

TITLE OF REPORT: Better Care Fund 2017-19 Submission Arrangements

Purpose of the Report

1. To provide an update to the Health & Wellbeing Board on the Better Care Fund Plan submission requirements for 2017-19.

Background

2. The Better Care Fund (BCF) was originally announced by the Government in the June 2013 spending round, with the goal to secure a transformation in integrated health and social care. The BCF created a local single pooled budget to incentivise the NHS and local government to work more closely together around the needs of people, placing their wellbeing as the focus of health and care services, and shifting resources into community and social care services for the benefit of local people, communities and health and care systems.
3. The HWB approved the Gateshead Better Care Fund (BCF) 2016/17 submission for Gateshead at its meeting on 22 April 2016, which in turn was approved by NHS England in July 2016.
4. NHS England published a Policy Framework on 31st March 2017 for the implementation of the BCF for the period 2017-19 which confirmed the statutory and financial basis of the BCF, the main conditions of access to the Fund, and arrangements for the assurance and approval of plans. The Policy Framework covers two financial years to align with NHS planning timetables.
5. At the time of writing this report, detailed Planning Guidance on the BCF is awaited from NHS England and latest indications suggest that the Guidance will be published in the week commencing the 24th April.

National Conditions and Metrics

6. For 2017-19, there are four national conditions relating to the BCF, rather than the previous eight:
 - (i) Plans to be jointly agreed.
 - (ii) NHS contribution to adult social care is maintained in line with inflation.
 - (iii) Agreement to invest in NHS commissioned out-of-hospital services, which may include 7 day services and adult social care.
 - (iv) Managing Transfers of Care (this is a new condition to ensure people's care transfers smoothly between services and settings).

All areas are required to implement a 'High Impact Change Model for Managing Transfers of Care'. Eight high impact changes have been identified, including those relating to early discharge planning, monitoring of patient flows, multi-disciplinary working, and using Trusted Assessors to carry out a holistic assessment of need. Narrative BCF plans will need to set out how local partners will work together to fund and implement this.

7. As in previous years, NHS England have also set the following requirements which local areas will need to meet:
 - A requirement that the BCF is transferred into one or more pooled funds; and
 - A requirement that Health and Wellbeing Boards agree plans for how the money will be spent, with plans signed-off by the relevant local authority and Clinical Commissioning Group.
8. Areas will need to agree targets for the following four metrics:
 - Delayed transfers of care;
 - Non-elective admissions (General and Acute);
 - Admissions to residential and care homes; and
 - Effectiveness of reablement.

BCF Resources

9. The BCF Policy Framework covers the two financial years 2017-19. Details of the BCF financial breakdown for Gateshead is set out below:

BCF Contribution	2017-18 (£m)	2018-19 (£m)
Minimum NHS (CCG) Contribution	£15.277 [^]	£15.567 ^{^^}
Disabled Facilities Grant (capital funding for adaptations to houses)	£1.480	£1.480
New Grant Allocation for Adult Social Care (referred to as the 'Improved Better Care Fund') *	£5.922	£7.320
Total	£22.679	£24.367

[^] i.e. an uplift of 1.79% on the CCG's Minimum Contribution for 2016/17

^{^^} i.e. an uplift of 1.90% on the CCG's Minimum Contribution for 2017/18

* i.e. the combined amounts announced at the Spending Review 2015 and Spring Budget 2017

10. The main change to the BCF Framework from last year is the inclusion of some local authority social care grant funding. This was initially announced at the 2015 Spending Review, with an additional provision over three years announced as part of the Spring Budget 2017.

11. The Government will require that this additional 'Improved Better Care Fund' (iBCF) funding for adult social care in 2017-19 is pooled into the local BCF. This funding does not replace, and can't be offset against, the NHS minimum contribution to adult social care.
12. The new iBCF grant will be paid directly to local authorities via a grant from the Department for Communities and Local Government. The Government will attach a set of conditions to the grant, to ensure it is included in the BCF at a local level and that it is spent on adult social care. Whilst the final conditions are expected to be issued shortly, it is understood that part of this funding is intended to enable local authorities to quickly provide stability and extra capacity in local care systems. Local authorities will be able to spend the grant, including to commission care, as soon as plans have been locally agreed.
13. The Policy Framework goes on to say that the iBCF funding is also intended to support councils to continue to focus on core services, including to help cover the costs of the National Living Wage. This includes maintaining adult social care services, which could not otherwise be maintained, as well as investing in new services.

Agreeing a Local Vision for Integration

14. As part of BCF planning, NHS England is asking areas to set out how they are going to achieve further integration by 2020. Areas are encouraged to align their approach to health and care integration with Sustainability and Transformation Plan geographies, where appropriate. This also links to a requirement that local areas ensure the overall direction of travel within their BCF plans and local STPs are fully aligned. However, the Policy Framework goes on to say that what matters is that there is locally agreed clarity on the approach and the geographical footprint which will be the focus for integration.
15. The Policy Framework states that a number of initiatives within an area can also contribute towards overall system integration. These may not be sufficient in themselves to secure full integration of health and social care, but can offer important contributions to key cohorts of patients and service users. In this connection, the Gateshead Care Partnership, already in place, is progressing work around the transformation of community health services.
16. NHS England is seeking to rapidly develop integration metrics for assessing progress, particularly at the interface where health and social care interact. It is understood that they will combine outcome metrics, user experience and process measures.

Other Points to Note

17. Other points to note from the Policy Framework include a reference to:
 - the contribution that housing can make to good health and wellbeing - helping people to remain healthier and independent for longer and supporting them to perform the activities of daily living that are important to them.
 - the importance of supporting informal carers to improve outcomes for both carers themselves and those they care for.

Graduation from the BCF

18. The BCF is intended to encourage further integration. For the most integrated areas, there will be benefits in graduating from the Fund to reduce the reporting and oversight to which they are subjected. Areas will be able to graduate from existing BCF programme management arrangements once they can demonstrate that they have moved beyond its requirements.
19. It is envisaged that all areas will be able to work towards graduation from the BCF to be more fully integrated by 2020, with areas approved in waves. NHS England will test the graduation process with a small number of areas in a 'first wave', in order to develop the criteria for graduation. Once the criteria have been confirmed, subsequent graduation waves will not be restricted in numbers in the same way.

Assurance Arrangements

20. Recommendations for approval of overall BCF plans will be made following moderation of regional assurance outcomes by NHS England and local government. Plans will be approved and permission to spend the CCG minimum contribution to the BCF will be given once the conditions attached to that funding have been met.

Proposed Arrangements for Developing Gateshead's BCF Submission for 2017-19

21. Subject to confirmation within BCF Planning Guidance to be published, it is understood that there will be a two stage submission process for the BCF:
 - A six week period to prepare an initial first submission (i.e. from the publication date of the guidance). This will be followed by feedback on the first submission.
 - A three to four week period to prepare a second submission as required.
22. As in previous years, it is proposed to utilise existing working arrangements in place to develop our BCF submission. Progress updates will also be brought to the Health and Wellbeing Board and approval sought to the BCF submission. Plans will also need to be signed-off by the Council and Newcastle Gateshead Clinical Commissioning Group.

Recommendations

23. The Health and Wellbeing Board is asked to note the key requirements of the BCF Policy Framework and to agree the arrangements for developing the Gateshead BCF Plan for 2017-19.

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