

HEALTH AND WELLBEING BOARD: 26 SEPTEMBER 2019

REPORT OF DIRECTOR OF HEALTH AND CARE INTEGRATION

BETTER CARE FUND PLAN 2019/20

Purpose of the report

1. The purpose of this report is to seek approval from the Health and Wellbeing Board for the Leicestershire Better Care Fund (BCF) plan for 2019/20, due to be submitted to NHS England on 27th September 2019.

Recommendation

2. It is recommended that the BCF Plan for 2019/20 be approved for submission to NHS England.

Policy Framework and Previous Decisions

3. The 2019-20 BCF policy framework was published on 10th April 2019. This confirmed that the BCF provides continuity from the previous round of the programme. The delayed BCF planning requirements for 2019-20 were published on 18th July 2019, along with the final financial allocations for the BCF Plan.
4. The four national conditions set by the government in the policy framework remain the same and are:
 - a. That a BCF plan, including at least the minimum mandated funding to the pooled fund specified in the BCF allocations and grant determinations, must be signed off by the Health and Wellbeing Board, and by the constituent local authorities and Clinical Commissioning Groups (CCG).
 - b. A demonstration of how the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the uplift to the CCG minimum contribution.
 - c. That a specific proportion of the area's allocation is invested in NHS-commissioned out of hospital services, which may include seven-day services and adult social care.
 - d. A clear plan on managing transfers of care (and improving delayed transfers of care), including implementation of the national high impact change model for managing transfers of care.
5. Ahead of the BCF policy framework and planning requirements being published, work commenced in September 2018 to refresh the BCF plan in line with the annual planning arrangements for the CCGs and local authority.
6. The outputs of the review were reported to the Health and Wellbeing Board on 14th March 2019, which included the draft BCF expenditure plan. The Board approved the

draft BCF plan for 2019/20 for submission to NHS England in line with the national timetable, subject to the publication of the national BCF guidance and any further amendments required.

7. The Board received a further update on progress to finalise the BCF plan at its meeting on the 11th July.
8. In addition, East Leicestershire and Rutland Clinical Commissioning Group (ELRCCG) and West Leicestershire Clinical Commissioning Group (WLCCG) approved the BCF plan at their Governing Body meeting on 10th September.

BCF Plan for 2019/20

9. The BCF plan for 2019/20 is viewed as a continuation of the previous plan which covered 2017-19, therefore materials for the national submission to NHS England are being collected through a planning template, and we are not required to provide a detailed narrative report on this occasion.
10. The following sections of this report provide an overview of the BCF components and submission materials.

Strategic Narrative

11. The narrative section (available at Appendix A) sets out Leicestershire's approach to the integration of health and social care under the headings from the template:
 - a. Joined up care around the person;
 - b. Joint commissioning and delivery of health and social care at Health and Wellbeing Board level;
 - c. How the BCF plan and relevant elements of the Sustainability and Transformation Partnerships/Integrated Care Systems plan aligns, including any jointly owned outcomes.

BCF Income

12. The BCF plan for Leicestershire now totals £60.2million. Contributions are summarised in the table below:

	£000
ELRCCG minimum contribution	16,825
WLCCG minimum contribution	22,352
Improved BCF grant (autumn 2015)	11,353
Improved BCF grant (spring 2017)	3,403
Winter Pressure Grant	2,414
Disabled Facilities Grant	3,920
Total	£60,267

13. In terms of the CCG minimum contribution, in January 2019 NHS England published an indicative inflationary increase of 1.79% for the CCG minimum contribution to the BCF, which was incorporated into the March version of the BCF plan. It was reported in April, following the publication of the policy framework, that this figure would likely

be higher, but the announcement of the final figure did not take place until July. The final figure increased by the following amounts against 2018/19 spend:

- a. ELRCCG uplifted by 4.25%
- b. WLCCG uplifted by 5.24%

14. NHS England have recognised that there will be a funding pressure on CCGs with the additional increase and have looked at ways to support CCGs with the social care element of this funding pressure. Further information has been received which shows how much additional allocation CCGs should receive to cover the social care uplift. This confirmed that the CCGs should receive the following amounts to cover the social care pressure:
- a. ELRCCG (for Leicestershire) - £287,000
 - b. WLCCG - £388,000
15. These amounts will cover the funding pressures for both CCGs relating to the social care spend. The additional funding should be released to CCGs following regional assurance that the BCF plan meets the appropriate criteria.

