

Suffolk Health and Wellbeing Board

A committee of Suffolk County Council

Agenda Item 5

Report Title:	Suffolk Health and Care Integration Plans and the Better Care Fund Template
Meeting Date:	7 February 2014
Chairman:	Councillor Joanna Spicer
Board Member Lead(s):	Anna McCreddie, Director for Adults and Communities Tessa Lindfield, Director of Public Health Sue Cook, Director for Children and Young People's Services Julian Herbert, Chief Officer, Ipswich & East Suffolk CCG and West Suffolk CCG Andy Evans, Chief Executive, Health East CCG
Author:	Jo Cowley, Business Development Team, Jo.cowley@suffolk.gov.uk , Telephone: 01473 265202

Brief summary of report

1. The Government's intention to drive integration of health and care by 2018 was signalled by the Minister for Care and Support in May 2013. The Health and Wellbeing Board have identified Integration as one of the cross cutting principles of the Boards work, and have played a key role in establishing collaborative leadership for integration in Suffolk.
2. The Health and Wellbeing Board welcomes the national drive for integration and the opportunity to build on the excellent track record of collaboration and joint working in Suffolk:
 - Suffolk Family Focus, a programme driving new and collaborative ways of working to achieve better outcomes for families with complex needs.
 - Joint commissioning across health and care for example for services that help people out of crisis and to get back to their lives (reablement and rehabilitation and crisis intervention services).
 - Lowestoft Rising bringing all public sector bodies together to focus on delivering the best outcomes for Lowestoft.
 - Established Suffolk CCG groups working on the join up of health and social care at local level, for example the Integrated Care Networks.
 - Suffolk Strategic Housing Partnership and agreements arising from the Health and Wellbeing Board Housing workshop on 7 Feb 2014

3. Given this strong partnership background and a firm commitment from the Health and Wellbeing Board, the Suffolk County Council Cabinet and CCG Governing Bodies to integrating commissioning and services at the front line, we are setting out an ambitious approach for Suffolk and are seeking the Health and Wellbeing Board's approval and direct contribution to this.
4. We are also seeking approval for the submission of the attached *Better Care Fund* templates to the Department of Health and the Local Government Association. The *Better Care Fund* is a catalyst to enable rapid change to create a system that is best for Suffolk. The templates set out the ambition and thematic areas for the development of integrated care in Suffolk. In depth work will need to be done outside the timescales of the *Better Care Fund* template submission, which will result in agreed, coproduced five year plans for Suffolk, which may well increase the budgets pooled into the Fund.

Action recommended

5. The Health and Wellbeing Board is asked to:
 - 5.1. Agree the shared vision articulated in the *Better Care Fund* template and that it reflects the aims and objectives articulated in the Joint Health and Wellbeing Strategy and the needs identified in the Joint Strategic Needs Assessment.
 - 5.2. Agree that the *Better Care Fund* template provides an effective catalyst to drive delivery of our vision.
 - 5.3. Determine how the Health and Wellbeing Board wishes to be involved in the continuing development and planning work, critically to assure submissions due in April and June for our five year plans.
 - 5.4. Delegate decision making for the further amendments of the *Better Care Fund* template to the Director of Adult and Community Services, the Chief Officer for Ipswich and East/West Suffolk CCGs and the Chief Executive of Great Yarmouth and Waveney CCG working together as a group, in consultation with the Chairman of the Health and Wellbeing Board.

Reason for recommendation

6. The Chairman of the Health and Wellbeing Board, along with the County Council and the Chairs of the Clinical Commissioning Groups, is a required signatory to the *Better Care Fund* template as an indication of how Suffolk commissioning and provider partners intend to deliver integrated services by 2018. This submission is required by NHS England and the Local Government Association as part of an early assurance process through which they wish to see clarity of direction of travel, agreement for scale and pace of change and for assurance that we are effectively planning and resourcing the programme of change with partners.
7. The national assumptions are that by working together to address needs in the context of our Health and Wellbeing Strategy, we will improve outcomes for people through integrated commissioning, planning and delivery of services. This in turn will enable us to make best use of resources to fund effective services.

8. The Department of Health requires the *Better Care Fund* template to be signed off by the Health and Wellbeing Board because they are best placed to decide whether the proposals meet the needs of the population. The template is due for submission to the Suffolk's NHS Local Area Team and local government representative by 14th February 2014.

Alternative options

9. The Health and Wellbeing Board could suggest alternative content to the existing draft template that would need to be incorporated into its development prior to the 14th February and then agreed (through delegated authority) as the final version of the draft template.

Who will be affected by this decision?

10. All people in Suffolk and providers, commissioners and those with statutory duties to secure health, care and wellbeing services for people in Suffolk.

