

**HEALTH AND WELLBEING BOARD COMMISSIONING SUB-COMMITTEE -
May 18th 2016**

Title of paper:	Better Care Fund Underspend Proposals	
Director(s)/ Corporate Director(s):	Candida Brudenell Marie Principe	Wards affected:
Report author(s) and contact details:	Clare Gilbert Interim Strategic Commissioning Manager Clare.gilbert@nottinghamcity.gov.uk	
Other colleagues who have provided input:	Colin Monckton, Linda Sellars, Gemma Poulter, Jo Williams	
Date of consultation with Portfolio Holder(s) (if relevant)	16th May 2016	
Total value of the decision:	£643,120	
Relevant Council Plan Key Theme:		
Strategic Regeneration and Development		<input type="checkbox"/>
Schools		<input type="checkbox"/>
Planning and Housing		<input type="checkbox"/>
Community Services		<input type="checkbox"/>
Energy, Sustainability and Customer		<input type="checkbox"/>
Jobs, Growth and Transport		<input type="checkbox"/>
Adults, Health and Community Sector		<input checked="" type="checkbox"/>
Children, Early Intervention and Early Years		<input type="checkbox"/>
Leisure and Culture		<input type="checkbox"/>
Resources and Neighbourhood Regeneration		<input type="checkbox"/>
Relevant Health and Wellbeing Strategy Priority:		
Healthy Nottingham - Preventing alcohol misuse		<input type="checkbox"/>
Integrated care - Supporting older people		<input checked="" type="checkbox"/>
Early Intervention - Improving mental health		<input type="checkbox"/>
Changing culture and systems - Priority Families		<input type="checkbox"/>
Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities): Proposals around the utilisation of the 2015/16 underspend.		
Recommendation(s):		
1	That the Better Care Fund allocation for CityCare contracts is increased by £111,000	
2	Commissioning Sub-committee agree the transfer of the funding for the Looking After Each Other (LAEO) Project from the main Better Care Fund submission to the underspend budget	
3	Commissioning Sub-committee consider the suitability of proposals presented for utilisation of the underspend and approve proposals for utilisation of 2015/16 BCF underspend as detailed in 1.3 and approve spend for this purpose up to a total of £643,120	
4	Commissioning Sub-committee require that proposals agreed are subject to robust performance management arrangements which will be reported to the Integrated Care Board	
How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem')		

1. REASONS FOR RECOMMENDATIONS

- 1.1 Following the submission of the Better Care Fund Plan to the Commissioning Executive Group on the 16th March there has been a slight re-alignment of the projects which sit within the fund to meet the additional cost of the contracts for a range of CityCare services including community triage, the Care Co-ordination Team and the Care Co-ordinators, which totals £111,000. The shortfall will be met by an equivalent reduction to the Access and Navigation spend. In order to meet this additional pressure and to retain the overall level of spend at the agreed level of £25,857,401 the LAEO Pilot scheme is being taken out of the BCF submission and instead will be included alongside the other underspend proposals. This means that the LAEO Pilot will not be subject to national reporting requirements. However, it will be monitored through the Integrated Care Board.
- 1.2 There is a £0.672m unallocated underspend identified against agreed 2015-16 BCF funding. A further £0.4m underspend may become available once the Better Care Fund receives final sign off. The underspend proposals will support delivery of BCF metrics, further integration of health and social care provision in the City and improve outcomes for vulnerable older citizens and those with long-term conditions. The proposals are as follows:
- 1.3 Looking After Each Other Pilot – as approved by the CEG on the 16th March for inclusion within the BCF Plan
- | | |
|---|-----------------|
| One to One Care | £95,000 |
| Integration of CityCare and NCC Reablement and Urgent Care Services | £50,838 |
| Creation of NCC Generic Homecare Team | £108,282 |
| Hospital Discharge Service Proposal by CityCare | £303,000 |
| | £152,370 |
| Total | £709,490 |

The need to continue hospital discharge follow up is acknowledged and it is therefore proposed that opportunities are explored with Citycare to ensure a cost effective approach. It is therefore recommend that an allocation of a maximum of £70,000 is allocated. This would bring the revised total to **£627,120** which bring the proposals within the level of underspend currently available.