BCF Expenditure Plan

16. The BCF expenditure plan, provided at Appendix B, sets out the line items/service areas for each element of the BCF pooled budget.
17. The individual line items show the apportionment of the financial contribution across ELRCCG and WLCCG. For the majority of the line items, this is divided in the proportions of 42.95% for ELRCCG and 57.05% for WLCCG. *(Note that the CCG percentage split used for each CCG has been updated to reflect the proportional change in the CCG minimum allocations).*
18. In some cases, there are line items that are specific only to one CCG or the usual proportions have been varied, due to other service specific factors. All of these apportionments have been confirmed and assured by the respective parties.
19. The line items funded by the Improved Better Care Fund and Winter Pressures Grant (adult social care grants) are highlighted and are subject to Local Authority determination and associated grant conditions.
20. The Disabled Facilities Grant allocation is automatically transferred to each District Council per the apportionment set out by government.
21. The Integration Finance and Performance Group (IFPG), which includes Finance and Strategy Leads from Leicestershire County Council, ELRCCG and WLCCG, reviewed the updated expenditure plan at its meeting on 14th August.
22. The IFPG provided a number of recommendations to finalise the BCF expenditure plan, with a caveat that if the NHS England additional allocation to CCGs for the social care uplift is lower than has been reported, then the IFPG would need to address the difference at a future meeting.
23. In summary, since the BCF plan was reported to the Health and Wellbeing Board in March, the following amendments have been made to the BCF plan:

- a. The Intensive Community Support service has been renamed Home First, Nursing and Therapies in line with the Community Service Redesign specification.
- b. In the 2017-19 BCF plan, an additional CCG contribution was included in the BCF plan to fund the total county contribution towards the Intensive Community Support service. As the BCF plan only contributes part of the total costs for the Home First line, it was agreed to move the additional allocation back into CCG funding sources.
- c. Following agreement at the IFPG on 1st July, partners have included within the BCF plan a part-year contribution for a CCG Vista grant (which provides advice, information and support to individuals who have a sight loss). This has been included in the plan for 2019/20 only.
- d. The IFPG agreed to transfer the existing mental health section 256 agreements (total value £168k), which are historical agreements between the CCGs and Leicestershire County Council. This has been included in the plan for 2019/20 only.
- e. Due to the additional CCG BCF contribution uplift announced in July 2019 (funds designated nationally to be spent on social care), for Leicestershire a further £572,000 is required to be spent on maintaining social care spend, to ensure that the plan meets this national condition (see para 4b). Following discussion at the IFPG, and subsequently agreed by CCG Boards, it was agreed to apply this additional uplift contribution on the following two areas:
 - i. **Social Care Protection** – the current BCF plan includes contributions to adult social care services which were agreed as protected at the commencement of the BCF in 2015. These areas of expenditure have been maintained within the BCF plan and uplifted each year in line with the CCG minimum contributions. However, the actual cost of these services (inflationary pressure) has increased at a far greater rate than the annual CCG uplift in contributions. It was recommended that £417,000 should be used to provide additional funds into the protected areas of spend to mitigate inflationary pressures and ensure that the level of provision can be maintained.
 - ii. **Learning Disability Lead Commissioning Arrangements** – the current section 75 arrangements for the lead commissioning of the learning disabilities joint funded care are being reviewed during 2019/20. The cost of providing the lead commissioning functions and activity is also under review. The council's current estimate is that the real cost of providing the care management, case management, commissioning, contracting and finance functions is £230,000 per annum. This is £155,000 more than the current £75,000 paid by the CCGs to the council for this service. It was recommended to include the additional £155,000 in the BCF plan and then review the actual requirement as part of the finance monitoring process.

- f. The additional CCG minimum contribution also identified £87,000 for ELRCCG and £289,000 for WLCCG for health spend, which has been applied to existing CCG priorities by recommendation of the Chief Finance Officers.

24. Within the BCF plan, there is also an existing total of £632,000 allocated to social care for 'invest to save' schemes. Two areas have been recommended for investment relating to Home First and the Transforming Care Programme (TCP). The Home First investment (£422,000) will fund the integrated model of reablement and the TCP investment (£210,000) will fund the behavioural support services and a review of the multi-disciplinary team arrangements for TCP in the county was proposed. This is subject to a scoping document which is in progress. The investments include some dedicated analyst time to track and evaluate the impact of the developments.

