

Nottingham City Better Care Fund Governance Structure 2019/20

Date: 12 March 2019

Version: 10

1.1 Introduction

The purpose of this document is to define the current governance structure for both Nottingham City Clinical Commissioning Group (NC CCG) and Nottingham City Council (NCC), initiating discussion to ensure effective and timely delivery for the Better Care Fund (BCF) for 2019/20.

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 communities for as long as possible. More recently, the NHS Long Term Plan, published in January 2019, outlines its intention to review the BCF beyond 2019/20. This review is due to conclude in early 2019.

To note, NC CCG is part of Greater Nottingham Clinical Commissioning Partnership (GN CCP), along with Nottingham North East CCG, Nottingham West CCG and Rushcliffe CCG.

1.2 Section 75 Agreement

Section 75 of the NHS Act 2006, signed by NC CCG and NCC, gives powers to local authorities and CCGs to enter into partnership arrangements in relation to certain functions in order to support and underpin more effective joint working and to help drive integration across health and social care.

The purpose of the agreement is to set out the terms on which the partners have agreed to collaborate and to establish a framework through which the partners can secure the future position of health and social care services through lead or joint commissioning arrangements. It is also the means through which the partners pool funds and align budgets.

Section 19 of the Section 75 Agreement describes the governance arrangements as outlined in Appendix 1 below. This agreement will be reviewed as part of the refresh of the BCF Plan for 2019/20.

1.3 Responsibilities of the groups

The following table outlines roles and responsibilities across the different groups, to ensure timely delivery and assurance of the Better Care Fund:

Joint Responsibilities			
Group	Frequency	Members / Attendees	Responsibilities
Health & Wellbeing Board	Every other month	<p>The Health and Wellbeing Board comprises of a statutory partnership between key local leaders from the City Council, NHS and the wider community to improve the health and wellbeing of the population of Nottingham and reduce health inequalities.</p> <p><u>Voting members:</u></p> <ul style="list-style-type: none"> NCC - Portfolio Holder with health within its remit; Portfolio Holder with children's services within its remit; two other City Councillors; Corporate Director for Children and Adults; Director of Adult Social Care; and Director of Public Health NC CCG – four representatives Healthwatch Nottingham Board – one representative NHS England – one representative <p><u>Non-voting members:</u></p> <ul style="list-style-type: none"> Nottingham University Hospitals NHS Trust – one representative Nottinghamshire Healthcare NHS Foundation Trust – one representative Nottingham CityCare Partnership – one representative Nottingham City Homes – one representative Department for Work and Pensions – one representative Nottinghamshire Police (Nottingham City Division) – one representative Nottinghamshire Fire and Rescue Service – one representative Nottingham Universities – one representative Up to two individuals representing the interests of the Third Sector <p>Full members are detailed on the following webpage: http://www.healthynottingham.co.uk/meettheboard/</p>	<p>To improve the health and wellbeing of the population of Nottingham and reduce health inequalities through:</p> <ul style="list-style-type: none"> Developing a shared understanding of the health and wellbeing needs of its communities from pre-birth to end of life including the health inequalities within and between communities Providing system leadership to secure collaboration to meet these needs more effectively Having strategic influence over commissioning decisions across health, public health and social care encouraging integration where appropriate Recognising the impact of the wider determinants of health on health and wellbeing Involving patient and service user representatives and councillors in commissioning decisions. <p>The Health and Wellbeing Board's remit for Better Care Fund is to provide oversight. Given that some members of the Board represent provider organisations, strategic funding decisions relating to the Better Care Fund are delegated to the Health and Wellbeing Board Commissioning Sub-Committee which is a commissioner-only body.</p> <p>Terms of Reference:</p> <div style="text-align: center;">  </div> <p>Health and Wellbeing Board Terms of Refer</p>

