



**CABINET – 23 JUNE 2017**

**BETTER CARE FUND PLAN 2017/18 – 2018/19**

**REPORT OF THE DIRECTOR OF HEALTH AND CARE  
INTEGRATION AND DIRECTOR OF ADULTS AND COMMUNITIES**

**PART A**

**Purpose of the Report**

1. The purpose of this report is to update the Cabinet on the preparation and submission of Leicestershire's Better Care Fund Plan for 2017/18 – 2018/19 and on the inclusion of additional resources allocated to the County Council for adult social care as announced by the Government in March 2017.
2. The report also seeks approval of the proposed expenditure plan for the additional adult social care allocation which was announced after the County Council agreed the Medium Term Financial Strategy for 2017/18 – 2020/21

**Recommendations**

3. It is recommended that:
  - a) The preparations and governance arrangements for the submission of Leicestershire's Better Care Fund (BCF) Plan for 2017/18-2018/19 to NHS England be noted;
  - b) With regard to the additional adult social care grant allocation of £19.7m announced by the Government in the Spring Budget,
    - (i) that it be noted that this funding is allocated to the County Council for the purposes indicated in the grant conditions but will be incorporated into the BCF Plan as required by the BCF Policy Framework;
    - (ii) the agreement reached with NHS partners on the spending of the grant be welcomed, and
    - (iii) the impact of additional grant on the BCF pooled budget from April 2017 be noted;

- c) It be noted that the draft BCF Expenditure Plan attached as Appendix A to this report will be submitted to the Health and Wellbeing Board on 22 June 2017 for approval;
- d) The timescale for updating the rolling BCF Section 75 Agreement and associated governance arrangements be noted;
- e) That the County Council's Medium Term Financial Strategy 2017/18-2020/21 be updated to reflect the additional adult social care grant allocation.

### **Reasons for Recommendations**

- 4. The National BCF assurance process requires all local areas to refresh BCF plans in partnership and in line with the BCF Policy Framework and Technical Guidance.
- 5. BCF Plans require approval from the local Health and Wellbeing Board prior to submission to NHS England.
- 6. Due to the timing of the Chancellor's March budget statement, the additional £19.7m funding announced and allocated to the County Council for adult social care purposes could not be incorporated within the Medium Term Financial Strategy for 2017/18 – 2020/21.

### **Timetable for Decisions (including Scrutiny)**

- 7. The Health Overview and Scrutiny Committee was informed of progress with the refresh of the BCF Plan on 1 March 2017.
- 8. The draft BCF submission was considered by the respective Boards of the two County Clinical Commissioning Groups on 14 March 2017 prior to being approved by the Health and Wellbeing Board on 16 March 2017. The Health and Wellbeing Board also authorised the Chief Executive to make any amendments to the Plan in the light of the national guidance prior to it being submitted to NHS England.
- 9. At the time of writing this report, the BCF Policy Framework has been published, but the technical BCF guidance for 2017/18-2018/19 is still awaited, having been delayed nationally since November 2016. No date has yet been confirmed for the formal submission of BCF plans to NHS England, but the timeframe is anticipated to be within six weeks of the technical guidance being published.
- 10. The next Health and Wellbeing Board meeting takes place on 22 June 2017. A further update will be given on the status of national BCF guidance, and the Health and Wellbeing Board will be asked to approve the initial BCF expenditure plan, per Appendix A to this report.

### **Policy Framework and Previous Decisions**

11. The BCF Policy Framework was introduced by the Government in 2014, with the first year of BCF Plan delivery being 2015/16. The Cabinet in February 2014 authorised the Health and Wellbeing Board to approve the BCF Plan and plans arising from its use.
12. On 10 March 2017 the Cabinet received a report on the refresh of the Leicestershire BCF Plan for 2017/18 – 2018/19.

