

ADDENDUM TO ITEM 4: MEDIUM TERM FINANCIAL STRATEGY 2014-18

RE: PAGE 85, NOTE 5 OF THE AGENDA

BETTER CARE FUND Interim Update Report

1.0 Background

In the 2013 chancellor's Spending Round a £3.8 billion fund was announced for 2015-16 for integrating health and social care services. This fund is known as the 'Better Care Fund' (formerly known as the Integrated Care Fund) and comprises of:

- £1.9b existing funding continued from 2014-15
- £130m Carers' Breaks funding
- £300m CCG re-ablement funding
- £350m capital grant funding including £220m Disabled Facilities Grant
- £1.1b existing transfer from health to social care
- £1.9b new funding from NHS allocations, which includes £1b performance, related funding.

2.0 Better Care Fund (BCF) & the Care Bill

The funding of the Care Bill 2013 – 14 will also form part of the responsibilities of the Better Care Fund. It was announced as part of the Spending Round that the Better Care Fund would include funding for costs to councils resulting from care and support reform. This money is not ring-fenced, but local plans should show how the new duties are being met; £50m of the capital funding has been earmarked for the capital costs (including IT) associated with transition to the capped cost system, which will be implemented in April 2016; £135m of revenue funding is linked to a range of new duties that come in from April 2015 as a result of the Care Bill. Most of the cost results from new entitlements for carers and the introduction of a national minimum eligibility threshold, but there is also funding for better information and advice, advocacy, safeguarding and other measures in the Care Bill. The full implications for Slough of the implementation of the Care Bill have still to be confirmed and an update on progress will be provided to Cabinet when this is clearer.

3.0 Better Care Fund Outcome Measures

The Spending Review also agreed that £1bn of the total £3.8bn available nationally would be linked to achieving outcomes. These outcome measures are:

- Delayed transfers of care;
- Emergency admissions;
- Effectiveness of re-ablement;
- Admissions to residential and nursing care;
- Patient and service user experience

- And one further locally agreed outcome measure from a pick list provided by NHS England. Sloughs suggested chosen measure is *improving the health-related quality of life for people with long-term conditions*.

4.0 Pooled Budget & Funding

The purpose of the BCF is to create a health and local authority pooled budget which brings together services for adults in order to improve integrated and holistic working and improve outcomes for service users. The initial estimate for Slough's allocation of the BCF was £7.030. After the Autumn Statement this was revised to £8.762m. This is detailed in the table below.

Better Care Fund Planning Announcements Slough CCG and Slough BC				
DESCRIPTION	Original Estimate	Revised Estimate		
		Local Authority	NHS	TOTAL
	£'m	£'m	£'m	£'m
Pass Through Funding				
2013/14 S256 Funds	1.850		1.850	1.850
2015/16 Government Transfers Capital	0.670			
2015/16 Disabilities Facilities Grant		0.407		0.407
2015/16 Social Care Capital Grant		0.287		0.287
Total	2.520	0.694	1.850	2.544
Impacting CCG Budgets				0.000
2014/15 Additional S256 Transfer	0.380		0.430	0.430
Carers Break Funding	0.250			0.000
Re-ablement Funding	0.280			0.000
Core CCG Funding	3.600		5.706	5.706
Difference between s256 & 15/16 BCF			0.082	0.082
Total	4.510	0.000	6.218	6.218
GRAND TOTAL	7.030	0.694	8.068	8.762

For 2014/15 the minimum BCF for Slough is **£2.23m**, for 2015/16 the minimum BCF for Slough will be **£8.762m**.

5.0 Payment for Performance

50% of the pay-for-performance element for the BCF will be paid at the beginning of 2015/16, subject to Slough Wellbeing Board adopting a plan that meets the national conditions by April 2014, and on the basis of 2014/15 performance. The remaining 50% will be paid in the second half of the year and will be based on performance against nationally and locally determined metrics. The detail of how this will work is still being agreed nationally and will include any locally agreed measures.

6.0 Proposal for Slough

Locally the aim is for more than the minimum of the funding to be part of the BCF. For 2014/15 this will include additional health budgets that support the delivery of community equipment and intermediate care services and also an additional investment of a further £430k and additional social care budgets that support the delivery of intermediate care services.

The priorities for the use of the funding in 2014/15 will be to:

- improve performance in the key outcome measures

- sustain and support existing services and financial commitments
- support the delivery of efficiency savings in health and social care
- continue investment in the additional winter pressures services that have been developed during this winter in delivering improved outcomes for admission avoidance and delayed transfers of care
- review the range of intermediate care services that are commissioned by the NHS and SBC and make recommendations for an integrated service
- invest in an improved Falls Service and an improved sensory impairment service
- provide infrastructure and resources support to manage the integration programme.

The proposed local programme will give the following allocations

PROPOSED BETTER CARE FUND FOR SLOUGH 2014/15 & 2015/16		
DETAIL	2014/15	2015/16
Health Budgets	£'m	£'m
Carers	0.210	0.210
Community Equipment (s75)	0.583	0.583
Intermediate Care (s75)	0.857	0.857
CCG Matching Funding (s256)	0.430	0.430
Oaks EMI		0.076
Henley Suite		0.247
Foot Care		0.014
CCG Additional BCF Contribution		3.371
Sub Total	2.080	5.788
Local Authority Budgets		
s256 Funds continued from 2013/14	1.850	1.850
Additional s256 Transfer	0.430	0.430
Disabled Faculties Grant		0.407
Social Care Capital Grant		0.287
Intermediate Care	1.000	1.000
Sub Total	3.280	3.974
GRAND TOTAL	5.360	9.762

7.0 Next Steps

Members are requested to consider and comment on the direction of travel for the BCF for 2014/15 and 2015/16, subject to the agreement of the BCF plan at the March Wellbeing Board and a recommendation from the Wellbeing Board to the Cabinet to approve the plan. The Cabinet will receive a further report at 14th April 2014 that will provide more detail on 2014/15 plans and also outlines plans for 2015/16.