Health & Wellbeing Board Commissioning Sub-Committee	Quarterly	<p><u>Voting Members:</u></p> <table border="1" data-bbox="600 220 1509 357"> <tr> <td>Portfolio Holder with a remit covering Health</td> <td>NCC</td> </tr> <tr> <td>Director of Commissioning and Procurement</td> <td>NCC</td> </tr> <tr> <td>Locality Director – Nottingham City</td> <td>GNCCP</td> </tr> <tr> <td>GP Lead</td> <td>GNCCP</td> </tr> </table> <p><u>Non-voting Members:</u></p> <table border="1" data-bbox="600 450 1509 737"> <tr> <td>Director of Public Health</td> <td>NCC</td> </tr> <tr> <td>Director of Adult Social Care</td> <td>NCC</td> </tr> <tr> <td>Head of Commissioning</td> <td>NCC</td> </tr> <tr> <td>Head of Commercial Finance</td> <td>NCC</td> </tr> <tr> <td>Director of Children’s Integrated Services</td> <td>NCC</td> </tr> <tr> <td>Group Assistant Director – Mental Health and Community Services</td> <td>GNCCP</td> </tr> <tr> <td>Representative</td> <td>Healthwatch Nottingham</td> </tr> </table>	Portfolio Holder with a remit covering Health	NCC	Director of Commissioning and Procurement	NCC	Locality Director – Nottingham City	GNCCP	GP Lead	GNCCP	Director of Public Health	NCC	Director of Adult Social Care	NCC	Head of Commissioning	NCC	Head of Commercial Finance	NCC	Director of Children’s Integrated Services	NCC	Group Assistant Director – Mental Health and Community Services	GNCCP	Representative	Healthwatch Nottingham	<p>The Health and Wellbeing Board established the Health and Wellbeing Board Commissioning Sub Committee in 2015 as a commissioner-only body, bringing together commissioners from Nottingham City Council and NHS Nottingham City Clinical Commissioning Group to take strategic funding decisions delegated to it by the Board.</p> <p>Terms of Reference:</p> <div data-bbox="1608 475 1675 533" data-label="Image"> </div> <p data-bbox="1541 539 1742 587">Health and Wellbeing Board Commissioning</p>
Portfolio Holder with a remit covering Health	NCC																								
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Representative	Healthwatch Nottingham																								

BCF Delivery Group	Quarterly	<u>Membership</u>				<p>Responsibilities include:</p> <ul style="list-style-type: none"> • Quarterly national returns • Develop future BCF plan submissions and link with Regional BCF Leads • Completion and sign off finance and performance report • BCF performance monitoring and reporting • Pooled budget management and reporting • Scheme updates / progress • Deep dives on specific metrics where appropriate <p>Performance, finance and risk dashboards will be circulated to the BCF Delivery Group on a monthly basis. Extraordinary meetings may be organised if a risk to performance or finance has been identified.</p>
		Claire Kent	Head of Service Improvement and BCF	Chair / CCG Lead	GNCCP	
		Clare Gilbert	Commissioning Lead - Adults	LA Lead	NCC	
		Emma Stow	Analysis & Insight Manager	Performance Lead	NCC	
		James Berehowskyj	Senior Performance Analyst	Performance Lead	GNCCP	
		Hayley Mason	Strategic Finance Business Partner	Finance Lead	NCC	
		Tim Gallimore	Business Support Accountant	Finance Lead	GNCCP	
		Kerry Rainford	Assurance & Delivery Manager – Nottinghamshire	NHS England Representative	NHS England	
		Clare Rourke	Service Improvement Officer	Support and Minutes	GNCCP	

