# **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Slough Wellbeing Board

**DATE:** 11 May 2016

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WARD(S): All

## PART I FOR INFORMATION

## BETTER CARE FUND PLAN 2016-17

## 1. Purpose of Report

The purpose of this report is to inform the Slough Wellbeing Board (SWB) of the final Better Care Fund (BCF) Plan for 2016-17 which was approved by the Joint Commissioning Board and submitted on 3<sup>rd</sup> May 2016.

## 2. <u>Recommendation(s)/Proposed Action</u>

The SWB is asked to note the content of the Better Care Fund Plan for 2016/17

# 3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

#### 3a. Slough Joint Wellbeing Strategy Priorities

The Better Care Fund programme is developed and managed between the local authority and CCG together with other delivery partners aims to improve, both directly and indirectly, the wellbeing outcomes of the people of Slough against all the priorities of the strategy but especially the Health priority.

#### 3b. Five Year Plan Outcomes

The Better Care programme will contribute towards the outcome of more people taking responsibility and managing their own health, care and support needs.

#### 4. Other Implications

#### (a) Financial

These are as outlined in the March report.

The minimum BCF pooled budget for Slough in 2016/17 will be £9,034m of health and social care funding. This is an increase of £272k on last year's pooled budget of £8,762m. £5,742m of this expenditure is social care related services. The final expenditure plan for 2016/17 is included in appendix one.

#### (b) Risk Management

This is as outlined in the March report.

There has been a change to the funding amount within the pooled budget as contingency to cover areas of risk. This is now set as £542,000 (reduced from £800k) and is calculated on the costs of a 2% increase in non-elective admissions. This now aligns with the CCG Operating Plan targets for non-elective activity in 2016-17. The funds from reducing this risk share are now identified for Integration within local wellbeing hubs in Slough.

#### (c) Human Rights Act and Other Legal Implications

No Human Rights implications arise.

There are legal implications arising from how funds are used, managed and audited within a Pooled Budget arrangement under section 75 of the NHS Act 2006.

The Care Act 2014 provides the legislative basis for the Better Care Fund by providing a mechanism that allows the sharing of NHS funding with local authorities.

#### (d) Equalities Impact Assessment

The BCF aims to improve outcomes and wellbeing for the people of Slough through effective protection of social care and integrated activity to reduce emergency and urgent health demand. Impact assessments are undertaken as part of planning of any new scheme or project to ensure that there is a clear understanding of how various groups are affected.

#### (e) Workforce

There are significant workforce development implications within the programme as we move forward with integration which leads to new ways of working in partnership with others. Changes will be aligned together with other change programme activities such as that described in the New Vision of Care being led across the East of Berkshire and the Social Care reforms within SBC.

#### 5. Supporting Information

This is as outlined in the March report.

#### BCF Plan for 2016/17

The draft submission in March has been subject to an assurance process and feedback was provided through this process. Overall the plan was considered to be of good quality with evidence submitted on how the national conditions will be delivered. The plan also demonstrated a mature approach to joint working and the governance structure through the Joint Commissioning Board and BCF

Delivery Group is an exemplar of effective governance and stakeholder management.

Areas of concern or for development highlighted were:

- Evidence of a jointly agreed plan for reducing delayed transfers of care
- Reconsideration of the ambition for reduction of NEL admissions by 3% and alignment with CCG operating plan
- Demonstrating risk share held is not to detriment of investment in BCF schemes
- A key milestone plan of when improvements will be delivered, including 7 day working
- A comprehensive risk log
- An explanation of how dementia services are being delivered through BCF
- A description of our approach to Joint Assessment and a milestone plan of when this will be achieved
- Explanation of ambitions around admissions to residential care and reablement

These have now been addressed and described within the final narrative plan together with supporting evidence.

# 6. <u>Comments of Other Committees</u>

None

#### 7. Conclusion

This report accompanies the final Slough BCF Plan submitted for 2016/17.

The plan will continue to be actively managed through the Joint Commissioning Board with regular progress updates to the Wellbeing Board.

