

**To the Chair and Panel of the
Health and Adults Overview and Scrutiny Panel**

Report on the Better Care Fund Programme

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Patricia Knight	All	N/A

1. EXECUTIVE SUMMARY

- 1.1 This paper is presented on behalf of the Strategic Health and Social Care Partnership Board (SHSCP). The Board is jointly chaired by the council's Chief Executive and Doncaster Clinical Commissioning Group's Chair and includes Chief Executives and senior representatives from the Doncaster Clinical Commissioning Group (DCCG), DMBC Adult Social Care and Public Health Directorates, Doncaster and Bassetlaw Foundation Trust and Rotherham, Doncaster and South Humber Foundation Trust. It is responsible for achieving a number of aims and objectives including:

To oversee the development and implementation of a joint programme of work which responds to and addresses key priorities and seeks to deliver shared social care and health outcomes using the pooled budget arrangements of the Better Care Fund.

- 1.2 In January 2014 a paper was submitted to the Doncaster Health and Well Being Board (HWBB) outlining intentions for delivering the Better Care Fund programme in Doncaster. The Better Care Fund is a national initiative which aims to accelerate fundamental changes in the health and social care system and to drive forward joint commissioning and integrated service delivery at an increased pace. The paper outlined the proposed principles, values and governance of operation, early priority areas for budget allocation and discussion on the impact and risk of the changes for DCCG and the Council.
- 1.3 Following endorsement of this paper by the Doncaster H&WBB, first and second cut Better Care Fund plans were submitted to the Local Government Association and NHS England in February and June 2014. The Better Care Fund plan in Doncaster is built upon the foundations of existing joint planning and commissioning arrangements. Since 2012, the transfer of health monies to social care have been utilised as a joint transformation fund, to develop new ways of working, support transition in the health and social care system and work toward integration of services. This programme was called the Supporting and Maintaining Independence Programme and this programme of schemes and associated funding stream has now been incorporated into the Doncaster Better Care Fund plan.
- 1.4 The feedback on first and second cut plans from NHS England and the LGA Peer review process was positive and received a green RAG rating for 9 out of the 12 conditional domains, with only minimal adjustments recommended to achieve a full green RAG status.

- 1.5 Better Care Fund plans and allocation of the pooled budget are subject to five national and one local metric and eight national conditions (set by the Department of Health) which will be used to demonstrate the effectiveness of local Better Care Fund Plans. These are:

Better Care Fund Metrics

- Admissions to residential and care homes
- Effectiveness of reablement
- Delayed transfers of care
- Reduction in non-elective admissions
- Patient/service user experience
- Number of Telecare installations (Local Measure)

Better Care Fund Conditions

- Protection for social care services
 - As part of agreed local plans, seven-day working in health and social care to support patients being discharged and prevent unnecessary admissions at weekends
 - Better data sharing between health and social care, based on the NHS number
 - Ensure a joint approach to assessments and care planning
 - Ensure that, where funding is used for integrated packages of care, there will be an accountable professional.
 - Risk-sharing principles and contingency plans if targets are not met – including redeployment of the funding if local agreement is not reached
 - Agreement on the consequential impact of changes in the acute sector.
 - Wide stakeholder involvement.
- 1.6 NHS England will also make it a condition of the transfer that the council and the DCCG have regard to the Joint Strategic Needs Assessment for their local population and demonstrate how the funding transfer will make a positive difference to social care services and outcomes for service users compared to service plans in the absence of the funding transfer.
- 1.7 The funding can be used to support existing services or transformation programmes, where such services or programmes are of benefit to the wider health and care system, provide good outcomes for service users. The funding can also support new services or transformation programmes, again where joint benefit with the health system and positive outcomes for service users have been identified.

Key changes to Better Care Fund guidance

- 1.8 On July 25th 2014 new guidance and changes to the Better Care Fund arrangements, including changes to national conditions, targets and performance related payments, were announced by NHS England. This new guidance has resulted in the need for all areas to revise their original submissions by 9th September 2014. The changes and revised guidance are set out below.
- 1.9 The original metric of reduction of avoidable admissions has now been changed to a reduction in all non-elective admissions by at least 3.5%. This target is significantly higher than current Doncaster trajectories and may therefore have implications for priorities within the plan. The SHSCP is currently reviewing and analysing existing Better Care Fund plans to determine whether a refocus of schemes to deliver the reductions is required.
- 1.10 There is also a key change to the way that the pay for performance will be managed in 2015/16. £6 million will now link to the 3.5% reduction target being achieved.