- 1.4 Further proposals for utilisation of the underspend will be submitted later in the year to meet evidenced based transformation projects and address pressures which best support the BCF targets.
- 1.5 Performance management data is required to evaluate the effectiveness of all projects within the BCF, including those funded from the underspend, in order to inform most effective use of resources and to guide future commissioning intentions.

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 The Nottingham City BCF Plan 2015/16 was approved by the Health and Well-Being Board on 25 February 2014. The plan was subsequently revised in accordance with NHS England requirements and approved by HWB on 29 October 2014.

- 2.2 The Better Care Fund has been established by the Government to provide funds to local areas to support the integration of health and social care and to seek to achieve the National Conditions and Local Objectives. It is a requirement of the Better Care Fund that the CCG and the Council establish a pooled fund for this purpose. The pooled budget for 2015/16 totals £25.845m.
- 2.3 Financial monitoring has identified a substantial projected in-year underspend. This is predominantly due to delay in implementing seven day service provision.
- 2.4 The final submission date for the 2016/17 BCF was on the 3rd May 2016. The narrative proposals have been submitted and have received formal assurance through the regional process which means that it is subject to no significant alterations or changes.

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 The option to utilise the underspend to form part of a payment by results budget in relation to the Delayed Transfer of Care has been rejected and does not form part of the BCF submission. It was agreed that the funds would be more effectively used to directly address DTOC.

4. FINANCE COMMENTS (INCLUDING VALUE FOR MONEY/VAT)

- 4.1 As detailed in paragraph 1.2, the value of unallocated underspends within the 2015/16 Better Care Fund is £0.672m. Further underspends may be available through the local approach adopted in 2016/17 addressing the suggested payment by results for Delayed Transfers of Care, however the final submission of the 2016/17 BCF Plan is still subject to formal approval by NHS England. The 2015/16 BCF out-turn report will be presented at the next Commissioning Sub-Committee meeting.
- 4.2 The financial value of the underspend recommendations contained within this report is detailed in **Table 1** below.

TABLE 1 – FINANCIAL SUMMARY OF UNDERSPEND RECOMMENDATIONS		
Scheme	Lead Partner	2016/17 Value £
Looking After Each Other Pilot	City Council	95,000
One to One Care	City Council	50,838
Integration of CityCare and NCC Reablement and Urgent Care Services	Joint	108,282
Generic Homecare Team	City Council	303,000
Hospital Discharge Service	City CCG	70,000
Total		627,120

*The increase in contract values of CityCare services of £111,000 will be partially offset by the reallocation of the Looking After Each Other Pilot from the 2016/17 BCF Plan to the underspend funds. The balance of £16,000 will be met from the a reduction to the Access and Navigation funding, however the full cost will need to be managed within the 2017/18 BCF allocation.

- 4.3 It should be noted that underspend funds are non-recurrent and the proposals contained in Table 1 above are pilot schemes with the exception of the Integration of CityCare and NCC Reablement and Urgent Care Services. This scheme is a mix of non-recurrent and ongoing costs although it is detailed in the supporting attachment to this report that any ongoing costs will be met through the delivery of efficiencies from the integrated service. Continuation of any of these initiatives beyond the scope of these recommendations will be subject to further appropriate approval.
- 4.4 Performance management information will be required to evaluate the effectiveness of these schemes and demonstrate outcomes delivered in supporting cost efficiencies and demand management for health and social care services.

5. LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES AND, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

- 5.1 This report does not raise any significant legal issues. The agreement governing the BCF pooled budget specifies that underspends will be agreed by the partners through the sub-committee.

6. EQUALITY IMPACT ASSESSMENT

- 6.1 Has the equality impact of the proposals in this report been assessed?

No

An EIA is not required because:

The underspend proposals do not present a significant change in delivery to the citizen

Yes

Attached as Appendix x, and due regard will be given to any implications identified in it.

7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

- 7.1 Not applicable

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- 8.1 BCF Underspend Proposals 2016/17 March 2016 CEG Report
BCF Plan Submission 2016/17 CEG Report