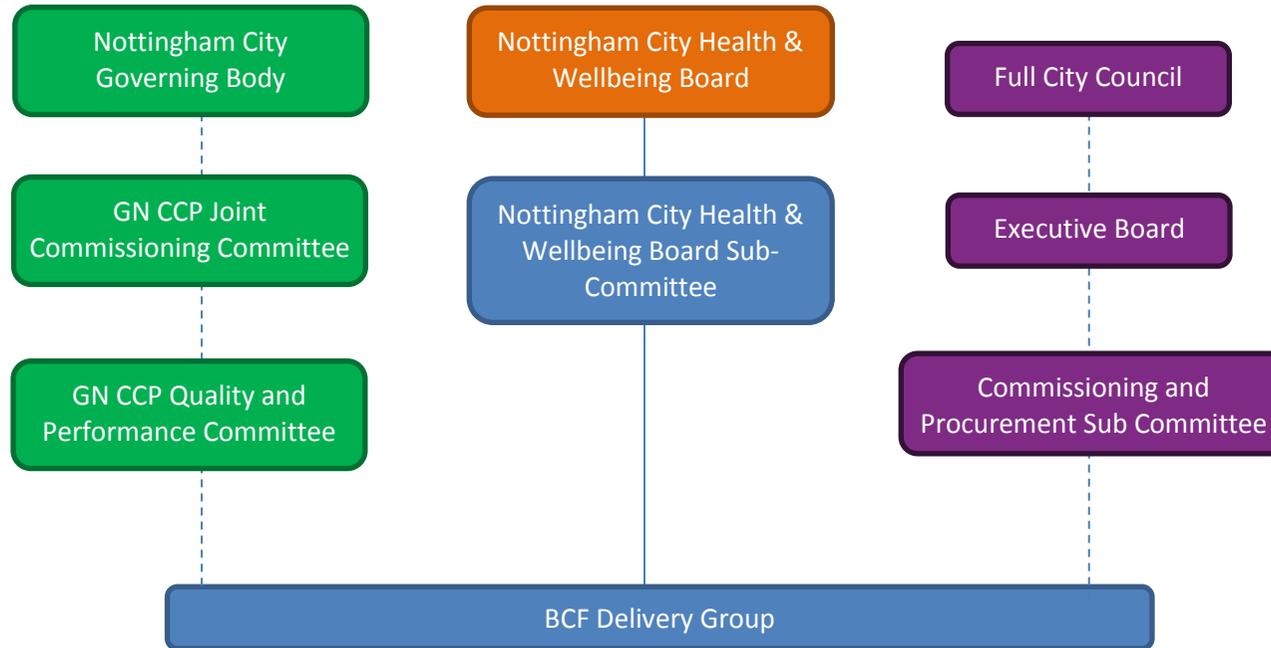
GN CCP Reporting			
Group	Frequency	Members / Attendees	Responsibilities
GN CCP Joint Commissioning Committee	Monthly	<p>The Chief Commissioning Officer is the exec sponsor for performance.</p> <p>The Director of Outcomes & Information is responsible for ensuring the Greater Nottingham Performance Report is updated and presented at each Joint Commissioning Committee.</p> <p>The Assistant Director for the Nottingham City Locality will attend where appropriate.</p>	<p>This Group operates as a single integrated commissioning body with the purpose of commissioning health services for the populations defined within the Constitutions of the Greater Nottingham CCGs.</p> <p>BCF responsibilities include completion of yearly assurance report and completion of monthly BCF performance report for Greater Nottingham.</p> <p>Terms of reference:</p> <p> JCC TOR May 2018.pdf</p>
GN CCP Quality and Performance Committee	Monthly	<p>The Director of Outcomes & Information is responsible for ensuring the Greater Nottingham Performance Report is updated and presented at each Quality and Performance Committee.</p> <p>The Assistant Director for the Nottingham City Locality will attend where appropriate.</p>	<p>The Quality and Performance Committee exists to scrutinise arrangements for ensuring the quality of CCG commissioned services and to oversee the development, implementation and monitoring of performance management arrangements.</p> <p>BCF responsibilities include completion of monthly BCF performance report for Greater Nottingham and BCF deep dives where scheduled.</p> <p>Terms of reference:</p> <p> Quality and Performance Committ</p>

NCC Reporting			
Group	Frequency	Members / Attendees	Responsibilities
Full Council	Six times a year	<p>All 55 City Councillors meet together as the City Council six times a year.</p> <p>Councillor Webster is the Portfolio Holder for Adult Social Care and Health.</p>	<p>The City Council agrees the over-arching policies and strategies of the Council, known as the 'policy framework', and sets the Council's budget and the level of council tax. It is also responsible for setting and amending the Council's Constitution; electing and removing the Leader of the Council; and establishing and appointing the membership of the various committees of the Council.</p> <p>Terms of reference: https://www.nottinghamcity.gov.uk/about-the-council/nottingham-city-councils-constitution/</p>
Executive Board	Monthly	<p>The Leader of the Council chairs the Executive Board. The Leader of the Council appoints councillors to sit on the Executive Board and allocates specific areas of responsibility, known as 'portfolios'. The councillors are known as 'the Executive' and collectively take decisions as an Executive Board.</p> <p>Councillor Webster is the Portfolio Holder for Adult Social Care and Health.</p>	<p>The Leader of the Council is elected by the City Council and is responsible for all of the executive functions of the Council – including most major decisions about service delivery within the over-arching policies and budget set by the City Council. He/ she can personally make these decisions or choose to delegate them, including to the Executive Board.</p> <p>Individual Executive councillors may work with Council officers and others to develop policy within their portfolio which then comes to Executive Board for approval.</p> <p>BCF responsibilities include oversight of the Council budget as well as the high-level partnership arrangements.</p> <p>Terms of reference: https://www.nottinghamcity.gov.uk/about-the-council/nottingham-city-councils-constitution/</p>