#### 8. Appendices Attached

- 'A' BCF Expenditure Plan for 2016-17
- 'B' BCF plan 2016-17

# 9. Background Papers

- '1' Model of Care East Berkshire Hypothesis (New Vision of Care)
- '2' New Vision of Care and BCF presentation
- '3' Slough CCG Locality Profile 2015
- '4' Operating Plan for BA, Slough, WAM CCGs 160416 final
- '5' Slough Carers Strategy 2016-21
- '6' Integration workshop Feb16 –SLG briefing
- '7' Social Finance End of Life incubator presentation
- '8' Joint Commissioning Board Terms of Reference
- '9' BCF Delivery Group Terms of Reference
- '10' BCF Programme Risk Register March 2016

- '11' Slough BCF dashboard month 10
- '12' SWB BCF Report March 2016
- '13' CCG Operating Plan 7 day service implementation
- '14' Connected Care IG principles
- '15' Connected Care Communications Plan
- '16' Connected Care Consent Model
- '17' Connected Care Implementation Plan
- '18' Dementia Care Strategy Slough key actions 2014-16
- '19' Dementia JSNA 2015
- '20' Slough DTOC Plan 2016
- '21' Slough BCF 2016-17 Planning Template- submission 3 Final

# Appendix 1. Slough Better Care Fund Expenditure Plan 2016-17

		Detu					1	New or existing	Total 2015/16 (if
Proactive Care	1	Enhanced 7 day working	7 day working	Other	CCG			Existing	9900
	2	Complex Case Management	Personalised support/ care at home	Primary Care	CCG	CCG		Existing	6000
	3	Falls Prevention	Personalised support/ care at home	Other	Local Authority	Private Sector		Existing	5000
	4	Stroke	Personalised support/ care at home	Other	Local Authority	Charity/Voluntary Sector		Existing	50000
	5	Dementia Care Advisor	Personalised support/ care at home	Other	Local Authority	Charity/Voluntary Sector	30000		
	6	Children's Respiratory Care	Personalised support/ care at home	Community Health	CCG	NHS Acute Provider		Existing	88000
	7	Proactive Care (children)	Personalised support/ care at home	Other	CCG		127000	Existing	177000
Single Point of Access	8	Single Point of Access	Integrated care teams		CCG	NHS Community Provider		Existing	50,000
Integrated Care	9	Telehealth	Assistive Technologies	Social Care	Local Authority	Private Sector	R	Existing	25,000
	10	Telecare	Assistive Technologies	Social Care	Local Authority	Private Sector	62000	Existing	62,000
	11	Disabled Facilities Grant	Personalised support/ care at home	Social Care	Local Authority	Private Sector	775000	Existing	407,000
	12	RRR Service (reablement and intermediate care)	Reablement services	Social Care	Local Authority	Local Authority	2184000	Existing	2,184,000
	13	Joint Equipment Service	Personalised support/ care at home	Social Care	CCG	Private Sector	793000	Existing	533,000
	14	Nursing Care Placements	Improving healthcare services to care h	or Social Care	Local Authority	Private Sector	400000	Existing	400,000
	15	Care Homes - enhanced GP support	Improving healthcare services to care h		CCG	CCG	110000	New	
	16	Domiciliary Care	Personalised support/ care at home	Social Care	Local Authority	Private Sector	30000	Existing	30,000
	17	Integrated Care Services / ICT	Integrated care teams	Community Health	CCG	NHS Community Provider	748000	Existing	748,000
	18	Intensive Community Rehabilitation	Reablement services	Social Care	Local Authority	Local Authority		Existing	82,000
	19	Intensive Community Rehabilitation	Reablement services	Community Health	CCG	NHS Community Provider	170000	Existing	170,000
	20	Responder Service	Personalised support/ care at home	Social Care	Local Authority	Private Sector	60000	New	
		Out of Hospital Tranformation (integrated short term			1				
	21	services)	Integrated care teams	Other	Joint		200000	New	
	22	Integration (local Wellbeing Hubs)	Integrated care teams		Joint		272000		
	23	Digital roadmap - Connected Care	Integrated care teams	Other	Joint	Private Sector	172000	Existing	208,000
	24	Integrated Cardiac prevention programme	Integrated care teams	Community Health	Local Authority	NHS Community Provider			
Community Capacity	25	Carers	Support for carers	Social Care		Charity/Voluntary Sector	100000	Existing	196,000
	25	EoL Night Sitting Service			Local Authority CCG				14,000
	20		Personalised support/ care at home	Community Health		Charity/Voluntary Sector		Existing	
	21	Community Capacity	Personalised support/ care at home	Social Care	Local Authority	Charity/Voluntary Sector	200000	Existing	200,000
Enablers	28	Programme Management Office & Governance	Other	Other	Joint		260,000	Existing	260000
Other	29	Contingency (risk share)	Other	Other	CCG		542,000	Existing	867000
	30	Care Act funding	Personalised support/ care at home	Social Care	Local Authority	Local Authority	296,000	Existing	317000
	31	Additional Social Care protection	Personalised support/ care at home	Social Care	Local Authority	Local Authority	600,000	Existing	48300
							£9,034,500	)	