- 1.11 In response to these changes the SCHPB has agreed the following actions to ensure the Better Care Fund programme can continue in a stable and sustainable way:
- Review existing schemes against the revised admission to hospital metric
 - Maintain focus on the current plans but review admission data to assess whether some schemes need to be refocused.
 - Agree a financial model to support the current Better Care Fund programme until transformational programmes impact
 - Assess contribution of the Resilience plans, Delivery Plans, Primary Care Investment on reducing admissions.
- 1.12 Although the outcome of this analysis process is not yet complete and may result in additional or revision of some schemes, it is unlikely that the overall pooled budget amount will change.
- 1.13 The timeline for the 3rd cut submission is as follows;

Guidance and templates issued	July 25th
Support to local areas to strengthen plans	July 28th-Sep19th
Checkpoints for regional support	Aug 8 th , 29 th , Sep 12th
Revised plans submitted	September 19th
Desktop review of plans	Sep 22 nd - Oct 3rd
Moderation exercise complete	October 10th
Final presentation and sign off by ministers	Oct 17th

2. EXEMPT REPORT

This is not an exempt report.

3. RECOMMENDATIONS

For Health and Adults Overview and Scrutiny Panel to note the report and make comment as appropriate.

4. WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

- 4.1 The aim of the Better Care Fund is to transform the culture of care and support in Doncaster to be more person centred, individualised, connected as a minimum, integrated where possible, easy to navigate and focused on outcomes. It aims to focus equally on building strong and resilient communities that are supported to take an equitable share of health and social care responsibility and recognise that communities will be as important as statutory partners in delivering an integrated system.
- 4.2 People will be at the centre of a Better Care Fund co-produced offer. The Better Care Fund should give people the 'single key' to the care and support they need. This means that care and support for local people will look and feel different, for example;
- People will avoid going to hospital for a lot of their care, services will be provided much closer to where they live.
 - Care will be provided in a holistic and integrated way across health and social care services

- Service users and Doncaster people will co-produce with providers and commissioners a health and social care system that is easy to navigate and understand
- Services will be available when required, not just during the week
- Care provision will be co-ordinated and service users will know who their lead accountable professional is.
- Services will be commissioned to support service users in their own home to manage their condition and maintain independence.

5. BACKGROUND

- 5.1 The Better Care Fund provides a critical opportunity to build on existing joint and integrated working in Doncaster. Although significant progress has been made towards joint planning and commissioning and integrated service delivery, the aim of the Doncaster Better Care Fund plan is to accelerate further fundamental changes to the health and social care system and the way we plan and deliver service in Doncaster, using existing and additional collective resources.
- 5.2 There are 14 key schemes within the Better Care Fund plan within 3 main themes, Community and Universal, Short Term and Long term. The total programme contains at least 30 separate transformational projects and activities, which together aim to make fundamental changes to the health and social care system and the way care and support is delivered in Doncaster.

Community and Universal Programme

The strategic intent of this theme is to release personal, community, state, private and third sector assets to increase community self-help and increase the effectiveness of coproduction to improve health and wellbeing.

It focuses on three areas, community capacity building using the Think Local, Act Personal framework for Health and Wellbeing Boards, ensuring a consistent approach to the voluntary, community and faith sectors and maximising the role of universal services.

Short Term Programme

Interventions that preserve the independence of people, the aim being that patients are supported to maintain independence in their own home as long as possible. The service offer will focus on rehabilitation, independence and care as close to home as possible.

