

21st April 2016		ITEM: 5
Health and Wellbeing Board		
Thurrock Better Care Fund Plan 2016-17		
Wards and communities affected: All	Key Decision: Non-key	
Report of: Roger Harris, Corporate Director of Adults, Housing and Health; and Mandy Ansell, Acting Interim Accountable Officer Thurrock Clinical Commissioning Group		
Accountable Head of Service: n/a		
Accountable Director: Roger Harris, Corporate Director of Adults, Housing and Health; and Mandy Ansell, Acting Interim Accountable Officer Thurrock Clinical Commissioning Group		
This report is Public		

Executive Summary

All local areas were required to have Better Care Fund Plans in place between local authorities and Clinical Commissioning Groups from 2015-16. The requirement continues into 2016-17.

Thurrock's Better Care Fund focuses on people aged 65 and above who are most likely to be at risk of hospital or residential home admission. The Plan has been refreshed for 2016-17 and includes four clear schemes. The Plan includes an expanded focus on prevention and early intervention.

The Plan is subject to a regional assurance process. Subject to the writing of this report, feedback from the assurance process had not been received. This means there could be changes to the Plan between now and the submission deadline of the 2nd May 2016.

The ambition locally is to increase the pooled budget so that Thurrock has a fully integrated pooled budget for older people across health and social care. Because of this, the value of the Fund for 2016-17 ranges from £19m to £27m. The final Fund size will be confirmed at the meeting of the 21st April but is currently subject to further discussion and agreement.

As brought to the Board's March meeting, the Fund and how it is spent is governed by a Section 75 agreement, the arrangements of which have been agreed.

1. Recommendation(s)

That the Health and Wellbeing Board:

1.1 Agree Thurrock's Better Care Fund Plan 2016 – 2017; and

1.2 Agree to delegate approval of any changes made to the Plan after the 22nd April Board meeting to the Chair, Corporate Director of Adults, Housing and Health, and Acting Interim Accountable Director (Thurrock CCG).

2. Introduction and Background

2.1 The Better Care Fund requires Clinical Commissioning Groups and local authorities to pool budgets and to agree an integrated spending plan for how they will use their Better Care Fund allocation. The 2015-16 national allocation was £3.8 billion. In 2016-17 the national mandatory minimum allocation amounts to £3.9 billion.

2.2 Thurrock's 2015-16 Plan focused on people aged 65 and above, totalled £18 million and contained seven key schemes:

- 1 – Locality Service Integration;
- 2 – Frailty Model;
- 3 – Intermediate Care Review;
- 4 – Prevention and Early Intervention;
- 5 – Disabled Facilities Grant and Social Care Capital Grant;
- 6 – Care Act Implementation; and
- 7 – Payment for Performance.

2.3 The Policy Framework for the 2016-17 Better Care Fund clarified the changes between the 2015-16 guidance and 2016-17 guidance. Key changes are the removal of £1 billion payment for performance – worth £722k for Thurrock (scheme 7), and in place of this the requirement for local areas to fund NHS commissioned out-of-hospital services and develop a clear action plan for managing delayed transfers of care (DTC).

2.4 Whilst the £722k payment for performance scheme has been removed from the 2016-17 Plan, it has been re-directed within the Plan to support the delivery of effective reablement and intermediate care.

2.5 The report asks the Board to approve Thurrock's 2016-17 Plan, and also asks the Board to agree to delegate the approval of any further changes to the Board's Chair, Director of Adults, Housing and Health, and Acting Interim Accountable Officer (Thurrock CCG).

3. Issues, Options and Analysis of Options

Focus

- 3.1 The 2016-17 Plan continues to focus on those aged 65 and over who are most at risk of admission to hospital or a residential setting. This is a continuation from 2015-16. Additionally, the Plan expands its focus on prevention and early intervention as the key to managing demand and resource.
- 3.2 The Plan has been reviewed to ensure that its vision and direction of travel aligns with Thurrock's refreshed Health and Wellbeing Strategy. In particular, the Plan supports the delivery of goal D (Quality care centred around the person) and has strong links to objectives against goals B and E. Additionally, the Plan contributes towards the local implementation of the Five Year Forward View through incorporating the CCG's 'For Thurrock In Thurrock' transformation plan.
- 3.3 There is an aspiration to increase the pooled budget so that we have a fully integrated pooled budget for older people across health and social care. The 2016-17 Plan will therefore range from £19 million to £27 million. Discussions on the total amount are still being finalised and will be communicated at the 21st April meeting. The Fund is likely to exceed the 2015-16 amount.

Schemes

- 3.4 There are four schemes contained within the 2016-17 Plan compared to seven in the 2015-16 Plan. These are:

1 – Prevention and Early Intervention – including both existing and developing initiatives the span the community, public health, health and social care system. The scheme is expanded from 2015-16 and brings a stronger focus on preventing ill-health and reducing and delaying the need for increased health and social care interventions.

