

## BETTER CARE FUND (FORMERLY INTEGRATION TRANSFORMATION FUND) – PROGRESS REPORT

To: Health and Wellbeing Board

Date: 23 January 2014

From: Simon Willson, Head of Performance Management and Quality Assurance

### **1.0 PURPOSE**

1.1 To provide an overall update with regard to the progress being made on preparing Cambridgeshire's Better Care Fund (BCF) Plan for submission to government. The draft BCF Plan will be brought to a special meeting of the Health and Wellbeing Board on February 13<sup>th</sup> for sign off, prior to submission to Government on February 14th.

### **2.0 BACKGROUND**

2.1 The BCF - formerly known as the Integration Transformation Fund - was announced in the Chancellor's Autumn Statement 2013. The Fund will create pooled budgets in each upper-tier local authority area, between health and social care services, starting from April 2015. It is important to note that this is not 'new' investment from Government, but a re-allocation of money that is currently in health services' budgets.

2.2 At an informal development session in December, the HWB Board received a presentation giving an overview of the BCF and it was invited to consider a 'Vision and Principles' document (attached as Annex A). This aimed to develop a shared approach to how Cambridgeshire might best use the fund to deliver a more integrated approach to health and social care in the County, as well as help reduce the pressures on key service areas.

### **3.0 SUMMARY OF PROGRESS**

3.1 A considerable amount of progress has been made towards meeting the Government's initial deadline of 14 February, for the submission of the 'first cut' of our BCF plan. In summary, progress has been as follows:

- The Government has published further guidance on the use and conditions attached to the BCF;
- Confirmation has been given to how much money Cambridgeshire can expect to receive over the next 3 years;
- Engagement is ongoing with service users/patients groups, service providers, voluntary sector organisations and strategic partners;
- 'Proposals' to access the fund have been requested, based on a clear set of criteria drawn from the Vision and Principles document;
- Initial performance targets have been set out, based on the national metrics;

- Issues related to risk have started to be identified, in particular the risk of having to disinvest from some aspects of health provision by the CCG; and
- Drafting the BCF plan/application has commenced.

3.2 Whilst good progress has been made and it is evident that many partners are actively engaged in the process, there is still much work to be done in the coming three weeks. See paragraph 5 for more detail.

#### **4.0 KEY ANNOUNCEMENTS BY GOVERNMENT**

4.1 Additional guidance was issued by the Government in late December containing new information about how the fund will operate. The salient points are summarised below:

- a. The financial allocation for Cambridgeshire for 2014/15 will be £1.9m; for 2015/16 the total BCF for Cambridgeshire will be £38m. This is broadly in-line with our expectations when the national Fund was first announced.
- b. The funding for Disabled Facilities Grant (DFG), distributed by the district and city councils, will be protected in the BCF. The total DFG money for 2015/16 will be £1.9m, and minimum allocations are required to be passed to each district from the pooled budget.
- c. Other spending included in the Fund will not be ring-fenced. However, plans must demonstrate continued carer-specific support, including Carer Breaks and a continued focus on reablement, to account for funding included, that was previously provided specifically for those two areas. These areas are well suited to the aims of the health and social care system in Cambridgeshire and it is very likely that continued funding for these would be included in plans regardless of the requirement.
- d. The BCF includes funding for Councils to meet the costs of introducing new statutory duties linked to the Care Bill, including the 'capped cost' model of social care, new entitlements for carers and a new national minimum eligibility threshold. This funding is approximately £500k capital and £1.3m revenue. This funding is not ringfenced but plans must show how the new duties are to be met. This will be welcome, although further work is required to assess the costs of implementing the proposals; especially as the Care Bill has not yet been passed, and the final 'minimum eligibility criteria' has not been published.
- e. Funding will be put into pooled budgets under 'Section 75' joint governance arrangements.
- f. Approximately £9m of the £38m will be performance related. However, there will be no withdrawal of performance related funding due to poor performance in 2015/16 – but this will be considered for future years. There will be a system of peer reviews and recovery plans to support those areas that do not meet their 'levels of ambition' as set out in their Better Care Plans.
- g. For performance assessment, there will be five national metrics used for each plan: admissions to residential care homes; effectiveness of reablement; delayed transfers of care; avoidable emergency admissions; and patient/service user experience. In addition, local authorities will be asked to agree an additional local indicator.
- h. The first draft Better Care Plan must be submitted (after Health and Wellbeing Board agreement) by 14 February 2014. The final version must be submitted to NHS England by 4 April 2014.

## **5.0 THE CURRENT FOCUS**

5.1 The current key tasks are:

- The delivery of the two area events – the focus will be on community capacity and prevention;
- Partner organisations continuing to develop and submit their proposals by the revised deadline of 23 January 2014;
- A distillation and evaluation of proposals and emerging ideas. The evaluation will be based on the Vision and Principles document, the assessment of local need (including health inequalities) and the impact of the performance reward element of the fund (the equivalent of £9m);
- The assessment of risk, which will include consideration of disinvestment and investment issues and allocating the risk share across partners;
- The development of performance targets; and
- The completion of the submission to Government.

5.2 The revised timeline is as follows:

20 January:	Area Event (Wisbech)
21 January:	Area Event (Cambridge)
23 January:	Final submission deadline for proposals
30 January:	Completed assessment of proposals and development of key areas for investment
3 February:	A completed draft of the submission form to government
4 February:	CCG Governing Body (send papers to CCC Cabinet for briefing)
5 February:	Agenda published for HWB Board meeting – draft BCF plan publicly available
8 February:	Public consultation ends on the Vision and Principles document
13 February:	HWB Board meets to consider draft BCF plan
14 February:	Submission of ‘first cut’ to government (draft BCF plan)
March:	Likely to continue to refine BCF, and review government and management arrangements for the delivery of the fund.
4 April:	BCF Plan approved following six week ‘negotiation’ with Government

## **6.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY**

6.1 The BCF closely aligns to many aspects of the HWB Strategy, particularly priorities 2,3,4,5 and 6.

## **7.0 IMPLICATIONS**

7.1 There are significant implications associated with the BCF, some of which are referred to in the main body of this report as well as in the appendix. The full details will be explored as part of preparing the BCF submission and will be summarised and shared with the Board when it is asked to sign off the plan.

## **8.0 RECOMMENDATION**

8.1 At this stage members of the Health and Wellbeing Board are asked to note the update given in this short paper and to continue to encourage their respective organisations to engage constructively in the development of the BCF proposals.

## **9.0 SOURCE DOCUMENTS**

*Vision and Principles Document*

<http://www.cambridgeshire.gov.uk/CMSWebsite/Apps/Consultations/Details.aspx?ref=281>

*Department of Health Guidance*

<https://www.gov.uk/government/publications/better-care-fund>

*JSNA*

[www.cambridgeshirejsna.org.uk](http://www.cambridgeshirejsna.org.uk)

*HWB Strategy*

[www.cambridgeshire.gov.uk/council/partnerships/health-wellbeing-board.htm](http://www.cambridgeshire.gov.uk/council/partnerships/health-wellbeing-board.htm)

*Guidance and Template for Submitting Proposals*

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