

BETTER CARE FUND – QUARTERLY REPORT AND PLANNING FOR 2016-17

To: Health and Wellbeing Board

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From: Adrian Loades, Executive Director – Children, Families and Adults Services
Andy Vowles, Chief Strategy Officer – Cambridgeshire and Peterborough
Clinical Commissioning Group (CCG)

1.0 PURPOSE

1.1 The purpose of this report is to provide a brief update on the quarterly reporting process on the Better Care Fund (BCF); and inform Board Members of the continuation of the Better Care Fund into 2016-17. A further verbal update will be provided at the meeting.

2.0 BACKGROUND

2.1 As previously reported, The Better Care Fund (BCF) has created 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 is £37.7 million for 2015/16. This is not new money, but a reorganisation of existing funding already used to provide health, social care and housing services across the county. It is designed to be used 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 remains in community health and social care budgets, particularly supporting the Clinical Commissioning Group (CCG)'s Older People and Adult Community Services Contract; and a smaller amount of spending is focused on medium term projects that will begin to support those outcomes. The expectation is that in future years there will be more funding available to support different services as our work begins to have an impact.

3.0 BETTER CARE FUND DEVELOPMENT

3.1 On 27 November, a report on progress against the Better Care Fund will be submitted to NHS England. A verbal summary of the return will be provided at the meeting; the draft return will then be shared with Board Members by email for any comments before submission.

3.2 Full performance data for non-elective admissions is not available at the time of writing, and so it is not possible to offer a complete commentary on non-elective admissions at this stage. However, data available at this stage indicates that in the second quarter, the number of non-elected admissions has continued to rise, meaning that BCF targets for reducing non-elective admissions will not have been met. A verbal update on the figures for the full quarter will be provided at the meeting.

- 3.3 The BCF transformation projects are continuing to develop across Cambridgeshire and Peterborough:
- The **Data Sharing** project has developed a dataset of social care data to be made available to health partners with appropriate consent in place in order to improve decision making about people’s health and care; this data will then be included within ‘OneView’, the single view of the patient record being developed by UnitingCare.
 - For **Seven Day Working**, recent workshops have been held in the Cambridge and Ely system; and the Huntingdonshire system; with representation from across health, social care and the voluntary sector to agree principles and priorities for each local area. These are being developed into plans for implementation by each area’s System Resilience Group (SRG)
 - The **Person Centred System** project has been working across the system to agree how elements of the UnitingCare service model being implemented by CPFT will link to the rest of the system – including how social care will participate in the recently established neighbourhood teams; and how reablement should work with health services in future. A strand of work has been established to explore the use of a shared tool across the system to help to develop a shared language about people’s level of risk
 - The **Healthy Ageing and Prevention** project has now held its first steering group meeting. It agreed that priorities for the project will be:
 - A coordinated approach to falls prevention across Cambridgeshire and Peterborough
 - Overseeing the development of UnitingCare’s Wellbeing Service
 - Continence and Urinary Tract Infections (UTIs)
 - How organisations coordinate action on early warning signals that an individual may be developing greater levels of risk.

3.4 In a joint letter from the Department of Health and Department for Communities and Local Government on 16th October 2015, it was confirmed that the Better Care Fund will continue into the 2016-17 financial year. However, details about the minimum size of the Fund will not be confirmed until after the Spending Review reports on 25 November. It is reported that full guidance on the process will be published shortly after the Spending Review, with updated BCF plans expected to be submitted in early February 2016. Local areas are asked to begin planning for 2016-17 based on an evaluation of implementation to date; officers are beginning this process and an update will be provided at the meeting.

4.0 RECOMMENDATIONS

- 4.1 The Cambridgeshire Health and Wellbeing Board is invited to:
- comment on the update above and the verbal update provided at the meeting; and
 - comment on the Quarterly Report to be circulated in draft following the meeting.

Source Documents	Location
None	