

PLANNING FOR THE BETTER CARE FUND 2016-17

To: Health and Wellbeing Board

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From: Adrian Loades, Executive Director – Children, Families and Adults Services

Tracy Dowling, Chief Operating Officer, Cambridgeshire and Peterborough CCG

1.0 PURPOSE

1.1 The purpose of this report is to provide Health and Wellbeing Board members with an update on the Better Care Fund (BCF) planning process for 2016/17 and request input to the Cambridgeshire BCF plan.

2.0 BACKGROUND

2.1 The BCF was created to form a joint budget to help health and social care services to work more closely together in each Health and Wellbeing Board area. The BCF came into effect in April 2015 and in Cambridgeshire the BCF totalled £37.7 million for 2015/16, which was brought into the BCF from existing health and social care budgets. The BCF is designed to support better integration of health and social care to improve services for the most vulnerable people in the community; provide better support for carers and create efficiencies. In the first year of BCF most funding remained in community health and social care budgets, particularly supporting the Clinical Commissioning Group (CCG)'s Older People and Adult Community Services (OPACS) contract; and a smaller amount of funding has been focused on medium term projects that will begin to support our shared outcomes.

2.2 Following significant delays, Better Care Fund Technical Guidance was issued on 23 February 2016. The guidance describes the process for developing and agreeing Better Care Fund plans in each local area, and sets out the changes to the Better Care Fund that are being made in 2016/17. A link to the guidance is provided below. Given the delays in publication of the guidance, the timescales for developing a new plan are short:

23 February	Technical guidance issued
2 March	First submission; part 2 only, including Budget lines and Performance metrics
21 March	Full submission: as above with a narrative plan updating the 2015/16 BCF plan
25 April	Final submission, with Health and Wellbeing Board approval.

2.3 The Council and CCG submitted a BCF return as requested on 2 March as requested; this is attached as appendix A. However as the detail of the plan is still under discussion, no specific finance or performance details were included. Work on the draft BCF Plan is ongoing. Officers have agreed that the week commencing 14 March will be used as a period of intensive work on developing the BCF plan. A draft Plan will be presented to Health and Wellbeing Board members at the meeting, accompanied by a verbal update at the meeting.

3.0 CHANGES TO THE BETTER CARE FUND IN 2016/17

3.1 Broadly speaking, the overall direction for the Better Care Fund remains the same moving into 2016/17. However, there are some significant changes to funding that will affect our planning:

- There is an overall increase in the CCG's minimum revenue contribution to the Better Care Fund, which increases from £34,451k (2015/16) to £35,655k (2016/17)
- There is a significant increase in the Disabled Facilities Grant (capital) awarded by District Councils, which increases from £1,924k (2015/16) to £3,479k (2016/17)
- There is a corresponding drop in Adult Social Care capital, with the County Council's Adult Social Care Capital Grant of £1,294k being removed.

3.2 In addition, there are some changes to the policy approach for 2016/17:

- The performance-related element of the BCF (£836k in 2015/16) mandating a reduction in non-elective admissions has been removed; although the metric remains and a new provision for a 'risk share' arrangement around non-elective admissions has been created.
- Local areas are now required to agree a shared plan for reducing Delayed Transfers of Care (DTC) from hospital.
- Longer term there is a requirement for local areas to work towards integrated health and social care services by 2020.

3.3 Cambridgeshire's 2015/16 plan emphasised a shift in activity away from acute hospitals and long-term social care towards support that is provided in the community and focused on keeping people independent. It is proposed that this remains the right approach for 2016/17. However, as discussed at the last Health and Wellbeing Board on 12 January 2015, the Council and CCG have agreed that the budget for 2016/17 should allow more transparent monitoring of the BCF. Therefore the plan should be more specific about what will be delivered; how each budget line is spent; and how everything funded will contribute towards the performance metrics described in the BCF plan. It is also expected being more specific as to what services are being funded will create opportunities for the joint commissioning and/or joint transformation of those services with a view to improving outcomes and/or reducing costs.

3.4 Discussions are ongoing about financial allocations in light of significant financial pressures across the local system. The County Council and Clinical Commissioning Group have not yet agreed financial allocations for the BCF in 2016/17 for inclusion in the plan. Both partners are continuing discussions and are seeking to work together to agree a position in time for the next submission on 21 March.

3.5 Health and Wellbeing Board Members will be invited to comment on the draft plan at the meeting before submission on the 21st March; there will be a further opportunity for the Health and Wellbeing Board to comment at an extraordinary meeting of the Board being scheduled for April.

4.0 RECOMMENDATIONS

4.1 Based on the report, the draft plan to be tabled, and the verbal update to be provided at the meeting, the Board is asked to comment on the Better Care Fund plan and approach for 2016/17.

Source Documents	Location
Better Care Fund Technical Guidance	https://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/