### **Resource Implications**

13. Since the last report to the Cabinet in March 2017, and after the County Council agreed the MTFS for 2017/18 – 2018/19, the Government has confirmed the local authority allocations within BCF plans from April 2017, including the additional social care allocation announced in the Spring Budget. It has also confirmed the Disabled Facilities Grant Allocations for each district council. Further information about these specific allocations can be found at paragraph 30 of this report.
14. The County Council has prepared an initial expenditure plan which has been agreed with NHS partners and which details how the additional adult social care grant funding will be allocated over the next three years through the BCF pooled budget. The BCF Plan for 2017/18 – 18/19 has also been updated to reflect this and the updated Plan now has a pooled budget totalling £52m for 2017/18 and £56m for 2018/19.
15. More detail on the funding position for the 2017/18 – 2018/19 BCF Plan and pooled budget, including key financial risks is given in paragraphs 38-52 and 66 of this report. The allocation of additional resources is welcome and will ease some pressure in the short term. However, the government needs to come up with a longer term strategy with associated funding if social care is to be put on a sustainable footing.
16. The Director of Corporate Resources has been consulted on the content of this report.

### **Circulation under the Local Issues Alert Procedure**

None.

### **Officers to Contact**

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## **PART B**

### **Background**

17. The purpose of the BCF is to transform and improve the integration of local health and care services, in particular to reduce the dependency on acute hospital services by providing more integrated community-based support.
18. The strategic framework is set by BCF national policy requirements, BCF national conditions, BCF metrics, CCG commissioning intentions, and key local authority duties with respect to integration and the Care Act 2014.
19. Locally, the introduction of the Leicester, Leicestershire and Rutland (LLR) Sustainability and Transformation Plan (STP) essentially reframes priorities and financial plans across the LLR health and care economy.
20. High priorities within the integration agenda nationally and locally include:
  - Keeping people out of statutory and acute provision wherever possible.
  - Sustaining adult social care within new models of care locally.
  - Ensuring there is a cohesive plan for data integration at population and care planning levels.
  - Implementing seven-day services.
  - Improving hospital discharge.
  - Developing an infrastructure and platform for joint commissioning.

### **Vision and Aims of the Leicestershire BCF Plan**

21. The vision for Leicestershire's integration programme, as set out in the BCF Plan is to *"create a strong, sustainable, person-centred, and integrated health and care system which improves outcomes for our citizens"*.
22. The aims of the Leicestershire BCF Plan are:

|                                                                                                                                                                               |                                                                                                                                    |                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Develop and implement new models of provision and new approaches to commissioning, which maximise the opportunities and outcomes for integration.                          | 2. Deliver measurable, evidence based improvements to the way our citizens and communities experience integrated care and support. | 3. Increase the capacity, capability and sustainability of integrated services, so that professionals and the public have confidence that more can be delivered in the community in the future. |
| 4. Support the reconfiguration of services in line with: <ul style="list-style-type: none"> <li>• The LLR STP</li> <li>• New integrated models of health and care.</li> </ul> | 5. Manage an effective and efficient pooled budget across the partnership to deliver the integration programme.                    | 6. Develop an integrated health and care system by 2020/21, including the local approach to devolution where applicable                                                                         |

## **BCF National Conditions**

23. The *Integration and Better Care Fund Policy Framework 2017/18 – 2018/19*, which was published on 31 March 2017 confirms the national conditions and metrics which will apply to BCF Plans with effect from April 2017.  
(<https://www.gov.uk/government/publications/integration-and-better-care-fund-policy-framework-2017-to-2019>)
24. The national conditions require that Plans must:
  - a. Be jointly agreed including approvals via the local Health and Wellbeing Board;
  - b. Maintain protection of adult social care services;
  - c. Demonstrate commitment to investment in out-of-hospital services;
  - d. Deliver improvements in managing transfers of care (e.g. delayed hospital discharges).
25. There is also an expectation that the BCF Plan will continue to show progress on the previous national conditions set out in the 2016/17 BCF Plan. These include data sharing, case management for people with multiple conditions, and developing seven-day services. They are still fundamental to transforming integrated care and are expected to be addressed at system level as part of the 44 Sustainability and Transformation Plans in place across the country.
26. In terms of the national condition targeted to managing transfers of care, each local BCF Plan must evidence in particular how the Department of Health's '*high impact changes for improving hospital discharge*' are being implemented locally.
27. The High Impact Changes Framework  
[https://www.local.gov.uk/sites/default/files/documents/Impact%20change%20model%20managing%20transfers%20of%20care%20\(1\).pdf](https://www.local.gov.uk/sites/default/files/documents/Impact%20change%20model%20managing%20transfers%20of%20care%20(1).pdf) provides a basis for each health and care system to assess their local position and identify where further changes are needed so that all the evidence-based and recommended interventions are made.
28. The grant conditions associated with the new adult social care allocation reference the importance of improved hospital discharge and the Government expects a proportion of the allocation be spent on this priority, according to local gaps and needs.
29. A number of specific activities have been completed locally in order to agree the priorities for meeting the national conditions within the BCF Policy Framework.
30. When submitted to NHS England, the BCF Expenditure Plan (Appendix A) will be accompanied by a supporting narrative document setting out the detail of how each of the national conditions will be met. An overview of the approach to several of these condition is given below:

