

**BETTER CARE FUND**

To: Health and Wellbeing Board

Date: 10<sup>th</sup> December 2014

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**1.0 PURPOSE**

1.1 The purpose of this paper is to update the Board on arrangements for the Better Care Fund (BCF) in Cambridgeshire following the Government's Nationally Consistent Assurance Review (NCAR) of BCF plans; and to seek approval of the process for sign-off of the amended BCF plans.

**2.0 BACKGROUND**

2.1 The BCF was announced by the Government in the June 2013 spending round, with the aim of supporting transformation in integrated health and social care. The BCF was announced as a single pooled budget to support health and social care services to work more closely together in local areas. The pooled budget is expected to be in place from April 2015. In Cambridgeshire, the amount allocated to the fund is £37.7m. This is not new money granted by Government, but rather a re-organisation of existing funding that is currently used to provide health and social care services in the county. Figure 1 below demonstrates the sources of funding for the BCF both nationally and locally.

	<b>National allocations</b>	<b>Cambridgeshire allocations</b>
CCG Carers' Break funding	£139m	£1.3m (estimated)
CCG reablement funding	£300m	£3.0m (estimated)
Disabled Facilities Grant	£220m	£1.923m
Social care Capital Grant	£134m	£1.294m
S256 transfers from health to Social Care	£1,100m	£10.652m
Additional NHS funding (from existing CCG budgets)	£1,900m	£18.169m
Total	£3.8bn	£37.668m

2.2 The Health and Wellbeing Board previously approved plans for submission to

central Government in February, April and September 2014. The background to this process is outlined in more detail in the papers for the 11 September 2014 Health and Wellbeing Board meeting.

2.3 The Government subsequently undertook an intensive review of BCF plans nationally– a process known as the Nationally Consistent Assurance Review (NCAR). NHS England wrote to Health and Wellbeing Board Chairs with feedback on plans on 29 October. Initial assessment was conducted by KPMG on behalf of NHS England, and plans went through four approval levels, finally being considered by Ministers and the Secretary of State for Health. All plans were assessed as falling into one of four categories:

- Approved
- Approved with support (where additional information is required)
- Approved with conditions (for plans that do not fully meet the national conditions)
- Not approved (likely to be reserved for areas that do not submit a plan or submit a plan that does not meet national conditions).

2.4 Following the NCAR process, Cambridgeshire’s plan was rated as ‘approved subject to conditions’, in common with 48 other Health and Wellbeing Board Areas. Nationally, six plans were ‘approved’, and only five were ‘not approved’; 92 were approved with support.

### **3.0 CAMBRIDGESHIRE’S FEEDBACK**

3.1 Cambridgeshire’s BCF Plan has been rated as ‘Approved subject to conditions’. Most of the conditions relate to elements of detail that were not available at the time of submission, primarily due to the timescales of the Older People and Adult Community Services procurement by the CCG (the Preferred Bidder was not appointed until 30 September, after the submission deadline). In summary, feedback was:

*The assessment of Cambridgeshire’s BCF plan is dominated by one issue, namely the fact that the procurement process for an Older People and Community Services (OPACS) rightly prevented a lot of specific detail being incorporated in the latest version. Delivering the desired outcomes to achieve the vision is very much dependent on the success of the appointed provider (named on 1 October). However, Cambridgeshire has signed up only to a 1% reduction in non-elective admissions on the grounds that they are rising [on a trend equivalent to] 7% year on year and, by comparison with [other areas], they start from a low base. The volume of further detail needed was such that it could not be provided within a one month timeframe, and in particular further detail is needed in relation to the approach for providing a Lead Accountable Health Professional. ... For the reasons outlined, the narrative is short on detail.*

3.2 The feedback suggests that a 1% reduction in emergency admissions, the subject of much discussion by the Health and Wellbeing Board, will be acceptable given the increasing trend and low base in Cambridgeshire. Our specific conditions which must be addressed for the plan to be fully assured are as follows:

- **Condition 1f: The plan must further demonstrate how it will meet the national condition of having an accountable professional who can join up services around individuals and prevent them from falling through gaps**  
This relates to the 'Joint Assessment' project – reviewers felt that more information was needed to show that the approach to joint assessment would include having an accountable professional for each individual that received a joint assessment
- **Condition 4a: The plan must address the outstanding narrative risks identified in the NCAR report**  
This related to a range of elements in Part 1 of the report (the narrative); these were mainly areas where additional detail was requested, particularly in relation to services falling within scope of the Older People and Adult Community Services procurement
- **Condition 4b: The plan must address the outstanding financial risks identified in the NCAR report**  
This related primarily to a request to provide more information on how the 2014/15 funding linked to the section 256 agreement is being used.
- **Condition 4c: The plan must address the outstanding analytical risks identified in the NCAR report**  
This related to some specific issues in the Excel spreadsheet where our answers were unclear

3.3 In all there are twenty outstanding 'risks' in our report, which need to be addressed in order to satisfy the conditions above. There is nothing to indicate that NHS England will not accept Cambridgeshire's proposed level of NHS Emergency Admissions, which is set at 1% which is a less ambitious level than the requested target of 3.5%.

