



## Report of: Corporate Director of Housing and Adult Social Services

Meeting of	Date	Agenda Item	Ward(s)
Health and Wellbeing Board	October 15 <sup>th</sup> 2014	Item	All

Delete as appropriate	Exempt	Non-exempt

## SUBJECT: Better Care Fund submission – sign off

### 1. Synopsis

The Better Care Fund was announced in the June 2013 spending review and is aimed at supporting integrated working across health and social care. Islington Council and Islington CCG have worked jointly to develop our bid with an emphasis on three key areas:

- To support the work of the integrated care programme
- To support the continued investment in social care services that benefit health (for example reablement)
- To support the changes in social care as a result of the Care Bill, for example, a new statutory duty to assess the needs of carers.

The Better Care Fund plan spans two years, 2014/15 and 2015/16. 2014/15 is a preparatory year in which an additional £200m should be invested jointly and in 2015/16 the national figure is £3.8bn. Locally this equates to £5,894,000 in 2014/15 and £18,390,000 in 2015/16.

It is a requirement of the fund that the submission is signed off by the local Health and Wellbeing Board. The first submission of plans took place in April 2014. Subsequently, national changes were made to the policy framework underpinning the BCF. Renewed guidance was issued in July 2014 and submissions in line with the renewed guidance were required by 19<sup>th</sup> September 2014. Essentially the renewed guidance sought to address three issues:

- Concerns around the pay for performance element and implications for risk sharing

- Greater detail and assurance around plans for reducing hospital admission
- Lack of engagement of acute providers in developing plans

The Health and Wellbeing Board signed off the April and through Chair's action signed off the 19<sup>th</sup> September submission. This report provides some detail of the plan.

## 2. Recommendations

The Health and Wellbeing Board is asked to endorse the Better Care Fund Plan submitted to NHS England in September 2014.

## 3. Background

On 19<sup>th</sup> September 2014 Islington Council and Islington CCG submitted the BCF Plan to NHS England. The Plan sets out how we will use the Better Care Fund to support on-going integration of services.

This Section provides a summary of the schemes, both existing and new, to be funded through the BCF. The schemes are set out in further detail in the final BCF submission to NHS England.

### **14.01: Social Care investment to benefit health**

This existing funding (announced before the BCF) partially supports the core adult social care offer of assessment and care management. It provides services commissioned by the London Borough of Islington, including domiciliary and residential care.

### **14.02: Locality Development – Primary Care Discharge**

This new investment will support discharge arrangements across the system, ensuring a smooth transition between hospital and community care for high risk patients.

### **14.03: Locality Development – Rapid Response**

This new investment will support the pilot of the new integrated Rapid Response function from 2014/15 by providing timely clinical assessment and treatment to prevent admission or A&E attendance.

### **14.04: Locality Development – Integrated Health and Care Teams**

This new investment, spent across primary care, community health and social care teams, will develop new integrated health and care teams, wrapped around primary care, providing an integrated response to those patients most at risk of admission and other people who would benefit from a more joined up response.

### **14.05: IT Interoperability**

Better quality information and sharing information is critical to modernising the NHS and care services. This new investment supports a variety of IT developments across health and social care, with an approach of working towards increasingly interoperable systems. This funding would support the local contribution to the business case for a person-held record and integration engine.

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### **15.05: Reablement**

Reablement is funded from an existing Section 256 agreement and is commissioned via a joint Section 75 pooled budget between Islington CCG and London Borough of Islington. Reablement is provided by the Council and supports timely discharge from hospital and prevents admission by supporting people to become more independent in their own homes.

### **15.06: Disabled Facilities Grant**

This is an existing national scheme providing home adaptations to support independent living.

### **15.07: Community Capacity Capital Grant**

This is an existing national Department of Health grant to local authorities to support developments in personalisation, reform and efficiency.

### **15.08: Carers Funding**

Including some legacy funding for Carers, this investment recognises the key role carers play across health and social care in Islington. This investment will support carers through providing additional interventions such as breaks and information services.

### **15.09: Support Implementation of Care Act**

The Care Act 2014 brings together adult social care legislation in one place. Key developments from the Care Act include a duty to promote wellbeing, a 'cap' on charges for social care provision, a minimum national threshold for care and additional responsibilities for London Borough of Islington. This investment will support implementation of these responsibilities, and is a nationally mandated sum.