**a) National Condition to maintain investment in Adult Social Care from the CCG minimum contribution.**

- This investment is separate from the additional allocation for adult social care for LAs [Local Authorities] announced in the spring budget, which comes with distinct grant conditions – see c) below.
- The BCF investment plan requires an inflationary uplift in the CCG contribution in support of adult social care of 1.79% in 2017/18 and 1.9% in 2018/19, when compared with investment levels in 2016/17. The Leicestershire BCF plan has ensured that the required investment level per the CCG contribution is in place and the priorities for this investment have been agreed with NHS partners.

**b) National Condition: Disabled Facilities Grant (DFG) Allocations**

- Funding allocations for major adaptations in the home will continue to be routed via the BCF to each district council in line with national policy. Growth funding has been issued by the Government in line with the expectations set out in the 2015 comprehensive spending review. The 2017/18 allocations for each District Council are -

|                           |                   |
|---------------------------|-------------------|
| <b>Leicestershire</b>     | <b>£3,349,869</b> |
| Blaby                     | £499,481          |
| Charnwood                 | £846,293          |
| Harborough                | £385,744          |
| Hinckley and Bosworth     | £439,674          |
| Melton                    | £259,427          |
| North West Leicestershire | £572,989          |
| Oadby and Wigston         | £346,261          |

- The BCF Policy Framework confirms upper tier authorities are required to passport the DFG allocation in full to each District Council, unless local agreement has been reached to direct resources to other strategic housing priorities.
- During 2016/17 significant work has been undertaken with District Councils to forecast DFG demand across Leicestershire to inform the local position, and quarterly reporting is in place to compare actual demand against the allocations made.
- Where individual Districts wish to consider the use of DFG funds for other strategic housing solutions, this will be welcomed and supported by the County Council and other partners, given the transformation already being undertaken via the Lightbulb Housing Service.

c) **The additional adult social care allocation announced in the Spring Budget (£19.7m non-recurrent grant over three years)**

- In response to this announcement additional working sessions with Adult Social Care, CCG partners, NHS providers and the LLR A&E Delivery Board took place in April and May in order to ascertain how best to prioritise this additional funding which, whilst allocated to the County Council, in accordance with the grant conditions set by the Government and the BCF Policy Framework, must be included within the local BCF pooled budget.
- The funding is being allocated in the form of a Section 31 (Local Authority) Grant on a non-recurrent basis. Therefore, any expenditure against the grant must be targeted to relieving short-term service pressures, provide transformational capacity, or manage demand in the longer term.
- The proposed allocation of the funding (set out in Appendix A) has been welcomed and supported by NHS partners.
- There are clear areas of spend identified in support of adult social care service capacity, as well as investment in priorities within the high impact assessment for hospital discharge and the STP Home First workstream.
- A proportion of the investment is specifically targeted to the BCF national condition “**Managing Transfers of Care**” which is measured in terms of our performance on delayed discharges from hospital (DTOCs).
- The grant conditions are set out below. These were sent to upper tier Local Authorities (Appendix B) and reinforced by the *Integration and Better Care Fund Policy Framework 2017/18 – 2018/19*.

*“Grant paid to a local authority under this determination is to be spent on adult social care and used for the purposes of meeting adult social care needs, reducing pressures on the NHS – including supporting more people to be discharged from hospital when they are ready – and stabilising the social care provider market.*

*A recipient local authority must:*

- *pool the grant funding into the local Better Care Fund, unless the authority has written Ministerial exemption;*
- *work with the relevant Clinical Commissioning Group(s) and providers to meet National Condition 4 (Managing Transfers of Care) in the Integration and Better Care Fund Policy Framework and Planning Requirements 2017-19; and*
- *provide quarterly reports as required by the Secretary of State.”*

31. The Government has made clear that part of this funding is intended to enable local authorities to quickly provide stability and extra capacity in local care systems.