High Impact Change Model for Managing Transfers of Care

- 25. National condition four of the BCF requires health and social care partners to work together to agree a clear plan for managing transfers of care and improved integrated services at the interface of health and social care to reduce delayed transfers of care.
- 26. Appendix C provides details on our priorities for embedding elements of the high impact change model (HICM) for managing transfers of care; which includes the current performance issues that need to be addressed and future changes planned for 2019/20.
- 27. This section also sets out the current position of maturity for each of the eight changes in the model and the planned level of implementation by March 2020. The Discharge Working Group has oversight on the progress of the HICM for Leicester, Leicestershire and Rutland.

BCF Metrics

- 28. BCF plans for 2019/20 will continue to be assessed against the following four national BCF metrics. As before, these will be reported nationally, on a quarterly basis, to NHS England.
 - a. Reducing the number of total emergency admissions (*target pre-populated from CCG operating plans*);
 - b. Improving delayed transfers of care (*target set by NHS England*);
 - c. Effectiveness of reablement at 91 days;
 - d. Reducing permanent admissions to care and nursing homes.
- 29. Appendix D provides details on the proposed trajectory for 2019/20; a summary of the rationale for the level of performance being aimed for and an update on the current progress against the planned target.

Next Steps and Assurance Process

30. The submission and assurance process will follow the timetable below:

BCF planning submission from local Health and Wellbeing Board areas (agreed by CCGs and local government).	By 27 th September
Scrutiny of BCF plans by regional assurers, assurance panel meetings, and regional moderation	By 30 th October
Regionally moderated assurance outcomes sent to BCST	By 30 th October
Cross regional calibration	By 5 th November
Assurance recommendations considered by Departments and NHSE	5 th – 15 th November
Approval letters issued giving formal permission to spend (CCG minimum)	Week commencing 18 th November
All Section 75 agreements to be signed and in place	By 15 th December

31. Work to update the BCF section 75 agreement has commenced and will be submitted through the relevant governance routes ahead of the deadline of 15th December for approval.

Engagement Planner

32. In preparation for the BCF plan 2019/20, there has been partner engagement as part of the review, as shown in the engagement planner in Appendix E.

Circulation under the Local Issues Alert Procedure

None

Officer to Contact

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Appendices

- **Appendix A** – BCF Plan – Strategic Narrative
- **Appendix B** – BCF Expenditure Plan
- **Appendix C** – High Impact Change Model for Managing Transfers of Care
- **Appendix D** – BCF Outcome Metrics
- **Appendix E** – Engagement Planner

Background Papers

BCF Policy Framework 2019/20

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/821676/Better_Care_Fund_2019-20_Policy_Framework.pdf

BCF Planning Requirements 2019/20

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/821675/BCF_Planning_Requirements_2019-20_DHSC_1.pdf

Leicestershire BCF Plan 2017-19

<http://www.healthandcareleicestershire.co.uk/download/Leicestershire-BCF-Plan-2017-19.pdf>

Report to the Board – March 2019

<http://politics.leics.gov.uk/documents/s144895/BCF%20Plan%20Report.pdf>

Report to the Board – 11th July 2019

http://politics.leics.gov.uk/documents/s147049/Health%20and%20Wellbeing%20Board_BCF%20Report.pdf

Relevant Impact Assessments

Equality and Human Rights Implications

33. The BCF aims to improve outcomes and wellbeing for the people of Leicestershire, with effective protection of social care and integrated activity to reduce emergency and urgent health demand.
34. An equalities and human rights impact assessment has been undertaken which is provided at <http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>. This finds that the BCF will have a neutral impact on equalities and human rights.
35. A review of the assessment was undertaken in March 2017.

Partnership Working and associated issues

36. The delivery of the BCF plan and the governance of the associated pooled budget is managed in partnership through the collaboration of commissioners and providers in Leicestershire.
37. Day to day oversight of delivery is via the Integration Executive through the scheme of delegation agreed via the Integration Executive's terms of reference which have been approved by the Health and Wellbeing Board.
38. The delivery of the Leicestershire BCF ensures that a number of key integrated services are in place and contributing to the system wide changes being implemented through the five year plan to transform health and care in Leicestershire, known as the Sustainability and Transformation Partnerships <http://www.bettercareleicester.nhs.uk/>

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