### **15.10: Develop Preventative Services**

Plans drawn up with Public Health, the Local Authority and the CCG will focus on the wider preventative strategies across the core partners to focus on existing and innovative preventative services which delay and reduce demand on more intensive health and social care interventions.

### **15.11: Protection of Adult Social Services – moderate needs**

Islington Council will maintain its current provision of services to people with Moderate FACS needs, reducing and delaying more intensive interventions. This investment ensures social care and support is available to more people across the borough.

### **15.12: Protection of Adult Social Services – demographic pressure**

This investment mitigates increased demographic pressures on Adult social care budgets, above and beyond the demands of the Care Act.

#### **15.13: Support mitigating pressures in health care for people with Learning disabilities and older people**

This investment will support demographic pressures and substantial growth in NHS funded Continuing Healthcare for people with Learning Disabilities and, to a lesser extent, Older People.

#### **15.14: Developing the Locality Offer**

This investment will increase capacity in primary care, social care and community health to support the shift in activity from hospitals to community through 2015/16. This is a key part of achieving the targets within the BCF of reducing hospital usage.

#### **15.15: Improving Access**

This investment will support increased access and opening times in Primary Care from 2015/16. A separate paper detailing the proposals is being presented to Strategy and Finance committee and Governing Body alongside this proposal.

#### **15.16: Incentivising Acute Hospitals to deliver change**

This funding will be used to incentivise and pump-prime service changes in acute settings including ambulatory care, enhanced recovery and pathway redesign in support of value based commissioning.

#### **15.17: Develop primary care capacity to support locality**

This investment will support primary care capacity to develop more networked models of operation, increasing ability to provide more federated models of operation. In particular this will support primary and community services to transform care for older people and reduce avoidable admission.

## **4. Implications**

### **4.1 Financial implications**

The Spending Review 2013 announced a pooled budget of £3.8 billion for local health and care systems in 2015/16.

This pool is referred to as the Better Care Fund (BCF). The purpose of the fund is to create:

*“a single pooled budget for health care and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities”*

The makeup of the national fund is:

- £1.9 billion existing funding continued from 2014/15 - this money will already have been allocated across the NHS and social care to support integration.
- £130 million Carers' Breaks Funding.
- £300 million CCG Reablement Funding.
- £350 million capital grant funding (including £220m of Disabled Facilities Grant).
- £1.1 billion existing transfer from health to social care.

It also includes funding to cover demographic pressures in adult social care and some of the costs associated with the Care Act.

The BCF guidance that has been released by the Department of Health is not explicit as to the expected practical legal mechanisms underpinning the BCF. The inter relationship between the BCF and the Children and Families Bill and the Care Act is not clear and it is hoped that this will be made more explicit during 2014/15.

The national figures included in the proposed pool are primarily existing NHS resources, some of which are already transferred to local authorities and a significant sum which is expected to be transferred from the acute sector into community based services. The Local Government Settlement (released on 18 December 2013) identified the 2015/16 Islington BCF as £18.388m. An estimated breakdown of the Islington allocation is shown below.

	National Total	Islington Total	Organisation
	£m	£m	
NHS transfer from SR010 and 2012 White Paper	900	4.822	Held by NHS England, accessed by LBI via s.256 with CCG, and agreed by HWB
Additional NHS Transfer	200	1.072	Further Transfer to Social Care in 2014/15 (held by NHS England) to prepare for BCF.
Reablement Funding	300	1.20	LBI s.75 – Intermediate care pool
Disabled Facilities Grant	220	0.693	LBI capital funding
Social Care Capital Grant	134	0.716	New LBI capital in 2013/14
Carers	130	0.415	LBI/CCG
NHS Funding Transfer (Care Act)	135	0.663	LBI – Support Implementation of Care Act.
NHS Funding transfer	795	3.899	LBI/CCG - Development of preventative services, the protection of social care services and support mitigating pressures in health care for people with learning disabilities and older people.
NHS Funding transfer	1,000	4.908	CCG - Performance related payment
	<b>3,814</b>	<b>18.388</b>	

These changes will need to be planned in the context of significant reductions in Council funding together with increased responsibilities arising from the Care Act.