### **Local Commissioning Requirements**

32. A number of other local commissioning requirements have informed the refresh of Leicestershire's BCF Plan, highlighting the interdependencies between it and the health and care system-wide redesign associated with the LLR STP. These are:
  - BCF funding for urgent care has been transposed into the new model of urgent care service commissioned by CCGs from April 2017.
  - Investments associated with core discharge support services operating across University Hospitals Leicester and Leicestershire Partnership Trust and social care are essential to support system flow and improve performance on discharge delays.
  - Investments and services are already being redesigned for 2017/18, linked to the STP Home First workstream, so these components have been ring-fenced in the financial refresh for this purpose.
  - The existing local rehabilitation and reablement services which are funded via the BCF will also be reviewed through the new STP Home First workstream in 2017/18.
  - The existing case management services in both CCGs ("integrated care" in the East Leicestershire and Rutland CCG and "proactive care" in the West Leicestershire CCG) are assumed as core components of the future Integrated Locality Teams development in LLR, and will be redesigned during 2017/18.
  - The work plan will include the roll-out of the new Lightbulb Housing Service across Leicestershire, between May and October 2017.

### **BCF National Metrics**

33. BCF plans for the period 2017/18 – 2018/19 will be assessed against four national BCF metrics. As before these will be reported nationally, on a quarterly basis, to NHS England. These are as follows:
  - a. Reducing the number of total emergency admissions;
  - b. Effectiveness of reablement at 91 days;
  - c. Improving delayed transfers of care; and
  - d. Reducing permanent admissions to care and nursing homes.
34. Work to review each of the BCF metrics for Leicestershire has already been completed, conducted in the context of:
  - Assessing current performance and trends in performance for each of these metrics.
  - The impact of CCGs' Operating Plans 2017/18 – 2018/19;
  - The impact of Leicestershire's Adult Social Care Strategy;

- The existing and new priorities and investments within the BCF Plan 2017/18 – 2018/19, including the impact of the new adult social care allocation;
  - The impact of new models of care being implemented via the LLR STP over the next two years, (for example the expected improvements via the LLR Home First workstream, which focuses on hospital discharge and reablement).
35. As a result of this analysis, and using the methodology from the 2016/17 BCF technical guidance targets have been developed for each of the metrics for 2017/18 – 2018/19. Publication of final national technical guidance for 2017/18 – 2018/19 is still awaited, and it will be necessary to assess if there is anything further required in this guidance before the Plan is submitted.

### **Partnership Engagement and Customer Insight**

36. Wide ranging engagement across all partners has been undertaken to refresh the BCF Plan as shown in Appendix C.
37. Findings from service user engagement activities across the health and care economy have also been used to inform the BCF refresh, a selection of which are listed below:
- Service user metrics have been analysed to assess improvements in the experience of local people using integrated care and support across settings of care in Leicestershire, including the quality of life score in the Adult Social Care Outcome Framework, support for people with Long Term Conditions via the GP survey, and experience of coordination of care and support on discharge from CQC (Care and Quality Commission) surveys;
  - A Better Care Together customer insight survey undertaken in 2015/16 focused on the views and experiences of carers;
  - Engagement with service users undertaken for the introduction of the “Help To Live At Home” domiciliary care services, used to shape the outcomes and service model;
  - Engagement with service users across eight BCF schemes as part of the evaluation conducted with Loughborough University and Leicestershire Healthwatch, focused particularly on admissions avoidance;
  - Engagement and customer insight analysis undertaken for the Lightbulb Housing Project which informed the service model;
  - Engagement with service users on integrating customer services points of access across health and care, used to inform the future options and solutions for a LLR-wide operating model;
  - Engagement undertaken by Leicestershire Healthwatch, reported bi-monthly to the Leicestershire Health and Wellbeing Board, with thematic analysis on areas such as mental health, primary care access, urgent care and hospital discharge;

- Findings and recommendations from local authority scrutiny bodies; and
- Feedback from LLR engagement events for Better Care Together and the STP.

