

WIRRAL COUNCIL

CABINET

9 OCTOBER 2014

SUBJECT:	HEALTH AND SOCIAL CARE INTEGRATION. THE BETTER CARE FUND 2014 RE-SUBMISSION
WARD/S AFFECTED:	'ALL'
REPORT OF:	DIRECTOR OF ADULT SOCIAL SERVICES CHIEF CLINICAL OFFICER CCG
RESPONSIBLE PORTFOLIO HOLDER:	COUNCILLOR CHRISTINE JONES
KEY DECISION?	NO

1.0 EXECUTIVE SUMMARY

1.1 The purpose of this report is to provide an update with regard to the Better Care Fund re-submission put together on behalf of Wirral Council and Wirral Clinical Commissioning Group.

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 of submissions.

2.2 NHS Wirral Clinical Commissioning Group (CCG) and Wirral Council were required to re-submit a final 'Better Care Fund' plan for 2015 / 2016 to NHS England on 19 September 2014, following approval by the Wirral Health and Wellbeing Board on 17 September, explaining how they intend to improve local services.

2.3 Following original submissions in April 2014, NHS England advised they would be requesting further detailed work nationally, in response to feedback received from the LGA, Department of Health and Acute Trusts. On 11 July 2014, Andrew Ridley made clear his intentions regarding a 'pay for performance' framework.

2.4 Revised high level guidance was circulated on 25 July 2014, with revised full guidance and the documents being used on 18 August 2014.

2.5 The new guidance specifically required the following:

- **Finance:** Plans must balance to total settlement (Minimum £28,009,000 locally).
- **National Conditions:** Details requested on the implementation of the Care Act, including assurance funding comes from CCG allocation.

- **Non Elective Admissions:** National expectation of a minimum 3.5% reduction target. Nationally mandated payment by results attached.
- **Other Outcomes & Measures:** Revision of baseline data from 2012/13 to 2013/14. These outcomes are not linked to performance payment.
- **Scheme Specifications:** An individual annex to be submitted alongside BCF templates demonstrating impact of each scheme.
- **Provider Commentary:** An individual annex to be submitted to allow each local provider to comment on deliverability of plans.

2.6 NHS Wirral Clinical Commissioning Group (CCG) and Wirral Council (WBC) agreed through Vision 18, with key providers, a level of ambition of 15% reduction in emergency admissions over three years.

2.7 NHS Wirral CCG and WBC agreed with key partners that all operational plans would align to the level of ambition by April 2015.

2.8 In order to redesign services and achieve the 15% reduction in emergency admissions, NHS Wirral CCG and WBC have recommended 25 schemes, under four themed areas:

- Early Intervention and Prevention
- Keeping people in their local communities
- Step up / Step down services
- Mental Health, including drug and alcohol services.

2.9 Revised guidance clarifies the performance related element, focussing on delivery of the reduction in non-elective admissions, 5% for 2015 / 2016. Payment will be related to delivery of the target. Potential funding will be held to mitigate the impact of non delivery and acute pressure.

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.

3.2 The risk share agreement between NHS Wirral CCG and WBC remains at 82% / 18% based upon the share for resource contributed. Based upon 5% reduction in non electives, the performance related fund equates to £3,362,260 if none of the 5% target were achieved, 82% risk share for CCG is £2,757,053, 18% for Wirral Council is £605,207.

- 3.3 Contingency funds identified in the Better Care Fund plan remain at 5% of total (£1.7 million).
- 3.4 A full risk log relating to the Better Care Fund is contained within the full narrative of the re-submission.

4.0 OTHER OPTIONS CONSIDERED

- 4.1 A robust performance framework is being developed for November 2014, overseen by the Vision 18 governance framework. Progress and performance will be overseen quarterly at Health and wellbeing Board. Remedial action will be taken, should schemes not deliver in order to mitigate against risk of non delivery.

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. Further engagement with key providers, WUTH, CWP and Community Trust has taken place as part of the re-submission process.

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 / 2015 the total joint resource agreed is £15,635 million.

- 7.2 From 2015 / 2016 the total resource agreed is £33,368, 039.

- 7.3 National Pooling £3.8 billion
Local Pooling (April 2015) £33,368,039

Comprising:

Organisation	Holds the pooled budget? (Y/N)	Spending on BCF schemes in 14/15	Minimum contribution (15/16)	Actual contribution (15/16)
		£'000	£'000	£'000
NHS Wirral Clinical Commissioning Group	TBC	£11.334	£24.933	£26.274
Wirral Council	TBC	£4.301	£3.076	£7.094
BCF Total		£ 15.635	£28.009	£ 33,368,039

8.0 LEGAL IMPLICATIONS

8.1 The Section 256 for 2014 / 2015 is a formal legal agreement. A similar model will be required for 2015 / 2016 to set out formal agreements for pooled funding (Section 75 agreement) 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 re-submission approved at Health and Wellbeing Board is noted.

11.0 REASON/S FOR RECOMMENDATION/S

11.1 The submission is a critical driver in whole system redesign in Wirral.

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

Appendix 1

Better Care Fund executive summary document, outlining the intentions and anticipated outcomes

Appendix 2

Better Care Fund scheme summary - available online in the web library

Appendix 3

Better Care Fund full re-submission narrative - available online in the web library

Appendix 4

Better Care Fund individual scheme details and modelling - available online in the web library