2 – Out of Hospital Community Integration – the scheme focuses on the development of locality-based integrated community health and care teams and aims to enable care closer to or at home whenever it is possible. This includes plans to develop Integrated Healthy Living Centres across the Borough.

3 – Intermediate Care – the scheme focuses on ensuring individuals are in the most appropriate bed when a bed is required and enabling effective reablement and rehabilitation via that intermediate care bed provision. The scheme includes investment in locality-based Integrated Community Teams.

4 – Disabled Facilities Grant – This scheme contains the funding received to support major adaptations for owner occupiers, private tenants or housing association tenants. It also contains funding previously known as the Social Care Capital Fund.

The scheme totals are detailed below:

Scheme Ref	Scheme Name	Amount £000s
1	Prevention and Early Intervention	Circa £2,571,695
2	Out of Hospital Community Integration	Up to £16,773,337
3	Intermediate Care Review	Up to £6,587,158
4	Disabled Facilities Grant	£899,098
		In the range £19m to £27m

3.5 Schemes removed from the 2015-16 Plan and the rationale for doing so is as follows:

- Scheme 2 – Frailty Model – this scheme has been incorporated within the ‘Out of Hospital Community Integration’ scheme (2);
- Scheme 6 – Care Act Implementation – the £522k contained within this scheme is used to support initiatives that are contained within other schemes; and
- Scheme 7 – Payment for Performance – the £722k set aside for this scheme has been redirected against other schemes within the 2016-17 Plan.

Next Steps

3.6 An early draft of the current Plan was submitted to NHS England on the 21st March. The Plan was subject to a regional assurance process against numerous key lines of enquiry (KLOE). At the time this report was written and published, formal feedback was yet to be received. As a result, the contents of the Plan are likely to change – the extent of the change is dependent upon how many of the KLOEs we are yet to meet. Once the feedback has been received from both the assurance process and the Health and Wellbeing Board, the Plan will be updated and submitted by the 3rd May 2016 deadline (previously 25th April).

3.7 Subject to the assurance process, Thurrock’s Plan will be rated against the following levels:

- Approved;
- Approved with support; and
- Not approved

It is likely that the final status of Thurrock’s Plan will not be known until June 2016 as the expectation is that all Section 75 agreements should be signed and in place by the 30th June 2016.

3.8 Once Thurrock's Plan has been approved, the Section 75 Agreement for 2016-17 can be finalised. A report was brought to the March 2016 Board meeting which set out the arrangements for entering into a Better Care Fund Section 75 Agreement for 2016-17. As stated in 3.7, the Department of Health Technical Guidance Annex 4 states that all Section 75 agreements should be signed and in place by the 30th June 2016.

4. Reasons for Recommendation

4.1 All Clinical Commissioning Groups and local authorities in every single area are required to pool budgets and set out how they will use their Better Care Fund allocation.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 Specific elements of the Better Care Fund have or will be subject to consultation and engagement as appropriate – for example Thurrock CCG's Transformation Plan 'For Thurrock In Thurrock'.

6. Impact on corporate policies, priorities, performance and community impact

6.1 The Plan contributes to the 'Improve Health and Wellbeing Priority'. It also contributes towards the delivery of the refreshed Health and Wellbeing Strategy 2016 – 2021.

7. Implications

7.1 Financial

Implications verified by: **Mike Jones**
Management Accountant

The Better Care Fund is made up of contributions from the Council and Thurrock CCG. The mandated amount as published on the 9th February 2016 is £9,871,000 for Thurrock CCG and £899,000 for Thurrock Council. Additional contributions for 2016-17 will range from £8m - £15m.

The nature of the expenditure is an agreed ring-fenced fund. Financial risk is therefore minimised and governed by the terms set out in the Section 75 agreement.

7.2 Legal

Implications verified by: **Paul O'Reilly**
Projects Lawyer

Entry of the Council into the Better Care Fund Agreement is governed by S75 of the NHS Act 2006. The procurement of specific services by the Council utilising the Better Care Fund is a separate process for consideration and will be the subject of a further report. Legal Services will ensure its continuing availability to support the Corporate Director of Adults, Housing and Health and appropriate colleagues.

7.3 **Diversity and Equality**

Implications verified by: **Natalie Warren**
**Community Development and Equalities
Manager**

The vision of the Better Care Fund is improve outcomes for patients, service users and carers through the provision of better co-ordinated health and social care services. The commissioning plans developed to realise this vision will be developed with due regard to equality and diversity considerations.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Technical guidance Annex 4 – Better Care Fund Planning Requirements for 2016-17;
- 2016/17 Better Care Fund Policy Framework January 2016; and
- Thurrock Better Care Fund 2015-16.

9. **Appendices to the report**

- Thurrock Better Care Fund Plan 2016-17
- Integrated Commissioning Executive Notes 18th March 2016
- Integrated Commissioning Executive Notes 30th March 2016

Report Author:

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Adults, Housing and Health