


Health and Wellbeing Board Tuesday 15 March 2015	
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
The Better Care Fund in Tower Hamlets: Review of Progress to Date and Summary of Changes for 2016-17	

Lead Officer	Luke Addams, Director of Adult Services, LBTH Jane Milligan, Chief Officer, Tower Hamlets CCG
Contact Officers	Josh Potter, Deputy Director of Commissioning and Transformation, NHS Tower Hamlets CCG Steve Tennison, Senior Strategy, Policy and Performance Officer – Integration Lead, Tower Hamlets Council
Executive Key Decision?	No

Summary

This report outlines progress with the Better Care Fund (BCF) programme in 2015-16 and seeks the endorsement of the Health and Well-Being Board for the proposed Better Care Fund programme for 2016-17. It covers a more detailed report presented to, and endorsed by, the Integrated Care Board on 18 January 2016.

Following the Health and Well-Being Board's consideration of the proposed BCF programme at the present meeting, the Mayor, on behalf of the council, and the CCG will be invited formally to adopt the programme, and this will be reflected in a legal agreement under section 75 of the NHS Act 2006 (draft enclosed).

Recommendations:

The Health & Wellbeing Board is recommended to:

1. note progress with the Better Care Fund (BCF) programme in 2015-16, as set out in the report attached as Appendix 1, which was considered by the Integrated Care Board on 18 February 2016.
2. endorse the proposed BCF programme for 2016-17, as summarised in Appendix 1, and the draft agreement under section 75 agreement under of the NHS Act 2006 (Appendix 2).
3. note that technical guidance concerning Better Care Fund planning for 2016-17 was published on 23 February 2016, which implies that final agreement of BCF plans by NHS England will not happen until early summer.
4. note that the Mayor, on behalf of the council, and the CCG will be invited formally to adopt the programme, and this will be reflected in a legal agreement under section 75 of the NHS Act 2006.
5. agree that any final amendments should be delegated to relevant Chief Officers within

the council and the CCG, subject to consultation with the Mayor and the Chair of the Health and Wellbeing Board.

6. agree that day-to-day governance of the BCF programme in 2016-17 should be delegated to the CCG's Complex Adults Programme Board, on which the council will be represented.
7. Note that a comprehensive review of the BCF programme will take place in 2016-17, as part of wider reviews of joint working between the council and the CCG.

1. REASONS FOR THE DECISIONS

- 1.1 There is a need to review and update the Better Care Fund programme and associated section 75 agreement that was agreed in 2015-16. There is also a need to report on progress with the programme during 2015-16.
- 1.2 The government's BCF policy framework makes BCF available to Health and Well-Being Boards to be spent in accordance with the local Better Care Fund plan. However, as the HWBB is not legally able to commit resources, its decisions need to be ratified by the council and the CCG. The recommendations in the present report reflect this situation.

2. ALTERNATIVE OPTIONS

- 2.1 All of the 2015-16 schemes were scrutinised when developing the present proposed programme. As many are new initiatives that only commenced in 2015, while others are ongoing activity experiencing a high level of demand, there is a large amount of continuity in the programme proposed for 2016-17.
- 2.2 To ensure the future effectiveness and value for money of the programme it is proposed that a comprehensive review of BCF should take place in 2016-17. This will dovetail with other service reviews and the joint review of commissioning by the council and the CCG.

3. DETAILS OF REPORT

- 3.1 The aim of the Better Care Fund (BCF) is to deliver better outcomes and secure greater efficiency in health and social care services through better integration of provision. The BCF programme needs to be agreed jointly by the council and Tower Hamlets CCG. The jointly agreed programme is then incorporated in a formal agreement under Section 75 of the NHS Act 2006.
- 3.2 The BCF programme was overseen in 2015-16, on behalf of the Health and Well-being Board, by the Integrated Care Board (ICB), which is comprised of representatives from the CCG, the council and health provider organisations. The ICB endorsed the proposed programme for 2016-17 at its meeting on 18 February 2016.
- 3.3 The report to the ICB has also been submitted to the council's Mayor's Advisory Board for information and comment.
- 3.4 On 23 February 2016, NHS England and the Local Government Association issued Technical Guidance on the Better Care Fund in 2016-17. In developing BCF plans for 2016-17, local partners are required to develop, and agree, through their relevant Health and Wellbeing Board (HWB):
 - a short, jointly agreed narrative plan, including details of how they are addressing the national conditions for the Better Care Fund;
 - confirmed funding contributions from each partner organisation including arrangements in relation to funding within the BCF for specific purposes;

- a scheme level spending plan demonstrating how the fund will be spent;
- quarterly plan figures for the BCF national metrics.

3.5 The timetable associated with the Technical Guidance is as follows:

- **2 March:** Local areas to submit a BCF Planning Return template to NHS England detailing the technical elements of the Plan (This is a first 'checkpoint' to submit key information in draft format and an opportunity to flag any concerns or issues.).
- **21 March:** First submission of full narrative plans for Better Care, alongside a second submission of the BCF Planning Return template.
- **25 April:** Final submission, once formally signed off by the Health and Wellbeing Board.
- **?? May/June:** Likely formal agreement of BCF plan by NHS England.

