



Central Bedfordshire  
Shadow Health and Wellbeing Board

<b>Contains Confidential or Exempt Information</b>	No.
<b>Title of Report</b>	Better Care Fund Plan – Final Submission
<b>Meeting Date:</b>	3 April 2014
<b>Responsible Officer(s)</b>	Julie Ogley, Director of Social Care, Health & Housing John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning Group
<b>Presented by:</b>	Julie Ogley, Director of Social Care, Health & Housing John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning Group

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**Action Required:** The Board is asked to:

1. Approve the Better Care Fund Plan for Central Bedfordshire for 4 April 2014 submission to NHS England.
2. Delegate authority to Director of Social Care, Health and Housing and the Director of Strategy and System Redesign, Bedfordshire Clinical Commissioning Group to make any final amendments required before the final submission.

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**Executive Summary**

1.	The Better Care Fund (previously referred to as the Integration Transformation Fund) was announced in June as part of the 2013 Spending Round. It provides an opportunity to transform local services so that people are provided with better integrated care and support. It comprises a substantial pooled budget to help local areas manage pressures and improve long term sustainability. The Fund will be an important enabler to take the integration agenda forward at scale and pace, acting as a significant catalyst for change. It is important to note that the Fund is derived from existing monies in the health and care system.
2.	The Health and Wellbeing Board considered the requirements of the Better Care Fund at its 9 January meeting and delegated the Chair and Vice Chair to sign off the initial submission.
3.	Following the initial submission of the Better Care Fund Plans on 14 February to NHS England and the Local Government Association and feedback from the assurance process, a final submission with additional information addressing the comments from the assurance process will be submitted for the 4 April 2014 deadline.

<b>Background</b>	
4.	The Better Care Fund for Central Bedfordshire is approximately £18 million from 2015/16 onwards. This pooled fund is based on monies already allocated within the health and social care system and includes funding to mitigate the impact of the transformation of adult social care proposed in the Care Bill.
5.	The Better Care Fund Plan represents a 2 year element of the Clinical Commissioning Group's five year strategic Plan for Patients. This is also on the agenda for discussion and approval.
6.	The Better Care Fund provides an opportunity to transform local services so that people are provided with better integrated care and support and is seen as an important enabler to take the integration agenda forward at scale and pace. It supports the aim of providing people with the "right care, in the right place, at the right time" through a significant expansion of care in community settings. It builds on the work already underway including the Community Bed Review, Joint Health and Wellbeing Strategy, Integrated Care Pioneer Bid, South Bedfordshire Demonstrator Project and investment in Prevention Services. It is intended that this approach can be applied across all customer groups including children and young people.
7.	The final draft incorporates the feedback on the initial submission made as part of the assurance process from NHS England. Appendix 1 Some changes have also been made as a result of the revised template for Part 2 which incorporates financial and performance elements of the Plan (although these changes are relatively minor and, specifically, split out recurrent and non-recurrent spending and benefits). Appendix 2
8.	The key programmes set out in the initial submission remain largely unchanged. There has been further engagement with Acute Sector Providers to understand the consequential impact of the proposed changes and how these might be addressed. We have also engaged heavily with localities to engage them in this process and the programme we need to construct to deliver on our ambitions.
9.	There is further emphasis on mental wellbeing in the final version of the plan and this is reinforced in the prevention and early intervention programme. The need for access to high quality mental health services and a closer alignment of physical and mental health particularly in the acute sector is articulated in the document.
<b>The Better Care Fund Plan</b>	
10.	The Better Care Fund Plan for Central Bedfordshire sets out a shared vision for health and social care in Central Bedfordshire, rooted in a locality-based delivery model. It describes the agreed strategic approach based on four priority programmes for delivering integrated care at scale and pace, and therefore achieving the key outcomes expected by the Health and Wellbeing Board and the people of Central Bedfordshire.

