



COUNCILLOR CHRIS JONES
CABINET MEMBER FOR ADULT
SOCIAL CARE

CABINET

6 JUNE 2016

BETTER CARE FUND 2016/17

Councillor Chris Jones, Cabinet Member - Adult Social Care, said:

“Joining up services provided by the NHS and social care – making sure people who need support get the most seamless and efficient possible service – is a major priority for this Council. What matters is that people who need help get it; the organisation that provides it doesn’t matter to people, so shouldn’t matter to us.

We are working hard, and making great progress, towards integrating our care services and creating a system where social care and the NHS work as one, pooling our resources to improve the care we can provide. This report is a demonstration of that priority in action”

REPORT SUMMARY

The purpose of this report is to provide an update with regard to the Better Care Fund achievements in 15/16 and the priorities for submission in 16/17, put together on behalf of Wirral Council and Wirral Clinical Commissioning Group, in collaboration with key partners.

Links to the Wirral Plan Pledges

- Older People live well
- People with Disabilities live independently

Wirral has over achieved the 3.5% non-elective admission reduction target for 15/16 within budget.

Key schemes are evidencing real impact and progress in establishing a sustainable 7 day community offer.

Financially, the health and care economy in Wirral is in a challenging position. Despite seeing the number of people admitted reduce, those needed to be admitted have cost more, due to their high level of needs.

The priority for 16/17 is to ensure a sustainable Health & Social Care economy which supports the national direction of travel, in particular a community offer which enables 7 day admission avoidance and discharge.

It is the commissioning intention for 16/17 to agree cost envelopes with the main NHS providers, which will support the financial sustainability for acute and community care and minimise any negative impact or risk to providers, moving towards a more accountable single care system. The BCF will continue to invest in schemes to deliver the wider system change and prioritise support and mitigation of risks.

The BCF will continue to prioritise cost effective 7 day community services that are responsive, delivering the right care in the right place at the right time. Services will continue to be transformed, redesigned to ensure better outcomes for people, best value and effective use of resources across all providers.

RECOMMENDATION/S

Cabinet are asked to note the BCF achievements in 15/16 (please see attached appendix 1).

Cabinet are asked to note the 16/17 BCF plan and to recognise the role of the Health and Wellbeing Board in signing off the final submission (please refer to appendix 1 overview and appendix 2 scheme details).

Cabinet are asked to note the quarterly targets agreed and the governance arrangements for monitoring progress (see appendix 1).

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 NHS Wirral Clinical Commissioning Group (CCG) and Wirral Council were required to submit a 16/17 'Better Care Fund' plan to NHS England on 10 May 2016.
- 1.2 A pooled fund S75 legal agreement is required to be signed and in place by 30th June 2016, covering the agreement relating to the £28.9m pooled fund. As part of the agreement a further detailed risk share will be included.
- 1.3 The Better Care Fund (BCF) is explicitly intended to facilitate the integration of Health and Social Care systems at a local level, drive the development of 7 day health and social care services and support the wider transformation plan to deliver an effective sustainable health and social care economy.
- 1.4 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.
- 1.5 The Health and Wellbeing Board approved and signed off the proposed submission on 9 May 2016.
- 1.6 The CCG Governing Body will also be required to give approval in May.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 The 16/17 BCF plan links to the CCG operational plan and supports Healthy Wirral priorities.
- 2.2 A Risk Share agreement will be finalised by 30 June 2016.

3.0 BACKGROUND INFORMATION

- 3.1 The existing national requirements remain:
 - Agreement across the economy and joint Sign off at Health and Wellbeing Board
 - Protection of Social care
 - 7 day services for admission avoidance and discharge
 - Information and Data sharing – including use of NHS no
 - Joint assessment and care planning and lead professional
 - Impact upon providers, notably the acute trust.
 - Risk share agreement
- 3.2 Additional 2 new national requirements:
 - Ring fenced element for out of hospital commissioned services (£7.082m)
 - Agreed delayed discharge action plan

- 3.3 We are required to agree quarterly monitoring of key targets:
- Non elective admissions reduction target 3.5%
 - Admissions to residential and nursing care 9% reduction (56 a year)
 - Effectiveness of re-ablement 90% of people are still at home 91 days post re-ablement
 - Delayed transfers of care;
 - 5% reduction in total number of delays.
 - 90% occupancy target at acute trust (656 beds)
 - Local - Domiciliary care response time - 95% same day response
 - Local - Service user experience - 95% of people state that all of the people treating and caring for us worked well together.

4.0 FINANCIAL IMPLICATIONS

- 4.1 The 16/17 minimum pooled budget requirement for Wirral is £24,943m, plus £3,325m Disabled facilities grant (DFG).
- 4.2 Of the core £24.943m, £8,394 is ring fenced for out of hospital commissioned services and £7,082 is ring fenced for the protection of social care.
- 4.3 Wirral Health and Wellbeing board has approved a core budget of £28,967,864, which is a positive move to jointly committing to a pooled fund over and above the minimum requirement (see appendix 2).
- 4.4 A detailed risk share will be agreed with Directors of finance as part of the final pooled S75 agreement required for 30 June 2016.

5.0 LEGAL IMPLICATIONS

- 5.1 The Section 75 is a formal legal agreement and will have an accompanying and jointly agreed risk share agreement.

6.0 RESOURCE IMPLICATIONS: ICT, STAFFING AND ASSETS

- 6.1 N/A.

7.0 RELEVANT RISKS

- 7.1 N/A.

8.0 ENGAGEMENT/CONSULTATION

- 8.1. A stakeholder workshop was held in December 2015 to review progress in 15/16 and consider priorities for 16/17, in line with national requirements.
- 8.2 Steering group meetings have been held with key partners.
- 8.3 Monthly BCF board has been in place to oversee pooled budget spend and risk.

8.4. Health and Wellbeing Board members have been updated on a quarterly basis through the year.

9.0 EQUALITY IMPLICATIONS

Has the potential impact of your proposal(s) been reviewed with regard to equality?

(b) No because there is no relevance to equality.

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APPENDICES

Appendix 1 BCF Headlines 2016/17
Appendix 2 BCF Scheme Summary

REFERENCE MATERIAL

N/A

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Cabinet	13 March 2016
Health & Wellbeing Board	11 November 2015
Health & Wellbeing Board	8 July 2015
Health & Wellbeing Board	5 April 2015
Health & Wellbeing Board	12 November 2014
Health & Wellbeing Board	17 September 2014
Health & Wellbeing Board	25 March 2014
Health & Wellbeing Board	13 February 2014