## **Resource Implications**

### **BCF Funding Implications**

38. There are three national sources of funding, which are allocated to each local authority area and placed into local BCF pooled budgets. The three blocks below illustrate the total national allocations in each case (£millions) -

**CCG minimum**  
£3,582 (2017/18)  
£3,650 (2018/19)

**Improved Better Care Fund**  
£1,115 (2017/18)  
£1,499 (2018/19)

**Disabled Facilities Grant**  
£431 (2017/18)  
£468 (2018/19)

39. In line with the announcements made in the 2015 Comprehensive Spending Review, local upper tier authorities were expected to benefit from “Improved BCF” (iBCF) allocations from 2017/18 onwards, however, the amount received per area depends on the ability of the council to raise funding from the social care precept.
40. Leicestershire County Council included a 2% Council Tax adult social care precept in 2017/18, and the MTFS assumes a further 2% for both 2018/19 and 2019/20 in line with Government rules.
41. On 8 March 2017, the Government announced £2bn of additional support to adult social care nationally, to be allocated in the form of a non-recurrent grant over three years.
42. Leicestershire’s share of this grant has been confirmed as £19.7m over three years; £9.5m in 2017/18, £6.8m in 2018/19 and £3.4m in 2019/20.
43. The table below provides a summary of the Leicestershire BCF allocations, setting out the source of funds as at April 2017 for the two-year period:

|                                                                             |        | 2016/17<br>£000 | 2017/18<br>£000 | 2018/19<br>£000 |
|-----------------------------------------------------------------------------|--------|-----------------|-----------------|-----------------|
| CCG Mandatory Minimum Contribution*                                         | ELRCCG | 15,559          | 15,832          | 16,129          |
|                                                                             | WLCCG  | 20,477          | 20,844          | 21,240          |
| CCG Local Additional Contribution**                                         | ELRCCG |                 | 1,195           | 1,195           |
|                                                                             | WLCCG  |                 | 1,367           | 1,367           |
| <b>Total CCG Allocation</b>                                                 |        | <b>36,036</b>   | <b>39,238</b>   | <b>39,931</b>   |
|                                                                             |        |                 |                 |                 |
| iBCF (LA allocation) – Autumn 2015 spending review announcement (recurrent) |        | 0               | 0               | 5,582***        |
| iBCF (LA Allocations) – Spring 2017 Budget announcement (non-recurrent)     |        | 0               | 9,526           | 6,837***        |
| Disabled Facilities Grant Allocation                                        |        | 3,067           | 3,350           | 3,644***        |
| LCC Miscellaneous                                                           |        | 315             |                 |                 |
| <b>Total BCF</b>                                                            |        | <b>39,418</b>   | <b>52,114</b>   | <b>55,994</b>   |

Key:

\* Ring-fenced from CCG Allocation, including inflationary uplift, as reflected in CCG Operating Plans 2017-19.

\*\* Inclusion of the Intensive Community Support Service (Phase 2) in the BCF pooled budget, with effect from April 2017.

\*\*\* Indicative LA allocations for 2018/19.

44. Notwithstanding the additional allocation, significant financial pressure remains on all public sector partners, which in turn has affected the BCF expenditure plan. These pressures are caused primarily by two issues:-
- a) The requirement from the two County CCGs that up to £2m of savings should be sought in the BCF Plan in 2017/18, to support the significant financial risks affecting NHS commissioners in 2017/18;
  - b) The social care capital grant being removed from the BCF in 2016/17 and replaced with an unfunded uplift in DFG allocations.
45. The financial pressures relating to the 2016/17 DFG allocation have been mitigated via a contribution from Leicestershire County Council's allocation, on a non-recurrent basis.

46. Appendix A details the initial updated expenditure plan for the Leicestershire BCF. This sets out the individual line items of expenditure planned, drawing on the combination of funding sources as per the summary table at paragraph 43.
47. Line items which draw specifically on the new adult social care allocation, and which are subject to the grant conditions detailed above, are highlighted in the table for ease of reference.