11.	<p>In setting out the four priority programmes below, we recognise the importance of shifting resources from hospital settings to more community-focussed care to deliver improved health and care experiences as well as more effective use of resources:</p> <ol style="list-style-type: none"> <li>1. <b>Reshaping the model for prevention and early intervention</b> – through an integrated approach to primary, secondary, and tertiary prevention to stop or reduce deterioration in health. This will ensure the most progressive, evidence-based prevention and early intervention programme are available to our population.</li> <li>2. <b>Supporting people with long term conditions through multi-disciplinary working</b> – focussing services around general practice in locality networks and helping people to manage their own conditions in the community. This will ensure robust and consistent arrangements are in place across Central Bedfordshire to both identify and organise effective support to those with long term conditions, particularly those with complex co-morbidities. This will include access to multi-disciplinary support and packages of care organised to maximise independence.</li> <li>3. <b>Expanding the range of services that support older people with frailty and disabilities</b> – developing and integrating the range of housing, new technologies, mobility, and support for carers. This will ensure availability of services that wrap around older people with specific conditions and issues to maintain their independence and remain in their own homes and in their communities for as long as it is safe to do so.</li> <li>4. <b>Restructuring integrated care pathways for those with urgent care needs</b> – ensuring that these are seamless, clear, and efficient to help deliver the clinical shift required to move care away from acute settings, where appropriate.</li> </ol> <p>More comprehensive description of planned changes and key success factors are set out from page 15 of the Submission.</p>
12.	<p>Although this Better Care Fund Plan focuses predominantly on meeting the needs of older people, given this is the most significant pressure facing both health and social care in light of the increasing and ageing population, it is expected however, that some of the cross-cutting initiatives will benefit adults of all ages including people with mental health needs.</p>
<b>Summary of changes from the February Submission:</b>	
13.	<p>We received very positive feedback on our draft from NHS England and only small amendments were requested by them. This means that we have been able to focus more on establishing the approach we want to take to deliver on the programmes included in the plan.</p> <p>Key changes made following feedback from the NHSE Local Area Team and Local Government Association from the 14 February submission and further local engagement activities are as follows:</p> <ul style="list-style-type: none"> <li>• Alignment of the Better Care Fund Plan with the Mental Health strategy and emphasis on mental wellbeing and need for access to high quality mental health services and a seamless approach to physical and mental health particularly within the acute sector</li> </ul>

	<ul style="list-style-type: none"> <li>• Reflecting the consequential impact of the proposed changes on the acute sector and how these might be addressed</li> <li>• Demonstrating the Care Bill element of the Better Care Fund Plan</li> <li>• Reflected feedback from Healthwatch and locality groups in relation to dementia and end of life care.</li> <li>• Further revision to the Risk register</li> </ul>
14.	The tenet for delivery of the Better Care Fund Plan in Central Bedfordshire is locality approaches and delivery of care through a number of Hubs based around the four Localities. These would be multidisciplinary hubs, operating seven days per week, providing a range of medical, nursing and social care interventions to support their local population and would prevent people, especially frail older people, making unnecessary journeys to hospitals.
15.	The Better Care Fund Plan ambition for integrated locality based delivery of health and care services is importantly linked to the on going review of local health services in Bedfordshire and Milton Keynes. This link is also referenced in the Better Care Fund Plan submission.
16.	<p>Further detailed work is required to fully develop the programmes for each of the four localities in Central Bedfordshire including:</p> <ul style="list-style-type: none"> <li>• Moving forward coherently with full sight of the risks and budget changes required to deliver the locality model.</li> <li>• Defining further locality specific based activities</li> <li>• Understanding the commissioning implications and the fundamental changes required in procuring and delivering services.</li> </ul> <p>Key elements of this work need to include data modelling to understand patient flows, further clarifying the savings, workforce capacity issues and implications for information and data sharing. An Officer Delivery Group has been established to support the Better Care fund programme and further guidance is being sought from senior officers about how we deliver the Better Care Fund programme.</p>
17.	A Chief Officer Group comprising officers within the Council, Clinical Commissioning Group and Locality Leads will be convened to lead on commissioning for integrated care and will oversee financial and performance management. The Group will report directly to the Health and Wellbeing Board.
18.	Progress in implementing the Better Care Fund Plan will be monitored through outcomes reporting to the Health and Wellbeing Board.
19.	A shared risk register will be established as part of the Better Care Fund Programme and will include the impact on Acute Services, as emphasised in engagement with acute sector providers,; social care delivery and the steps that will be taken if activity volumes do not change as planned for example failure to reduce emergency admissions or increasing use of nursing/residential home admissions.
<b>Transfer of funds</b>	
20.	The Better Care Fund will be governed by a Section 75 agreement which will be finalised within the coming months and will be brought back to a future meeting of the Health and Wellbeing Board.

