01 June 2021		
Name: Sharon Clarke	<input type="checkbox"/>	on behalf of the* Monitoring Officer
Date: 03 June 2021		

Name: Paul Hewitt



Corporate Director people
Services

Date: 03/06/2021

Section 4 - Contact Details and Background Papers

Contact: Anna.kirk@harrow.gov.uk

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