3.6 This information was not available at the time the report to Integrated Care Board was produced, and there is a need to take into account its implications more fully. It is not anticipated that the technical guidance will require substantial changes to the BCF programme proposed to the Integrated Care Board. However, there is always the potential for NHS England to require changes to the borough's proposals. On the other hand, there is a pressing need for continuation funding to be agreed for schemes being rolled forward into the new financial year from 2015-16. Therefore it is proposed to continue the programme as planned, whilst completing the returns in line with the NHS England timetable, and to make any necessary amendments in the light of feedback from NHS England.

3.7 Following the Health and Well-Being Board discussion, the Mayor and the CCG will be asked formally to sign off the BCF programme for 2016-17 and the associated section 75 agreement (draft enclosed as Appendix 2). It will be proposed that any final amendments should be delegated to relevant Chief Officers within the council and the CCG, subject to consultation with the Mayor and the Health and Wellbeing Board.

3.8 When considering the proposed programme, the Board is asked to refer to Section 3 of the report to the 18 February meeting of the Integrated Care Board for a review of progress of approved schemes in 2015-16. Section 4 of the ICB report summarises the proposed BCF programme for 2016-17 and proposes a change to the governance arrangements for the BCF, whereby the CCG's Complex Adults Programme Board will replace the Integrated Care Board as the body with responsibility for oversight of the programme. The Health and Well-Being Board is asked to agree this change.

3.9 Prior to the 2016-17 BCF funding announcement, there were two capital grants included in the BCF: Social Care Capital Grant and the Disabled Facilities Grant. These have now been integrated into one grant, the Disabled Facilities Grant. The full implications of this change needs to be reviewed by the council, in particular whether there are ongoing schemes, previously funded by SCCG, which may require funding in 2016-17 and the legal

constraints on the uses of the pooled grant within the BCF. In the present report and the draft Section 75 agreement, the full £1,572,542 is shown.

- 3.10 There is one further proposed amendment to the overall programme set out in the paper to the Integrated Care Board, which arises from the technical guidance published on 23rd February. This allows for the performance pool from 2015-16 to be used as a local risk share. Given that the local incentive scheme within the BCF fulfils this function, there is no additional requirement for further CCG funds for community services to be included in the pooled budget. Consequently, the overall programme has been reduced by £1,135,628, leaving an overall programme of £21,434,989.

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1 Better Care Fund (BCF) is a combination of central government funding streams that used to flow to LBTH and the NHS. The aim of the BCF is to facilitate an integrated approach to service procurement and delivery but as well ensure the social care budget is protected in terms of vital services to the community. The 2016-17 BCF guidance has placed a stronger emphasis on the protection of social care services which is being reflected in the proposed 2016-17 BCF allocation. The majority of the project funding is proposed to be spent on the services that interface with health and particularly on joint assessment and review teams.
- 4.2 During the 2015-16 the integration agenda has been pursued more on the joint assessment and reviews. The rest of the funding was spent on covering costs of social care services interfacing and impacting health services. The council and the CCG are currently undertaking a joint commissioning review to assess the areas and level of integration, including the budgetary implications.
- 4.3 There is a need to address the partners' BCF risk sharing in detail and review it regularly. The current 2016-17 proposed allocation tries to address any potential shift of demand but going forward the risk share should be reviewed regularly and reflected in the allocation. Failure to review the risk may lead to extra base budget pressures for the council.

5. LEGAL COMMENTS

Better Care Fund

- 5.1 The Care Act 2014 places a duty on the Council to exercise its functions by ensuring the integration of care and support provision with health provision, promote the well-being of adults in its area with needs for care and support and contribute to the prevention or delay of the development by adults in its area of needs for care and support. The 2014 Act also amended the National Health Service Act 2006 to provide the legislative basis for the Better Care Fund. It allows for the NHS Mandate to include specific requirements relating to the establishment and use of an integration fund.

- 5.2 The Government provides funding to local authorities under the Better Care Fund to integrate local services. The funding is through a pooled budget which is made available upon the Council entering into an agreement with a relevant NHS body under section 75 of the NHS Act 2006. Such agreements may be entered into where arrangements are proposed which are likely to lead to improvement in the way that prescribed NHS functions and prescribed health-related functions of the Council are exercised.
- 5.3 In order to receive the Better Care funding, the Government requires the Council to set out its plans for the application of those monies. The Government published a policy framework for the 2016/17 Better Care Fund programme in January 2016 which indicated that plans should be agreed by the Council's Health and Wellbeing Board ("**HWB**"), then signed off by the Council and CCG. This is consistent with the general policy, reflected in the Health and Social Care Act 2012, of giving HWBs responsibility for joint health and wellbeing strategies and the joint strategic needs assessment. The 2016/17 policy framework sets out the requirements for the plan to demonstrate how the area will meet certain national conditions, for example the delivery of 7-day services.