Main body of report

What are the key issues to consider?

Vision

11. The Health and Wellbeing Board is already committed to working together across age groups to ensure a population approach to meeting need in Suffolk, through tackling the barriers to good health and addressing the key determinants of health. The *Better Care Fund* will support the Board to make further progress on delivering their four priority outcomes:
 - Every child in Suffolk has the best start in life
 - Suffolk residents have access to a healthy environment and take responsibility for their own health and wellbeing
 - Older people in Suffolk have a good quality of life
 - People in Suffolk have the opportunity to improve their mental health and wellbeing
12. The Health and Wellbeing Board has stated that it will make a difference by
 - Influencing the commissioning plans of the public sector
 - Promoting joint commissioning
 - Bringing public money together to greater effect
 - Including the voluntary sector and maximising their skills and experiences.
13. The *Better Care Fund* supports the Health and Wellbeing Board to carry out these actions, the details of which will be set out in a five year vision for an integrated health and care system in Suffolk. Some of the opportunities that the *Better Care Fund* creates will lead to a more ambitious programme that will, for example, integrate front line services around primary care, allow for joint procurement of services and market development for key community, health and care services based in geographical localities and develop contractual change and innovation to drive integration across hospital and community provision.

14. The aim will be to modernise services to better face the demands and expectations of Suffolk people including our older people. This will mean a change in the way primary care services, social work, community NHS services and voluntary and commercial sector, police, education and communities respond - an ambitious programme being driven by the Suffolk Health and Wellbeing Board.
15. In Waveney, the Great Yarmouth and Waveney System Leaders Partnership is leading the development of an Integrated Care System. The Great Yarmouth and Waveney five year plan will set out how this will be delivered. In the rest of Suffolk the Suffolk System Leadership Partnership has started the work to design how an integrated health and care system would meet the agreed outcomes developed by the Partnership. This design will inform that actions needed in the Ipswich and East/West Suffolk five year plan. In both of these areas a wide range of partners are actively involved, including District and Borough Councils, health and care provider organisations and the voluntary and community sector.
16. The submission of the *Better Care Fund* templates will be a key milestone in the work described above. The mechanisms in the templates, for example pooled funding, will act as enablers for our shared commitment to deliver integrated care. Whilst the national conditions that the system must demonstrate within the template start to identify how the fund will be used, there is further work that must be carried out quickly to define the priority actions for the use of the fund. These will be developed by the System Leadership Partnerships, as core elements of the integrated designs. The work will be supported by a joint modelling team in order to provide further clarity for the Health and Wellbeing Board so that they can be confident that the two and five year plans will deliver the vision for Suffolk.

National Context

17. The £3.8 billion *Better Care Fund* (formerly the Integration Transformation Fund) was announced by the Government as part of the Comprehensive Spending Review in June 2013.
18. In announcing this integrated fund, the Chancellor stated: "*Integrated health and social care [is]: no longer a vague aspiration but concrete reality, transforming the way we look after people who need our care most.*"
19. The creation of this integrated fund supported the vision and principles outlined in 'Caring for Our Future' the White Paper published in July 2011. This was to create a new system that "*will promote wellbeing and independence at all stages to reduce the risk of people reaching a crisis point, and so improve their lives*".
20. The White Paper states this vision would be achieved through: better information and advice; more support within communities (including appropriate housing and support to carers) and reablement and crisis response services to help people regain independence after a crisis. These underpin the framework for the *Better Care Fund* and more widely the direction of travel for national health and care policy encapsulated, for example in the Care and Support Bill. This direction of travel is entirely in line with the Suffolk Health and Wellbeing Strategy.

21. In Suffolk we already have some building blocks in place and the shadow Health and Wellbeing Board approved the older peoples plan on the 1st December 2011. This built on existing evidence of what works and is being implemented through the Integrated Care Networks. However, the Health and Wellbeing Board should note that there is a paucity of evidence base in social care - this does not mean interventions are not effective but that the research base is not yet there. The Public Health team in the County Council are playing a key role in supporting the understanding of the evidence base for integrated action and there are agreements with a variety of academic establishments to contribute to the development of that research base.
22. In October 2013 a joint letter from the Local Government Association and NHS England set out six national conditions associated with the Fund:
 - a) Plans to be jointly agreed;
 - b) Protection for social care services (not spending);
 - c) As part of agreed local plans, 7-day services in health and social care to support patients being discharged and prevent unnecessary admissions at weekends;
 - d) Better data sharing between health and social care, based on the NHS number;
 - e) Ensure a joint approach to assessments and care planning and ensure that, where funding is used for integrated packages of care, there will be an accountable professional;
 - f) Agreement on the consequential impact of changes in the acute sector.
23. These conditions were supplemented by milestones issued in November 2013 by NHS England, Monitor, NHS Trust Development Authority and Local Government Association and guidance issued by NHS England late in December 2013.