#### Implications for the County Council MTFS

48. The additional adult social care allocation amounts to £19.7m over the three years 2017/18 – 2019/20. The funding is noted as non-recurrent. Whilst the additional monies are very welcome, it will not meet the total requirement for a sustainable adult social care service in the longer term, and the outcome of the Government's announcement regarding longer term sustainable models is awaited.
49. The funding position for the County Council with the addition of the new grant is set out below:

| <b>£ millions</b>                          | <b>2016/17</b> | <b>2017/18</b> | <b>2018/19</b> | <b>2019/20</b> |
|--------------------------------------------|----------------|----------------|----------------|----------------|
| ASC base funding (inc. 2% precept)         | 130            | 133            | 137            | 145            |
| ASC Support Grant + Improved BCF           |                | 2              | 6              | 11             |
| Supplementary funding                      |                | 10             | 7              | 3              |
| <b>Total Funding Available</b>             | <b>130</b>     | <b>145</b>     | <b>150</b>     | <b>159</b>     |
|                                            |                |                |                |                |
| <b>Forecast of expenditure on ASC</b>      | <b>130</b>     | <b>138</b>     | <b>147</b>     | <b>157</b>     |
|                                            |                |                |                |                |
| <b>Available for investment (estimate)</b> | <b>0</b>       | <b>7</b>       | <b>3</b>       | <b>2</b>       |

50. As can be seen from the table above, the additional allocation partially meets the requirements of ensuring a sustainable adult social care market and meeting the known and anticipated social care needs as previously reported in the County Council's Medium Term Financial Strategy.
51. In addition, the Council is able to commit additional one-off investment of £11.6m over the period to transform local services, improve integrated care arrangements and help manage transfers of care.

52. The BCF expenditure plan at Appendix A is a provisional plan. It includes a number of areas that will be subject to further refinement as individual components are scoped and delivered, including some that are linked to the new adult social care allocation, and the final plan submitted to NHS England could be subject to adjustments in light of any final technical guidance and any feedback received during the BCF plan assurance process.

### **Section 75 Agreement**

53. It should be noted that the BCF is operated as a pooled budget under Section 75 of the NHS Act 2006. The budget is managed through a Section 75 agreement between the County Council and the two County Clinical Commissioning Groups (CCGs). This is a rolling agreement, which was originally approved by the Cabinet in July 2014.
54. Assurance is required locally and nationally that the BCF Section 75 Agreement has been extended for a further 12 months and plans are in place, via the Integration Executive (an officer group), to undertake this work between June and July 2017 (subject to confirmation of the national BCF submission timetable – see paragraph 55).

### **BCF Plan Submission**

55. The BCF Plan submission to NHS England is expected to take place in the next few weeks and will comprise the following components:
- A narrative document setting out how the local plan will deliver health and care integration. Specifically with respect to each of the BCF national conditions and metrics, it must demonstrate how this will be achieved and measured. This will be finalised once the national technical guidance is issued.
  - A technical submission, using a template provided by NHS England. This will include a breakdown of the BCF expenditure plan and supporting financial analysis, baseline and trajectories for each of the metrics, assurance against each national condition.
  - Assurance that the local plan has been developed through engagement with a wide range of partners and approved by these partners, and ultimately by the Health and Wellbeing Board.
  - Additional documentation relating to the delivery of the BCF Plan including a programme plan, risk register, and governance structure (to be included in the supporting materials).
56. A regional and national assurance process for BCF plans is outlined in the BCF Policy Framework. This has involvement from both local government and NHS England, however the dates for this process are to be confirmed.

## **Background Papers**

Better Care Fund Policy Framework 2016-17 - <http://ow.ly/74k9309bePG>

Integration and Better Care Fund Policy framework 2017 – 19

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/607754/Integration\\_and\\_BCF\\_policy\\_framework\\_2017-19.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/607754/Integration_and_BCF_policy_framework_2017-19.pdf)

Report to the Health and Wellbeing Board Report on 5 May 2016 ‘Better Care Fund Plan Final Submission and Assurance’ - <http://ow.ly/ahgj309bf47>

Report to the Cabinet on 17 June 2016 ‘Disabled Facilities Grant/BCF report’

<http://politics.leics.gov.uk/documents/s120067/supplementary%20BCF%20Plan%20DFG%20report.pdf>

