

Report to the Health and Wellbeing Board

6 September 2017

Agenda Item: 5

REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

BETTER CARE FUND 2017/19 PLAN

Purpose of the Report

- 1. This report sets out progress to date against the Nottinghamshire Better Care Fund (BCF) plan and requests that the Health and Wellbeing Board:
 - Approve the 2017-19 BCF Plan for submission to NHS England.
 - Note the assurance processes.
 - Delegate approval of the assurance plans within the required timeframes to the Corporate Director, Adult Social Care, Health and Public Protection (as Chair of the BCF Steering Group) in consultation with the Chair and Vice-Chair of the Health and Wellbeing Board.

Information and Advice

- 2. The Better Care Fund Policy Framework and planning guidance for 2017-19 have been published and our plan has been drafted to reflect this guidance. In summary, the BCF plan contains the following elements:
 - Narrative plan and BCF national conditions
 - Confirmation of funding contributions and scheme level spending plan
 - National metrics
- 3. Prior to the plan being drafted in January 2017 an extended board meeting was held with partners to review our BCF plan using the Better Care Support Team self-assessment tool. We had good engagement in the event and have identified a number of successes and areas for action during 2017/18 which are included in the plan. Successes include:
 - Relationships between partners have improved through the development of the STP.
 - Good progress on developing underpinning integrated datasets and information systems with a strong Local Digital Roadmap in place, e.g. NHS number recorded in 85% of cases.
 - Risk stratification tools embedded in practice and profiles understood across the county.
 - Reporting and monitoring of Delayed Transfers of Care (DTOC) has improved in 2016/17 with the system receiving congratulatory letters from Jeremy Hunt.
 - Protocols and processes are in place between front-line teams to enable them to work proactively across organisational boundaries, e.g. the Bassetlaw Integrated Discharge Team nominated for the Care Team of the Year at the East Midlands Care Awards.

Narrative Plan

- 4. Advice from NHS England suggests that an updated narrative is needed for each element of the narrative BCF plan, which includes:
 - The local vision for health and social care services including our approach to integration
 - An evidence base supporting the case for change
 - A coordinated and integrated plan of action for delivering that change
 - A clear articulation of how they plan to meet each national condition
 - An agreed approach to financial risk sharing and contingency
- 5. The national conditions outlined in the guidance are as follows in Table 1.

Table 1 – BCF National Conditions

BCF National Condition	2014/15 (shadow year)	2015/16	2016/17	2017/19
Plans to be jointly agreed	X	X	Revised requirement for housing colleagues to be involved in developing and agreeing plans.	X
Maintain provision of social care services (not spending)	X	X	X	X
Agreement for the delivery of 7-day services across health and social care to prevent unnecessary non-elective admissions to acute settings and to facilitate transfer to alternative care settings when clinically appropriate.	Х	X	X	
Better data sharing between health and social care, based on the NHS number	Х	X	X	
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.	X	X	Revised requirement for dementia services to be a particular priority.	
Agreement on the consequential impact of changes in the acute sector	X	X	Revised requirement to include any provider substantially affected by plans	
Agreement to invest in NHS commissioned out-of-hospital services - Pay for Performance will not be included in the plan but we will have to demonstrate how the			X	Х

BCF National Condition	2014/15 (shadow year)	2015/16	2016/17	2017/19
£1bn nationally previously for Pay for Performance will support NHS commissioned out of hospital services including social care.				
Agreement on a local target for Delayed Transfers of Care (DTOC) and to develop a joint local action plan.			X	
Manage transfers of care				Х

6. Whilst the number of national conditions is due to reduce in 2017/19, there is an emphasis on maintaining progress against the five additional national conditions outlined in 2016/17 policy.

Funding contributions and scheme level spending plan

- 7. BCF allocations were published 8 February 2016. Part 2 of the plan indicates the funding contributions and scheme level spending plan. A summary of the contributions and schemes is in Tables 2 and 3 below. There are no additional contributions on top of the mandated minimum requirements for 2017-19.
- 8. A Pooled Fund Agreement for 2017/18 has been drawn up and constituent organisations approved the agreement by end of March 2017 to ensure that an agreed protocol was in place.