Process for submitting the *Better Care Fund* templates?

24. In order to access the *Better Care Fund* Suffolk must submit five year delivery plans for approval by Government. The first stage in completing this process is submitting the draft *Better Care Fund* templates to Government on 14th February 2014. (Note that the BCF guidance changed in late December 2014, to provide more time for partners to develop the template. Signed off templates are still required on the 14th February, but they will be draft, with further amendments possible until April).
25. In the spirit of integration, the *Better Care Fund* template must be jointly agreed by each of Suffolk's three Clinical Commissioning Groups, its Health and Wellbeing Board and Suffolk County Council.
26. The Annex to the NHS England Planning Guidance published in late December 2013, "*Developing Plans for the Better Care Fund*" states that "Each statutory Health and Wellbeing Board will sign off the plan for its constituent councils and CCGs. The Fund plan must be developed as a fully integral part of the CCG's wider strategic and operational plan but the *Better Care Fund* elements must be capable of being extracted to be seen as a stand-alone plan."

27. In accordance with its duty to encourage integrated approaches, Suffolk's Health and Wellbeing Board held a workshop on 12 December 2013 to understand the implications of the Government's process for establishing the *Better Care Fund* and its role in supporting Suffolk to achieve the best outcomes for integrated health and care services.
28. There was consensus at the Board that it should retain focus on the wider outcomes for achieving integrated, person centred care that enables independence. And that the fund is a significant enabler to achieving the best outcomes for Suffolk.
29. In addition to the Health and Wellbeing Board and individual partner organisations, the process of developing Suffolk's plan is supported by the two joint commissioning partnerships for Great Yarmouth and Waveney and West Suffolk and Ipswich and East Suffolk CCGs known as System Leadership Partnerships that bring together relevant commissioners and providers.
30. The System Leadership Partnership will meet on the 6th February to agree the final version of the *Better Care Fund* templates for the Health and Wellbeing Board. Therefore the appendices attached to this report are draft and any amendments made to the published version of the templates will be made explicit at the Board meeting on the 7th February.
31. The draft *Better Care Fund* template at the time of writing was due to be considered at the Governing Body meetings of Ipswich and East Suffolk CCG (28th January) , West Suffolk CCG (29th January), Great Yarmouth and Waveney CCG (30th January) and at the County Council's Cabinet (28th January). At each of these meetings a recommendation was proposed to endorse the draft templates, and to delegate decision making for future amendments to the relevant officers.
32. In agreeing the template the Health and Wellbeing Board needs to be assured that it meets the ambition for integrated care in Suffolk, and that it addresses the national conditions set out in the guidance. In addition the Board should consider whether the template meets the following aspects which will be critical for successful implementation of the plan in Suffolk:
 - The plan sets out appropriate conditions and actions for our population
 - The plan is consistent with the JSNA and the JHWS and will deliver tangible benefits for the local population.
 - The plan adds value to existing plans, it is not just what would have been done anyway
 - The plan is ambitious yet realistic
 - That the providers, the public and the voluntary and community sector have been involved and their views taken into account
 - Equality impact has been taken into account, (note that an equality impact assessment will need to be submitted with the final plan by April).
33. The guidance from NHS England around the assurance of the plans does not address the future role of the Health and Wellbeing Board in assuring

the final version of the *Better Care Fund* templates or delivery of the ambitions in the template, after April 3rd 2014. However the Health and Wellbeing Board will see the final templates and the future work as critical to the achievement of the Joint Health and Wellbeing Strategy and will wish to stay engaged through the System Leadership Partnerships.

What are the resource and risk implications?