Contracting

- 5.4 Pursuant to section 75 of the National Health Service Act 2006, the NHS Bodies and Local Authorities Partnerships Arrangements Regulations 2000, the s75 Agreement provides for the establishment of funds made up of contributions from the Council and NHS CCG out of which payments may be made towards expenditure incurred in the exercise of their functions; for the exercise by NHS CCG of the Council's functions and for the exercise by the Council of the NHS CCG's functions in writing. In addition, the s75 Agreement covers specific objectives in relation (including but not limited) to:
- 5.4.1 agreed aims and outcomes of the partnership including the Council and NHS CCG's respective legal and regulatory responsibilities, and the client groups for whom the services will be delivered under the arrangement
 - 5.4.2 operational arrangements for managing the partnership including performance and governance structures encompassing the resolution of disputes, conditions for renewal and termination of the partnership, provision and mechanisms for annual review, the treatment of VAT, legal issues, complaints and risk sharing
 - 5.4.3 the respective financial contributions and other resources provided in support of the partnership including arrangements for financial monitoring, reporting and management of pooled, delegated and aligned budgets
 - 5.4.4 linking in with existing governance arrangements including the role and function of the Integrated Care Board
 - 5.4.5 achieving best value from Service Providers and principles in connection with the management of staff; and

- 5.4.6 flexibilities for the Council and NHS CCG in being permitted to add relevant service provisions and deciding future budgets for existing services within the remit of the s75 Agreement.
- 5.5 The s75 Agreement must be consistent with the 2016/17 Better Care Fund Plan approved by HWB and entering into it formalises the arrangements agreed by the Council and NHS CCG in accordance with the statutory, regulatory and guidance frameworks.

Wellbeing Principle and Equalities Duties

- 5.6 The Care Act 2014 places a general duty on the Council to promote an individual's wellbeing when exercising a function under that Act. Wellbeing is defined as including physical and mental health and emotional wellbeing and in exercising a function under the Act, the Council must have regard to the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist. The wellbeing principle should therefore inform the delivery of universal services which are provided to all people in the local population, including services provided through the Better Care Fund.
- 5.7 The Equality Act 2010 requires the council in the exercise of its functions to have due regard to the need to avoid discrimination and other unlawful conduct under the Act, the need to promote equality of opportunity and the need to foster good relations between people who share a protected characteristic (including age, disability, maternity and pregnancy) and those who do not.

6. ONE TOWER HAMLETS CONSIDERATIONS

- 6.1 The Better Care Fund is concerned with better integrating health and social care services to people with a diverse range of illnesses and conditions. These include people with mental health and drug and alcohol problems, and, in particular, elderly people at risk of being admitted to, or able to be discharged from, hospital with appropriate support. It also funds services concerned with Reablement - supporting people to learn or relearn skills necessary for daily living following ill-health or disability; the adaptation of the domestic accommodation of people with disabilities to enable them to live at home, and the training of staff in the use of assistive technology.

7. BEST VALUE (BV) IMPLICATIONS

- 7.1 The Better Care Fund is concerned with achieving best value in the health and social care economy, by ensuring that services are provided most appropriately across the system and that the allocation of resources supports efficiency improvements, as well as better outcomes for service users. It also seeks to reduce the historic problem of financial savings in one sector being achieved at the expense of additional costs in the other, through better joint planning and shared priorities.

8. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

8.1 The Better Care Fund has no direct implications for the environment.

9. RISK MANAGEMENT IMPLICATIONS

9.1 As in 2015-16, the section 75 agreement will specify pooled funds within the BCF, commissioning arrangements and the arrangements for risk share, including how overspends and underspends will be dealt with for each pooled fund.

10. CRIME AND DISORDER REDUCTION IMPLICATIONS

10.1 The Better Care Fund has no direct implications for crime and disorder reduction.

11. CONCLUSIONS

11.1 The Health and Well-Being Board is invited to comment on the progress of the 2015-16 BCF programme and to endorse the proposed Better Care Fund programme for 2016-17. In addition, the HWBB is asked to note that, subject to the views expressed by the Board, the Executive Mayor and the CCG will be invited to sign off the BCF programme for 2016-17 by the end of March 2016.

Linked Reports, Appendices and Background Documents

Linked Report

- Report to Integrated Care Board, 18 February 2016 - The Better Care Fund in Tower Hamlets: Review of Progress to Date and Summary of Changes for 2016-17 (see Appendix to present report)

Appendices

- Report to Integrated Care Board, 18 February 2016 - The Better Care Fund in Tower Hamlets: Review of Progress to Date and Summary of Changes for 2016-17
- Draft section 75 agreement between London Borough of Tower Hamlets and NHS Tower Hamlets Clinical Commissioning Group

Local Government Act, 1972 Section 100D (As amended)

List of "Background Papers" used in the preparation of this report

None

Officer contact details for documents:

Steve Tennison
Senior Strategy, Policy and Performance Officer – Integration Lead
5th Floor
Town Hall

Mulberry Place
5 Clove Crescent
London E14 0BG

E: steve.tennison@towerhamlets.gov.uk
T: 020 7364 2567