## 4.2 Legal Implications

Section 121 of the Care Act 2014 makes provision for a fund for the integration of care and support with health services to be known as the “Better Care Fund” (“BCF”). This provision is a mechanism which allows the sharing of NHS funding with local authorities to be made mandatory. Section 121 (1) of the Care Act 2014 amends section 223B of the National Health Service Act 2006 (funding of the National Health Service Commissioning Board) to allow the Secretary of State (“SoS”) to specify in the mandate to NHS England a sum which the Board must use for objectives relating to integration. The mandate is given to the Board by the SoS under section 13A of the National Health Service Act 2006 Act. “Service integration” is defined as the integration of health services with health related or social care services.

Section 121( 2) of the Care Act 2014 inserts a new section 223GA into the National Health Service Act 2006 which allows the Board to direct clinical commissioning groups (CCGs) to use a designated amount of their financial allocation for purposes relating to service integration. It also makes provision for how the designated amount is to be determined. Payment of the designated amount must be subject to a condition that the CCG pays the money into a pooled fund established under arrangements made with a local authority under section 75 of the National Health Service Act 2006. In exercising its powers in relation to

the Better Care Fund, the Board must have regard to the need for provision of health services, health-related and social care services.

The BCF provides for £3.8 billion worth of funding to be spent locally on health and care to facilitate closer integration and improve outcomes for patients, service users and carers. A condition of accessing the money in the BCF is that CCGs and local authorities must jointly agree plans setting out how the money will be spent and these plans must meet certain requirements.

On 25 July 2014 revised BCF planning guidance was issued to Health and Wellbeing Boards (“HWBs”). This guidance was issued following a letter from the Department of Health to Chairs of HWBs dated 11 July 2014 requiring all areas to submit revised and strengthened plans together with additional information so as to ensure that they are in the best position to deliver more integrated health and social care. The July 2014 revised guidance sets out a number of key policy changes to the BCF, additional requirements for the revised plans and the timetable for plan development, assurance and sign off by the HWB. The revised planning templates issued with the guidance require further detail on the protection of social care services, including the new duties resulting from the Care Act 2014. Local plans are required to consider how the BCF may be used to support common areas of focus which will deliver the requirements of the Care Act 2014 but also underpin shared local priorities.

The timetable specified that revised BCF plans were to be submitted by 19 September 2014. The revised guidance states that the Government will use the NHS Mandate for 2015/16 to instruct NHS England to ring fence its contribution to the Fund and to ensure that this is deployed in specified amounts at local level for use in pooled budgets by CCGs and local authorities.

#### **4.3 Equalities Impact Assessment**

No equalities impact assessment has been undertaken with the draft plan.

#### **4.4 Environmental Implications**

No environmental impact assessment has been undertaken with the draft plan.

### **5 Conclusion and reasons for recommendations**

The Better Care Fund has been introduced in order to drive better integration between health and social care at a national level. Islington has a legacy of excellent joint working through Section 75 and Section 256 arrangements and is also a Pioneer site for Integrated Care where we hope to deliver a step change to health and care outcomes in Islington, as well as improving the patient/user experience of care.

Our plans for the Better Care Fund are therefore closely aligned to the Integrated Care programme with investments across health and social care that will support more personalised and co-ordinated approaches to care that are delivered locally. These plans also support the strategic aims of the Council in terms of delivering more personalised supports; of the CCG in terms of delivering care closer to home and of course with the four priorities of the Health and Wellbeing Board.

**Background papers:** Annex to the NHS England Planning Guidance - Developing Plans for the Better Care Fund (see link below)

<http://www.local.gov.uk/documents/10180/12193/Developing+plans+for+better+care+fund+guidance.pdf/734c155e-7820-4761-976a-6c56053c0e78>

**Attachments:** Appendix 1 – Better Care Fund narrative  
Appendix 2 – Better Care Fund finance and performance schedule

**Final Report Clearance**

**Signed by**



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**Corporate Director of Housing and Adult Social Services**

Date: 3<sup>rd</sup> October 2014

**Received by**

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Head of Democratic Services

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Date

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