34. On 20th December 2013 Government confirmed that the whole of Suffolk's share of the £3.8 billion national *Better Care Fund* would be £50.1 million each year for two years from 2015/16. It should be noted that this funding is not new money but is already embed in County Council, District Council and CCG current spend. To realise efficiency and healthy living gains reallocation decisions by all organisations will be required. The funding streams that make up the *Better Care Fund* are:
- a) Carers' breaks funding (£130 million nationally, £1.7 million in Suffolk)
 - b) Clinical Commissioning Group reablement funding (£300 million nationally, £4 million in Suffolk)
 - c) Capital funding (£354 million including £220 million Disabled Facilities Grant (DFG) nationally, £4.5 million for Suffolk, including £2.7 million for DFG)
 - d) Existing transfer from health to social care (£1.1 billion nationally, £14.9 million in Suffolk)
 - e) An additional transfer of funding that will be based on delivery of integrated plans and successful performance in delivering a range of system metrics (£1 billion nationally, £13.1 million in Suffolk).
 - f) An additional transfer of funding to support demographic pressures and the requirements of the Care Bill (£0.9 billion nationally, £11.8 million in Suffolk)
35. There are already funding transfer agreements in place between NHS and Suffolk County Council. For 2013/14 there is a Section 256 transfer of £11.7 million to Suffolk County Council. For 2014/15 this increases to £14.9 million, of which £0.5 million is an inflationary increase and £2.7 million is the first tranche of the *Better Care Fund*. The whole £14.9 million becomes part of the *Better Care Fund* for 2015/16.
36. The Health and Wellbeing Board need to be able to submit the *Better Care Fund* template to Government by 14th February 2014 in order to begin the process of negotiating access Suffolk's share of the fund. Failure to do so would represent severe financial risk to health and care organisations in Suffolk with consequent impact on the health and wellbeing of Suffolk residents.

What are the timescales associated with this decision?

37. The following nationally set milestones are associated with the fund and present a challenging timetable for all partners involved:

- a) 14th February 2014 draft *Better Care Fund* template submitted to Government
 - b) 3rd April 2014 final two year, final *Better Care Fund* template and draft five year integration plans submitted to Government based on the *Better Care Fund* template
 - c) 20th June 2014 final five year integration plan submitted to Government
38. The draft templates attached to the papers for this meeting are in the process of being discussed at the CCG Governing Bodies, and at Suffolk County Council's Cabinet. The last of these important governance meetings is on the 30th January.
39. Due to the tight timescales there are also elements of the template that are still to be developed, for instance the trajectories and ambitions for the performance targets, which will determine the performance related element of the Fund.
40. Any changes to the published draft template will be made explicit at the Board on the 7th February.
41. The draft *Better Care Fund* template is attached at Appendix 1, with a metrics and finance supplement at Appendix 2.

Assessing Equality Impact and future engagement activity

42. In making this decision the Health and Wellbeing Board must have regard to the public sector equality duty (PSED) under s.149 of the Equalities Act 2010, i.e. have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
 - Advance equality of opportunity between people who share a protected characteristic and those who do not
 - Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
43. The PSED is a relevant factor in making decisions in relation to the health and care integration, but does not impose a duty to achieve the outcomes in s.149. Rather it is only one factor that needs to be considered, and needs to be balanced against other relevant factors. However, it should be noted that decisions made by other authorities where due regard had not been appropriately considered has resulted in decisions being taken to judicial review. To this affect an EIA screening will form part of the management of this programme and will be carried out prior to submission of the final plan on the 3rd April 2014. Therefore, it is vital that as the programme develops, effective engagement and consultation takes place that is proportionate and reasonable to the transformation.
44. The protected characteristics as outlined in the Act are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

45. The Systems Leadership Partnership has commissioned a joint engagement strategy across the three CCGs in Suffolk and Suffolk County Council, with a view to ensuring effective communication, consultation and co-production throughout the development and implementation of the integrated plans. This will draw on existing mechanisms, such as the Children's Ambassador, Suffolk Speaks and the Patient Revolution, as well as on our collaborative work already underway with the voluntary and community sector, including the Suffolk Coalition of Disabled People.

Sources of Further Information

- a) 'Caring for Our Future' White Paper, Department of Health, 11 July 2012:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136422/White-Paper-Caring-for-our-future-reforming-care-and-support-PDF-1580K.pdf
- b) Draft Care and Support Bill, introduced to Parliament March 2013:
<http://www.parliament.uk/business/committees/committees-a-z/joint-select/draft-care-and-support-bill/>
- c) Comprehensive Spending Review Speech by the Chancellor of the Exchequer, 26 June 2013
<https://www.gov.uk/government/speeches/spending-round-2013-speech>
- d) Joint Letter from NHS England and Local Government Association: 'Next Steps on implementing the Integration Transformation Fund', 17 October 2013:
<http://www.local.gov.uk/documents/10180/5572443/Next+step+s+on+implementing+the+Integration+Transformation+Fund/4e797e4b-0f1a-4d53-a87d-6a384a86792d>
- e) Joint Letter from: NHS England, Monitor, NHS Trust Development Authority and Local Government Association: 'Strategic and Operational Planning in the NHS' 4th November 2013.
<http://www.england.nhs.uk/wp-content/uploads/2013/11/jnt-plann-lett.pdf>
- f) NHS England planning guidance for *Better Care Fund*, NHS England, December 2013
<http://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/>
- g) Joint Health and Wellbeing Strategy for Suffolk
http://www.transformingsuffolk.co.uk/files/2013/strategy_summary-v07-web.pdf1.pdf