Report to the Health and Wellbeing Board on 15 September 2016 ‘BCF/Disabled Facilities Grants’ <http://politics.leics.gov.uk/documents/s122300/DFG%20Report.pdf>

Report to the Cabinet on 16 September 2016 ‘BCF/Disabled Facilities Grants’

<http://politics.leics.gov.uk/documents/s122380/BCF%20DFG%20Report.pdf>

Report to the Health and Wellbeing Board on 5 January 2017 ‘Better Care Fund Refresh 2017/18’ - <http://ow.ly/30DZ309bfTt>

Report to Health Overview and Scrutiny on 1 March 2017

<http://politics.leics.gov.uk/documents/s126760/FEB%202017%20HOSC%20BCF%20REFRESH%20REPORT.pdf>

Leicester, Leicestershire and Rutland Sustainability and Transformation Plan -

<http://www.bettercareleicester.nhs.uk/Easysiteweb/getresource.axd?AssetID=47665>

Report to the Health and Wellbeing Board on March 16, 2017

<http://politics.leics.gov.uk/documents/s127292/BCF%20Refresh.pdf>

## **Appendices**

Appendix A – Provisional BCF Expenditure Plan

Appendix B – Improved Better Care Fund Letter

Appendix C – BCF Refresh Engagement Activities

Appendix D – BCF Risk Register

## **Relevant Impact Assessments**

### **Equality and Human Rights Implications**

57. Developments within the BCF Plan are subject to an equality impact assessment and the evidence base supporting the BCF Plan has been tested with respect to Leicestershire Joint Strategic Needs Assessment. An equalities and human rights impact assessment has been undertaken which is provided at - <http://ow.ly/1sgC309cJUu>. The assessment concluded that the impact of the BCF is neutral and therefore a full assessment was not required.
58. The document underwent an annual review by Leicestershire County Council's (Adults and Communities Department) Equalities Group on 14 March 2017.

### **Partnership Working**

59. The delivery of the BCF Plan and the governance of the associated pooled budget are managed in partnership through the collaboration of local authority and NHS commissioners and providers in Leicestershire.
60. Day to day oversight of delivery is undertaken by the Integration Executive, an officer subgroup of the Health and Wellbeing Board. This group includes representation from District Councils and Leicestershire Healthwatch.
61. The delivery of the Leicestershire BCF ensures that a number of key integrated services are in place which contributes to the system wide transformation being implemented through the LLR STP, the five-year plan to transform health and care across Leicester, Leicestershire and Rutland. This programme of work is called *Better Care Together* and has resulted in the publication of the LLR STP.

### **Risk Assessment**

62. The risk register for the BCF plan has been fully updated in light of the new two year planning requirement, and the impact of the updated national conditions, metrics, and the context of the financial framework/financial pressures affecting the Leicestershire BCF plan.
63. The updated risk register has been reviewed in detail by partners including at the Integration Finance and Performance Group on 12<sup>th</sup> May 2017 and the Integration Executive on 23<sup>rd</sup> May 2017.
64. A copy of the updated register is attached as Appendix D to this report.
65. Key risks affecting the refreshed BCF Plan at this stage are characterised as a combination of:
  - Overall LLR system level risks (service, financial and transformational), per the LLR STP, and

- Specific risks affecting the Leicestershire BCF plan/pooled budget (arising from both the LLR system level risks and the national policy position for the BCF).

66. The following is a summary of key risks associated with the BCF refresh as at May 2017 -

- a) Impact of the 2017/18 financial position across the health and care economy – risk that partners are forced to address immediate/short term system pressures versus investing in medium term solutions/transformation, e.g. per the STP priorities.
- b) Lack of financial headroom within the Leicestershire BCF Plan, including lack of reserves and contingencies from 2017/18 onwards.
- c) Increased significant risks in CCG financial plans from 2017/18 onwards.
- d) Ongoing urgent care pressures, including the ongoing upward trend of emergency attendances/admissions and deterioration in Delayed Transfers of Care (DTC) performance experienced in 2016/17.
- e) Reliance on the delivery of further in-year savings from service review and redesign across a number of BCF service lines in order to deliver a more sustainable medium term financial plan.
- f) A number of these BCF service lines are subject to work being led by STP workstreams during 2017/18, with key milestones and quantifiable impact in some areas still to be confirmed.