Table 2 - Funding contributions by organisation 2016/17

Funding Source	2016/17	2017/18	2018/19
CCG Minimum Contribution			
NHS Bassetlaw CCG	£7,554,470	£7,689,695	£7,835,799
NHS Mansfield and Ashfield CCG	£12,589,768	£12,815,124	£13,058,612
NHS Newark and Sherwood CCG	£8,002,985	£8,146,239	£8,301,017
NHS Nottingham North and East	£9,243,676	£9,409,138	£9,587,911
CCG			
NHS Nottingham West CCG	£6,265,761	£6,377,919	£6,499,099
NHS Rushcliffe CCG	£6,973,951	£7,098,785	£7,233,662
Local Authorities Contribution			
Improved BCF (adult social care)	N/A	£16,060,542	£21,590,371
Disabled Facilities Grant	£5,475,413	£5,958,425	£6,441,437
Total	£56,106,024	£73,555,867	£80,547,908

Table 3 - Scheme level spending plan summary

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Ref	Scheme	Locality	2017/18	2018/19
1101	Ochlenic	Locality	2017/10	2010/13
n 0				
no.				

Ref	Scheme	Locality	2017/18	2018/19
no.		Courth		
Α.	Seven Day Working	South Nottinghamshire	£707,049	£721,034
B.	Delayed Transfers of Care	South Nottinghamshire	£5,396,574	£5,492,666
C.	Reducing non-elective admissions	South Nottinghamshire	£6,887,054	£7,023,280
D.	Support to social care	South Nottinghamshire	£257,984	£263,087
E.	Enabling	South Nottinghamshire	£408,899	£416,987
F.	Proactive care (community based)	Mid- Nottinghamshire	£12,425,170	£12,684,446
G.	Patient and carer support	Mid- Nottinghamshire	£267,122	£272,707
H.	Better Together Implementation Support	Mid- Nottinghamshire	£416,991	£401,206
I.	7 day access to services	North Nottinghamshire	£666,307	£753,567
J.	Mental Health Liaison	North Nottinghamshire	£440,337	£440,777
K.	Discharge / Assessment incl. Intermediate Care	North Nottinghamshire	£3,105,283	£3,107,780
L.	Respite services	North Nottinghamshire	£21,000	£21,000
M.	Improving Care Home quality	North Nottinghamshire	£75,000	£75,000
N.	Telehealth	Countywide	£455,305	£455,610
О.	Support for carers	Countywide	£1,244,892	£1,268,544
P.	Protecting social care	Countywide	£16,739,366	£17,057,413
Q.	Disabled Facilities Grant	Countywide	£5,958,425	£6,441,437
R.	Enabling Care Act statutory responsibilities and meeting demand implications	Countywide	£2,022,567	£2,060,996
S.	Improved BCF (adult social care)	Countywide	£16,060,542	£21,590,371

^{9.} Having reviewed BCF schemes as part of the evaluation process, there are no material changes to schemes / services within the Nottinghamshire BCF 2017/19 plan.

National metrics

10. The national performance metrics have remained consistent from 2015/16 plans. Further details are available in Table 4.

Table 4 – national metrics

Metric	New / Revised Requirement		
Total non-elective admissions in to hospital	Definition change from 2014/15 - to use		
(general & acute), all-age, per 100,000	Secondary Uses Service (SUS) data instead of		
population	Monthly Activity Return (MAR) data as in CCG		
	operational plans. Requirement for		
	Nottinghamshire resident population remains.		
Permanent admissions of older people (aged	Definition change from 2014/15 reflected in		
65 and over) to residential and nursing care	changes approved by HWB in October 2015.		
homes, per 100,000 population	New targets set using BCF ready reckoner.		
Proportion of older people (65 and over) who	Definition change from 2014/15 reflected in		
were still at home 91 days after discharge	changes approved by HWB in October 2015.		
from hospital into reablement / rehabilitation	New targets set using BCF ready reckoner.		
services			
Delayed transfers of care (delayed days) from	Requirement for Nottinghamshire resident		
hospital per 100,000 population (average per	population remains.		
month)			

- 11. From April 2017 the local metrics will no longer be reportable to NHS England but will continue to form part of the local performance monitoring:
 - Citizen experience as measured through a suite of health and care measures
 - Permanent admissions of older people (aged 65 and over) to residential and nursing care homes directly from a hospital setting per 100 admissions of older people (aged 65 and over) to residential and nursing care homes

Assurance Process

12. The assurance process will follow a similar process for plans developed for 2016/17. The key assurance processes will be at regional level as part of the wider assurance of NHS operational plans, but with the involvement of local government. The assurance process, including reconciling any data issues will happen within NHS England's Director of Commissioning Operations (DCO) teams, with partner involvement, in alignment with the process for reviewing CCG operating plans. The regional Better Care Fund Manager (BCM) will work with these teams to ensure they have the knowledge and capacity required to review and assure BCF plans. A consistent 'Key Lines of Enquiry' (KLOE) has been produced to support the assurance process and was made available to local areas as a guide to developing plans. Key requirements for the assurance process and timescales are shown in table 5.

