

London Borough of Bromley

HEALTH AND WELLBEING BOARD

Date: Thursday 20 March 2014

Report Title: BETTER CARE FUND UPDATE

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1. SUMMARY

- 1.1. The Better Care Fund (BCF) two-year Local Plan was submitted to NHS England on 14th February 2014 for ratification as part of the CCGs Strategic and Operational Plans.
 - 1.1. This report provides the latest update on agreeing the final submission due to be submitted to NHS England 4th April 2014. A further verbal update will be provided to the Board.
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2. REASON FOR REPORT GOING TO HEALTH & WELLBEING BOARD

- 2.1. Access to the BCF is dependent on agreement of a local 2-year plan for 2014/15 (the planning year) and 2015/16 (first full year). The plans have been first agreed jointly by the Local Authority and Bromley's Clinical Commissioning Group and the funding authorised by their respective Executives.
 - 2.2. The final sign off is required by the Board before the Local Plan can be submitted to NHS England.
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3. SPECIFIC ACTION REQUIRED BY HEALTH & WELLBEING BOARD AND ITS CONSTITUENT PARTNER ORGANISATIONS

- 3.1. That the Health & Wellbeing Board:
 - Notes the current progress with the Better Care Fund Local Plan;
 - Agrees authority be delegated to the Chairman of the Board to sign off the Local Plan final submission to NHS England in consultation with both the Local Authority and the CCG;
 - Champion the Local Plan in the community and support the positive communication of the Plan to their respective colleagues, providers and service users.
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Health & Wellbeing Strategy

1. Related priority: Not applicable

Financial

1. Cost of proposal: There are no additional costs - the fund is created through top slicing existing budgets and with minimal new funding included. The cost for 2014/15 planning year is £5.456M and £20.837M for 2015/16.

2. Ongoing costs: Depend on the services that are agreed to go into the BCF

3. Total savings (if applicable): Savings are expected through the wider integration agenda and a resource shift into community care and away from residential and secondary care services. BCF is seen as a key tool for achieving these aims. Any savings need to be viewed as whole system savings and treated accordingly.

4. Budget host organisation: Not yet confirmed by NHS England

5. Source of funding: NHS England

6. Beneficiary/beneficiaries of any savings: Local residents. Any savings need to be viewed as whole system savings and treated accordingly. Effective redistribution of funding into remodelled community services delivers better services and savings across the system.

Supporting Public Health Outcome Indicator(s)

4. COMMENTARY

- 4.1. The Local Plan for Bromley was submitted to NHS England on 14th February. The completed template was presented to the January Board meeting and can be accessed [here](#).
- 4.2. The final submission is due to NHS England on 4th April 2014 and is to include:
 - Agreed financial contributions from the LA and CCG;
 - Agreed list of schemes for which the BCF funding will be used for;
 - Agreed metric targets linked to wider outcomes along with how these will be monitored and achievement measured;
 - Agreed shared risk mitigation plan.
- 4.3. NHS England have already provided initial feedback on Bromley's draft plan rating the plan as Amber. This means that the borough 'may' require some additional support to finalise its agreed two year plan and placed the borough in about mid table across all the London Boroughs that submitted their first draft in February.
- 4.4. The feedback raised some specific points for Bromley CCG and LBB to work on prior to the final submission in April:
 - Limited reference to the consequential impact of BCF plan on the provider sector. It would be helpful to describe the levels of consultation with providers. Needs evidence of links to contract and operating plan assumptions.
 - To provide greater assurance of plans deliverability the plan needs to describe what they are doing now, how things will be done differently in the future and the benefits that are to be realised. This should be backed by more finance and activity data to demonstrate impact.
 - Further work is needed to provide a clearer risk mitigation plan, in particular more needed to describe what action will be taken if the Fund's schemes do not deliver the anticipated reduction in demand.
 - Would expect more evidence of patient, public and provider engagement in the development of the plan.
- 4.5. Officers from both sides are now working on strengthening the plan to deal with these remaining issues and to come to a consensus on funding allocations.
- 4.6. Further guidance continues to come out from NHS England which is also proving to be a challenge in finalising our local plan. As in most Boroughs negotiations are likely to continue right up until the deadline.
- 4.7. Bromley CCG, like all CCGs have a considerable challenge ahead in being able to release the funding necessary from existing acute budgets in order to be able to create the BCF fund for 2015/16 which can then be redirected towards community provision. This shift in funding is aimed to move the Health and Care system towards a less reactive model and onto a more preventative model.

5. IMPLICATIONS FOR OTHER GOVERNANCE ARRANGEMENTS, BOARDS AND PARTNERSHIP ARRANGEMENTS, INCLUDING ANY POLICY AND FINANCIAL CHANGES, REQUIRED TO PROGRESS THE ITEM.

- 5.1. Given the potential impact on existing funding arrangements, both the Local Authority and Clinical Commissioning Groups have sought and gained the approval of their respective local Executives for the Better Care Fund submission.

Non-Applicable Sections:	FINANCIAL IMPLICATIONS, LEGAL IMPLICATIONS.
Background Documents: (Access via Contact Officer)	None