21.	There is an existing section 256 agreement to transfer funds from health to social care to support the delivery of social care objectives, approved by the Health and Wellbeing Board in November 2013. The value of this transfer was £3.099m 2013-14 and was targeted towards preventative services including Reablement. The value of this transfer will increase in 2014-15 to £3.821m, an increase of £0.722m over the NHS Transfer funding for 2013/14.
22.	The national allocation of £3.8bn for 2015/16 will lead to an apportionment of £15.144m to Central Bedfordshire taking account of the other funding streams set out above. The amount includes £1.19m for Disabled Facility Grants and Social Care capital grants with £14.1m transferring from the Bedfordshire Clinical Commissioning Group. The Clinical Commissioning Group has agreed to top up the adjustment to reflect the initial sum of £15.290m.

### Conclusion and Next Steps

23.	The Better Care Fund Plan represents a real opportunity to deliver integrated and locality based services at pace. Although there are important challenges for delivering change within the context of a rapidly growing and ageing population, located in a predominantly rural area across seven non-catchment acute hospitals, getting our delivery model for integrated care right and delivered within the next 2 years is crucial to our ability to manage this demand.
24.	A shared vision for improving outcomes and health and care experience for older people is evolving across the health and care economy in Central Bedfordshire. This shared vision will be key to delivering the Better Care Fund Plan whilst other fundamental changes, such as the review of local health services across Bedfordshire and Milton Keynes and the re-commissioning of community health and mental health services is on-going.
25.	A strong governance framework will be implemented to ensure the commitments made in the Better Care Fund Plan are delivered.
26.	A Chief Officer Group comprising officers within the Council, Clinical Commissioning Group and Locality Leads will be convened to lead on commissioning for integrated care and will oversee financial and performance management.
27.	Engagement with Acute Providers and other key stakeholders will continue throughout the process of implementation.
28.	Further reports on emerging and related developments will be brought to the Health and Wellbeing Board.

### Detailed Recommendation

29.	That the Health and Wellbeing Board:
	<ul style="list-style-type: none"> <li>agree the Better Care Fund Plan for Central Bedfordshire for submission to NHS England by 4th April 2014, subject to subject to the inclusion of any necessary changes which may be required following this Board meeting.</li> </ul>
	<ul style="list-style-type: none"> <li>agree the use of the Health Transfer to Social Care Funding in 2014/15 as set out in the financial template, and for this to inform the basis of a section 75 agreement</li> </ul>

	<ul style="list-style-type: none"> <li>• discuss how we will work across the partnership to deliver the ambitions set out in the plan on time and in the right way to ensure the longer term sustainability of the health and care system.</li> </ul>
	<ul style="list-style-type: none"> <li>• to receive updates on implementation and reports on performance against the 2014/15 targets.</li> </ul>

<b>Issues</b>	
Strategy Implications	
1.	Developing integration of health and social care will have a direct impact on improving health outcomes and experience of health and care services for people in Central Bedfordshire.
2.	Integration of Health and Social Care is a key ambition and priority for the Health and Wellbeing Board.
3.	The joint Health and Wellbeing Strategy and Bedfordshire Plan for Patients set out shared priorities based on the Joint Strategic Needs Assessment
Governance & Delivery	
4.	Progress on developing the Better Care Plan will be reported to the Health and Wellbeing Board and delivery will be through agreed joint commissioning mechanisms and governing boards for partners. The Health and Health Wellbeing board will provide overall assurance and sign off the BCP for Central Bedfordshire.
Management Responsibility	
5.	Management responsibility for the delivery of integrated health and social care services lies with the Director of Social Care, Health and Housing and the Chief Operating Officer for Bedfordshire Clinical Commissioning Group.
Public Sector Equality Duty (PSED)	
6.	<p>The PSED requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to eliminate discrimination, harassment and victimisation, advance equality of opportunity, and foster good relations between in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation..</p> <p>The draft JHWS has had an equality impact assessment undertaken and this will inform the final strategy including the priority to improve outcomes for frail older people.</p>
	Are there any risks issues relating Public Sector Equality Duty <b>No</b>
No	<b>Yes</b> <i>Please describe in risk analysis</i>

**Risk Analysis**

There is a requirement to develop joint local plans for the pooled budget for health and social care. The development of the Better Care Plan will include considerations of associated risks. There may be risk issues if the national conditions described in this report are not met. This risk is mitigated through the development of joint local plans and identification of consequential impact of the proposed changes with all key providers.

<b>Identified Risk</b>	<b>Likelihood</b>	<b>Impact</b>	<b>Actions to Manage Risk</b>

<b>Source Documents</b>	<b>Location (including url where possible)</b>