Table 5 - BCF assurance process

Milestone	Date
Publication of Government Policy Framework	31 March 2017
BCF Planning Requirements, BCF Allocations published	4 July 2017
Planning Return template circulated	w/e 7 July 2017
First Quarterly monitoring returns on use of IBCF funding from Local	21 July 2017
Authorities.	
Areas to confirm draft DToC metrics to BCST	21 July 2017
BCF planning submission from local Health and Wellbeing Board areas	11 September
(agreed by CCGs and local authorities). All submissions will need to be	2017
sent to DCO teams and copied to england.bettercaresupport@nhs.net	

Milestone	Date
Scrutiny of BCF plans by regional assurers	12 – 25
	September
	2017
Regional moderation	w/c 25
	September
	2017
Cross regional calibration	2 October 2017
Approval letters issued giving formal permission to spend (CCG minimum)	From 6 October
	2017
Escalation panels for plans rated as not approved	w/c 10 October
	2017
Deadline for areas with plans rated approved with conditions to submit	31 October
updated plans.	2017
All Section 75 agreements to be signed and in place	30 November
	2017
Government will consider a review of 2018-19 allocations of the IBCF grant	November 2017
provided at Spring Budget 2017 for areas that are performing poorly. This	
funding will all remain with local government, to be used for adult social	
care.	

Other options

- 13. The report is presented to the Board to meet the Department of Health requirement for the Health and Wellbeing Board to approve the plans before submission.
- 14. The content of the plan has been drafted to reflect the required standards set out in the BCF Policy Framework, Planning Guidance and Key Lines of Enquiry, and in keeping with previous principles:
 - For additional financial allocations to the BCF pooled fund to be made at each organisations' discretion
 - To align BCF performance targets with organisational targets to ensure consistency
 - Not to establish further risk share or contingency arrangements

Reasons for Recommendations

- 15. To ensure the HWB has oversight of progress with the BCF plan and can discharge its national obligations for reporting.
- 16. To obtain approval for the revisions to the Nottinghamshire BCF plan as outlined above.

Statutory and Policy Implications

17. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications

are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

18. The financial implications are outlined in the Nottinghamshire BCF plan. A summary can be found in tables 2 and 3.

Human Resources Implications

19. There are no Human Resources implications contained within the content of this report.

Legal Implications

20. The Care Act facilitates the establishment of the BCF by providing a mechanism to make the sharing of NHS funding with local authorities mandatory. The wider powers to use Health Act flexibilities to pool funds, share information and staff are unaffected.

RECOMMENDATIONS

That the Board:

- 1. Approve the 2017-19 BCF Plan for submission to NHS England.
- 2. Note the assurance processes.
- 3. Delegate approval of the assurance plans within the required timeframes to the Corporate Director, Adult Social Care, Health and Public Protection (as Chair of the BCF Programme Board) in consultation with the Chair and Vice-Chair of the Health and Wellbeing Board.

David Pearson

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Constitutional Comments (SLB 22/08/2017)

21. The Health and Wellbeing Board is the appropriate body to consider the content of this report.

Financial Comments (OC 22/08/17)

22. The financial implications are contained within the body of the report. They are summarised in the tables found in paragraph 8.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- "Better Care Fund: Guidance for the Operationalisation of the BCF in 2015-16".
 http://www.england.nhs.uk/wp-content/uploads/2015/03/bcf-operationalisation-guidance1516.pdf
- Better Care Fund Final Plans 2 April 2014
- Better Care Fund Revised Process 3 June 2014
- Better Care Fund Governance Structure and Pooled Budget 3 December 2014
- Better Care Fund Pooled Budget 4 March 2015
- Better Care Fund Performance and Update 3 June 2015
- BCF Performance and Finance exception report Month 3 2015/16
- Better Care Fund Performance and Update 7 October 2015
- Letter to Health and Wellbeing Board Chairs 16 October 2015 from Department of Health and Department of Communities and Local Government "Better Care Fund 2016-17"
- Better Care Fund Performance and Update 2 December 2015
- 2016/17 Better Care Fund: Policy Framework
 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/490559/B
 CF_Policy_Framework_2016-17.pdf
- Better Care Fund Performance and Update 2 March 2016
- Better Care Fund 2016/17 Plan 6 April 2016
- Better Care Fund Performance and Update 6 June 2016
- Better Care Fund Performance, 2016/17 plan and update 7 September 2016
- Better Care Fund Performance 7 December 2016
- Better Care Fund Performance 29 March 2017
- Better Care Fund Performance 28 June 2017

Electoral Divisions and Members Affected

All