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Health and Wellbeing Board Special Meeting

Date: Tuesday, 25 March 2014

Time: 4.00 pm

Venue: Committee Room 1 - Wallasey Town Hall

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AGENDA

1. WELCOME AND APOLOGIES

2. MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST

Members of the Cabinet are asked to consider whether they have any disclosable pecuniary or non pecuniary interests in connection with any item(s) on this agenda and, if so, to declare them and state the nature of the interest.

3. HEALTH AND SOCIAL CARE INTEGRATION. THE BETTER CARE FUND 2014 SUBMISSION & SECTION 256 OUTPUTS FOR 2013 (Pages 1 - 4)



WIRRAL COUNCIL HEALTH AND WELLBEING BOARD

25 MARCH 2014

SUBJECT:	HEALTH AND SOCIAL CARE
	INTEGRATION. THE BETTER CARE FUND
	2014 SUBMISSION & SECTION 256
	OUTPUTS FOR 2013
WARD/S AFFECTED:	'ALL'
REPORT OF:	DIRECTOR OF ADULT SOCIAL SERVICES
	CHIEF CLINICAL OFFICER CCG

1.0 EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to provide an update and present the final Better Care Fund submission, put together on behalf of Wirral Council and Wirral Clinical Commissioning Group.
- 1.2 In relation to performance a baseline assessment has been developed along with a new performance dashboard template.
- 1.3 The dashboard has been developed in order to monitor progress against key areas of activity that are critical to performance related elements of the Better care Fund from 2015

2.0 BACKGROUND AND KEY ISSUES

- 2.1 The Better Care Fund (BCF) is explicitly intended to facilitate the integration of Health and social Care systems at a local level. The health and Wellbeing Board has a critical role in influencing and monitoring progress in relation to integration, it has a key role in signing off submissions.
- 2.2 NHS Wirral Clinical Commissioning Group (CCG) and Wirral Borough Council are required to submit a final "Better Care Fund" 2 year plan to the Cheshire Warrington and Wirral Local Area Team (LAT), approved by the Wirral Health and Wellbeing Board on 4 April 2014, explaining how they intend to use this fund to improve local services.
- 2.3 The March Health and Wellbeing special Board will be used for sign off of the final return. Running in parallel this will also go to the 13 March 2014 Cabinet for approval and the CCG Governing Body.
- 2.4 The former model for integrated arrangements across health and social care were dealt with through separate streams, reablement and carers funds paid to the CCG and a specific social care transfer for improved health outcomes (the section 256 agreement) these arrangements are superseded by the Better Care Fund. An outputs report for the transfer is presented as appendix 3 to this report.

3.0 RELEVANT RISKS

3.1 The Better Care Fund brings both opportunity and risk. There are opportunities for efficiency working across health and social care organisations, however there are newly shared risks in relation to performance and spend. In addition the better care Fund has a performance related element from 2015. A risk share model has been developed through the Strategic Commissioning Board and is presented in Appendix 1.

4.0 OTHER OPTIONS CONSIDERED

4.1 Contingency arrangements are to be further developed.

5.0 CONSULTATION

- 5.1 Public stakeholder event 12 February 2014 to commence a broader more in depth consultation process over time as part of the broader strategic development of Vision 2018
- 5.2 Individual Key provider engagement during February/March.
- 5.3 Provider forum and engagement event, 31st March 2014.

6.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

6.1 Voluntary, community and faith organisations are key stakeholders in the development of Vision 2018

7.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

- 7.1 For 2014/14 The total joint resource available will be circa £15 million (exact resource to be confirmed by finance directors).
- 7.2 From 2015/16 the total resource available will be circa £30 million (exact resource to be confirmed by finance directors).
- 7.3 The plan for 2015/16 includes rolling over investment from 2014/15 however there is a commitment that these investments will be reviewed to ensure effective utilisation of resource in 2015/16.

8.0 LEGAL IMPLICATIONS

8.1 The section 256 is a formal legal agreement. A similar model will be required to set out formal agreements for pooled funding setting out specific risk share agreements.

9.0 EQUALITIES IMPLICATIONS

9.1 None specified overview report only. Consideration of EIA will be given to specific service proposals.

10.0 RECOMMENDATION/S

- 10.1 It is recommended that the better care Fund final submission is approved for submission to the Local Area Team and NHS England.
- 10.2 It is recommended that the performance baseline and dashboard, with modelled targets for 2014/15 and 15/16 is noted.
- 10.3 It is recommended that the risk sharing approach and agreement is noted and approved.

11.0 REASON/S FOR RECOMMENDATION/S

- 11.1 The final submission outlines how Wirral Council and CCG intend to deliver against the national requirements identified in the BCF.
- 11.2 System performance will be a critical element of the new Better care Fund. This presents potential financial risk

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APPENDICES To be tabled

Appendix 1

Better Care Fund final submission paper. (Tabled)

Appendix 2

Priority scheme details and supporting financial information (Tabled)

Appendix 3

Performance baseline and dashboard (TABLED)

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