Long Term Programme

Responsive and tailored support for individuals when their needs become long term. The aim being the long term care, support or treatment at home, in the community and within institutional settings

Better Care Fund Scheme projects

The fourteen detailed schemes as follows:

1. Community Capacity
2. Targeted Support
3. Falls
4. Admission Avoidance Schemes
5. Reablement Services
6. Discharge Schemes
7. Intermediate Care

8. End of Life
9. Doncaster Equipment Services
10. Mental Health Including Crisis
11. Dementia Schemes
12. Supporting Carers Including Respite Services
13. Personalised Support
14. Housing Options

Better Care Fund finance allocations

- 5.3 Within the June 2013 spending review the government announced the local area allocations for the Better Care Fund, much of it by the re-badging of existing funding. The allocations for Doncaster are as follows;

In 2015/16 the pooled budget will total £24,163k which is made up of;

- o £11,953K NHS funding
- o £818k NHS carer break funding
- o £1,887k CCG re-ablement funding
- o £2,085k capital funding(including £1,224k of Disabled Facilities Grant
- o £6,920k existing transfer from health to Social care

In addition and in order to prepare for the implementation of pooled budget arrangements an additional £1,258k has been allocated in 2014/15.

- 5.4 Together these plans will result in the following financial allocations for schemes in 2014/15 and 15/16.

Analysis of Planned Spend		2014/15	2015/16
Service Areas		£'000s	£'000s
1	Community Capacity	1938	953
2	Targeted Support	111	111
3	Falls	75	125
4	Admission avoidance schemes	118	1085
5	Reablement Services	1748	3751
6	Discharge Schemes	532	1261
7	Intermediate care	170	3307
8	End of Life	0	100
9	Doncaster Equipment Services	665	5056
10	Mental health services including crisis	100	1956
11	Dementia Schemes	136	1735
12	Supporting carers including respite services	442	2605
13	Personalised Support	596	796
14	Housing Options	289	1323
	Total Spend	6,920	24,164

- 5.5 The Better Care Fund also forms part of the Care Act funding. A separate report will be submitted to cabinet, detailing the responsibilities as part of the Care Act.

6 IMPACT ON THE COUNCIL'S KEY PRIORITIES

- 6.1 The report impacts on the following Council priorities.

Priority	Implications
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	<p>We will support a strong economy where businesses can locate, grow and employ local people.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>The Better Care Fund will invest in the development of the local health and social care provider market ensuring that local services, skills and the range and type of provision is fit for purpose.</p>
	<p>We will help people to live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>The programme will support and fund a range of initiatives that will enable service users to remain in their own homes for longer, with increased independence and with safer living regimes.</p>
	<p>We will make Doncaster a better place to live, with cleaner, more sustainable communities.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>The Better Care Fund will invest in community and universal services which support grassroots development of services and support which maintain independence. In particular support for carers and families will be central to the programme approach.</p>
	<p>We will support all families to thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Quality and safety will be at the heart of provided services. People are kept safe and protected from all avoidable harm.</p>
	<p>We will deliver modern value for money services.</p>	<p>The programme will support and fund a major shift in the type and nature of social care ensuring services are modernised, efficient, connected and integrated where possible.</p>
	<p>We will provide strong leadership and governance, working in partnership.</p>	<p>The programme will focus on developing the systems, processes and workforce required to deliver a modernised adult social care and health service organisations.</p>

7 LEGAL IMPLICATIONS

The Council may pursue this initiative in accordance with its powers under S1 of the Localism Act 2011. As the project progresses further specific legal advice will be required.

8 FINANCIAL IMPLICATIONS

The details of the funding allocations are shown in paragraph 4.7. The SHSCP is putting the minimum funding into the pooled budgets although there is local discretion

to increase this.

The Better Care Fund for 2015/16 is £24.163m. This is made up of £22.078m from Health allocations and £2.085m from Local Authority resources (Community Capacity and Disabled Facilities Grants (D.F.G's)).

For 2014/15 the current DMBC capital funding, this is not wholly ring fenced to the Adult Social care service.

DFGs are currently (2014/15) ring-fenced to carry out DFG work, however the Community Capacity Grant is ring-fenced by Council policy to support the Council's corporate priorities. This will change from 2015/16.

The individual project approvals will be subject to the appropriate Council / CCG governance arrangements and the specific financial implications considered and reported upon at the time

9 CONSULTATION

The Better Care Fund programme is overseen by the SHSCP. The SHSCP reports to the Doncaster Health and Well-Being Board. All members of these boards will be consulted before the Better Care Fund plan is submitted.

10 BACKGROUND PAPERS

Better Care Fund Guidance documents

<http://www.england.nhs.uk/wp-content/uploads/2014/07/bcf-rev-plan-guid.pdf>

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