



ADDITIONAL / TO FOLLOW AGENDA ITEMS

This is a supplement to the original agenda and includes reports that are additional to the original agenda or which were marked 'to follow'.

NOTTINGHAM CITY COUNCIL

HEALTH AND WELLBEING BOARD COMMISSIONING SUB COMMITTEE

Date: Wednesday, 13 December 2017

Time: 3.00 pm

Place: Loxley House, Station Street, Nottingham NG2 3NG

Governance Officer: Jane Garrard **Direct Dial:** 0115 8764315

AGENDA

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HEALTH AND WELLBEING BOARD COMMISSIONING SUB-COMMITTEE**13 DECEMBER 2017**

	Report for Resolution/ Information
Title:	Better Care Fund Savings 2017/18 -2018/19
Lead officer(s):	Maria Principe, Director of Contracts and Transformation, Nottingham City Clinical Commissioning Group Helen Jones, Director of Adult Social Care, Nottingham City Council
Author and contact details for further information:	Ciara Stuart, Assistant Director for Out of Hospital Care ciara.stuart@nhs.net
Brief summary:	<p>The Better Care Fund (BCF) is a programme spanning both the NHS and local government, which seeks to join-up health and care services so that people can manage their own health and wellbeing, and live independently in their own homes and communities for as long as possible.</p> <p>The BCF supports integration by encouraging Clinical Commissioning Groups (CCGs) and local authorities to enter into pooled budgets arrangements and agree an integrated spending plan.</p> <p>The pooled budget arrangements agreed under the Better Care Funding Programme have helped local health and social care services to prioritise spending in a way that makes the most of funding available from central government and achieve better, more integrated services for patients and citizens, with less strain on our health and social care systems.</p> <p>Early in 2017 it was identified that there was an over-commitment within the BCF and savings were required to bring the schemes back down into the cost envelope. A paper was submitted to the July HWBCSC to agree those savings and submit a balanced budget and BCF plan to NHSE.</p> <p>The service line review process was subsequently extended further as a means of delivering cost savings from the BCF to support wider Nottingham City Council (NCC) and CCG financial recovery programmes.</p> <p>The attached document provides a scheme level breakdown of where savings are proposed and their supporting documents.</p>
Is any of the report exempt from publication? <i>If yes, include reason</i>	Appendices 1 and 2 of this report are exempt from publication under paragraphs 3 and 4 of Schedule 12A to the Local Government Act 1972 because they contain information relating to the financial or business affairs of organisations involved in delivered services to the council.

	Having regard to all the circumstances, the public interest in maintaining the exemption outweighs the public interest in disclosing the information because it would prejudice contract negotiations and would put information within the public domain prior to consultation with unions.
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Recommendation to the Health and Wellbeing Board Commissioning Sub-Committee:

The Health and Wellbeing Board Commissioning Sub-Committee is asked to:

- a) ratify the proposed savings outlined in detail in appendices 1 and 2; and
- b) note the need to engage on how the savings will be delivered and potential impact on fiscal year end of 2018/19 savings.

Contribution to Joint Health and Wellbeing Strategy:

Health and Wellbeing Strategy aims and outcomes	Summary of contribution to the Strategy
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	<p>The savings proposals do not detract from the main objectives of our Better Care Fund Plan which are to: -</p> <ul style="list-style-type: none"> - Remove false divides between physical, psychological and social needs - Focus on the whole person, not the condition - Support citizens to thrive, creating independence - not dependence - Services tailored to need - hospital will be a place of choice, not a default - Not incur delays, people will be in the best place to meet their need <p>The vision is that in five years' time care is integrated so that the citizen has no visibility of the organisations / different parts of the system delivering it.</p> <p>By 2020, the aspiration is that: -</p> <ul style="list-style-type: none"> - People will be living longer, more independent and better quality lives, remaining at home for as long as possible - People will only be in hospital if that is the best place – not because there is nowhere else to go - Services in the community will allow patients to be rapidly discharged from hospital - New technologies will help people to self-care - The workforce will be trained to offer more flexible care
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

	<p>- People will understand and access the right services in the right place at the right time.</p> <p>The most fundamental changes that citizens will experience will result from the adoption of models of integration that make a person's journey through the system of care as simple as possible, and encourage shared decision making.</p>
<p>How mental health and wellbeing is being championed in line with the Health and Wellbeing Board's aspiration to give equal value to mental and physical health</p>	
<p>All schemes, both mental and physical health have followed the same review process.</p>	

<p>Reason for the decision:</p>	<p>As previously stated there is a need for the Better Care Fund to deliver savings in order to manage national budget reductions for NCC. Health and social care have continued to work in partnership to deliver savings whilst delivering against the objectives of the BCF to support people outside of acute services in an integrated way. This commitment has resulted in a line by line review of all schemes and the development of proposals to identify how savings can be made across the pooled fund. Appendices 1 and 2 provide rationale at scheme level.</p>
<p>Total value of the decision:</p>	<p>See below</p>
<p>Financial implications and comments:</p>	<p>The CCG and NCC have recognised the importance of system working and the benefits this will bring to the population in the City. It is therefore proposed that there will be a 90:10 percentage split of savings between NCC and City CCG for both 2017/18 and 2018/19.</p> <p>Net of the over-commitment, the forecast savings at the time of writing are:</p> <ul style="list-style-type: none"> • Total amount for 2017/18- £697k • Total amount for 2018/19 -£2,091k <p>The amounts stated are not confirmed and will vary dependent on deliverability of schemes. The proposed 90:10 split is offered on the basis that the 2018/19 savings are capped at the jointly identified and agreed £2m. Any savings delivered above the £2m would require the proposed percentage split to be revisited accordingly.</p> <p>Monitoring of the BCF pooled Budget is</p>

	presented to Commissioning Sub-Committee on a quarterly basis and should these proposals be agreed, progress against the savings and overall pooled budget position will be included within these reports.
Procurement implications and comments (including where relevant social value implications):	Identified on a scheme by scheme basis in Appendix 1.
Other implications and comments, including legal, risk management, crime and disorder:	<p>This report proposes withdrawing or reducing certain services funded via the BCF. Where services which are delivered or commissioned by the CCG or the City Council are being withdrawn or varied commissioners must ensure it has undertaken or will undertake sufficient engagement with those persons who are affected by the proposals. Any failure to adequately consult could lead to a judicial review of the proposal. Appendix 1 and 2 outline the level of engagement required by each scheme.</p> <p>Where services are commissioned externally and there is a proposal to withdraw or vary the level of services provided it will be necessary to look at the terms of the commissioning contract to determine how the change can be progressed. This may result in notice being given, contract variations being negotiated and in some instances procurement exercises being undertaken.</p> <p>The Legal Services team will provide advice and assistance to the City Council's Commissioning and Procurement teams in connection with these proposals. The CCG will seek advice from their solicitors as and when required.</p>
Equalities implications and comments: <i>(has an Equality Impact Assessment been completed? If not, why?)</i>	Please see individual EIAs contained in appendix 1 and 2.
Published documents referred to in the report: <i>e.g. legislation, statutory guidance, previous Sub Committee reports and minutes</i>	N/A
Background papers relied upon in writing the report: <i>Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in</i>	PA Consulting review of the Nottingham City Better Care Fund

<p><i>preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.</i></p>	
<p>Other options considered and rejected:</p>	<p>No other options considered as requirement to make savings was identified as a priority by Nottingham City Council in order to support the organisation's overall financial position.</p>

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By virtue of paragraph(s) 3, 4 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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