#### **4.0 RESPONDING TO THE NCAR AND RESUBMISSION**

- 4.1 The Government has allocated a 'Better Care Adviser', David White, to work with Cambridgeshire in addressing the conditions. David White met with representatives from the Cambridgeshire system including the Chair of the Health and Wellbeing Board, to discuss the NCAR findings on 7 November. Following the meeting, officers were required to submit an action plan identifying how Cambridgeshire would respond to the conditions in its NCAR report, this was submitted on 14 November and is attached as Appendix 1.
- 4.2 In order to address the conditions, Cambridgeshire has been asked to resubmit its BCF plan again, no later than 9 January 2015. This new plan should address the conditions outlined above. Officers have begun the process of developing the next iteration of the plan, in consultation with the Better Care Adviser. An update on progress will be provided at the meeting.
- 4.3 The majority of changes required to the BCF plan are questions of detail – it is not envisaged that the overall direction set out in the plan will change. However, despite this, the resubmission process will require intensive work particularly from the County Council and Clinical Commissioning Group (CCG). Significantly more information is now available to inform the plan and address the level of detail required following the conclusion of the CCG's Older People and Adult Community Services (OPACS) procurement and the appointment of Uniting

CarePartnership (UCP) as the Lead Provider. In addition, our Better Care Adviser, David White, has given a clear steer that Cambridgeshire and Peterborough would both benefit from a closer alignment of their plans – Peterborough’s BCF plan has also been approved with conditions, and David White is also the Advisor in Peterborough

- 4.4 If Cambridgeshire were unable to demonstrate that it can meet its conditions; or failed to submit a revised plan on 9 January 2015, further conditions would be imposed which would reduce flexibility and require additional reporting. However, the Government’s intention is that as many areas as possible will proceed to being approved ‘with support’.
- 4.5 Work is ongoing on the next iteration of the BCF plan through constructive discussions between the County Council and CCG.. The County Council and CCG also continue to work closely with Peterborough City Council to align our approaches where possible. We expect that by the date of this meeting of the Health and Wellbeing Board, there will still be significant work to do on the submission. We will therefore provide a verbal update on progress and matters outstanding.
- 4.6 As these discussions will inform and shape the final submission, and work will continue until the submission deadline, delegation is requested to the Director of Public Health in consultation with the Chair and Vice Chair of the Health and Wellbeing Board in order to finalise and submit the templates on 9 January 2015.
- 4.7 At the same time, discussions have begun relating to the establishment of the formal partnership mechanisms required for a pooled budget, led by the Integration and Transformation Team. Whilst the intention is that all local areas will proceed with the BCF, NHS England has given a strong steer that local areas should not enter into any contractual obligations or section 75 partnership agreements until any conditions on their plan have been addressed. Therefore, no formal agreement will be sought for budgetary arrangements to support the BCF before late January 2015 at the earliest, and is proposed that further discussion on these arrangements would be helpful at the Board’s January meeting.

## **5.0 RECOMMENDATION / DECISION REQUIRED**

5.1 It is recommended that the Health and Wellbeing Board:

- notes the report and provides comments on the draft BCF templates (to follow); and
- delegates authority for completion and submission of the BCF templates to the Director for Public Health in association with the Chair and Vice-Chair of the Health and Wellbeing Board.

Source Documents	Location
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***Vision, ambition, scope for integrated health and social care services in Cambridgeshire***

***Better Care Fund proposals***

Both from Health and Wellbeing Board 13 February 2014, available from

<http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/AgendaItem.aspx?agendaItemID=9021>

***Item 4, Appendix A (BCF submission)***

From Health and Wellbeing Board 2 October 2014, available from

<http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/AgendaItem.aspx?agendaItemID=10369>

***Better Care Fund updated guidance and templates***

<http://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/>

***Cambridgeshire NCAR Summary, October 2014***

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