<p>Commissioning and Procurement Sub Committee</p>	<p>Monthly</p>	<p>The Committee's membership is the Leader of the Council and Executive councillors whose portfolios include commissioning.</p> <p>Representatives of Nottingham Community and Voluntary Service and Nottingham Equal have a standing invitation to attend and speak at meetings.</p> <p>The Commissioning Lead – Adults will attend where appropriate.</p>	<p>The delegation of decisions relating to commissioning and procurement is overseen by the Commissioning and Procurement Sub-Committee.</p> <p>The Commissioning and Procurement Sub-Committee oversees the Commissioning Framework and Procurement Strategy across the City Council and One Nottingham Strategic Partnership.</p> <p>BCF responsibilities include the formal authorisation of commissioning and procurement decisions, including external services that are commissioned through the iBCF.</p> <p>Terms of reference: https://www.nottinghamcity.gov.uk/about-the-council/nottingham-city-councils-constitution/</p>
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1.4 Governance Structure

The diagram below outlines the escalation process, for GN CCP, NCC and BCF reporting purposes:



Key:

GN CCP

NCC

City CCG / LA

Partnership

— accountable to

- - - feeds into

1.5 Other Mechanisms

The BCF Delivery Group is responsible for reporting the performance of the following metrics:

- Reduction in non-elective admissions
- Rates of permanent admissions to residential care per 100,000 population (65+)
- Proportion of older (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services
- Delayed Transfers of Care (delayed days)

To ensure that the BCF Delivery Group maintains sufficient oversight of the metric performance, relevant BCF representatives will attend the following meetings to gain insight of performance updates, progress on implementation/transformation and identified risks and issues. The BCF representatives will feed this back to the BCF Delivery Group, ensuring sufficient and robust reporting.

Group	Responsibilities of the Group	Frequency	BCF Representative	Alignment to BCF Metrics
System Flow Programme Board	<p>The Board is responsible for the oversight of the programme of work that will support delivery of the national 4 hour emergency access target. This will focus on 3 service development themes and 4 enabling in support of the programme, managing delivery and interdependencies.</p> <p>Service Development Themes</p> <ol style="list-style-type: none"> 1. Avoiding Unnecessary Attendance and Admission 2. Flow Through NUH 3. Discharge – Home First <p>Enabling Themes:</p> <ol style="list-style-type: none"> 1. Mapping Demand and Capacity 2. Urgent Care Workforce 3. Communication 4. Surge plan and escalation response 	Monthly	Head of Service Improvement and BCF	<p>Reduction in non-elective admissions</p> <p>Proportion of older (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services</p> <p>Delayed transfers of care</p> <p>Rates of permanent admissions to residential care per 100,000 population (65+)</p>
Big Ticket Board	The Board is responsible for the oversight of the Big Ticket programme, including Adult Social Care.	Monthly	Commissioning Lead – Adults	Rates of permanent admissions to residential care per 100,000 population (65+)

1.6 Reporting Requirements

Report	Frequency	Months	Lead	Signed Off by	Details
Finance, Performance and Risk Dashboards	Monthly	Every month	BCF Delivery Group	Via National Plan and Quarterly Returns	This will be sent virtually to BCF Delivery Group members on a monthly basis, and will include: <ul style="list-style-type: none"> • Performance on metrics • Performance on finance • Risk log
GNCCP Performance Report	Monthly	Every month	BCF Delivery Group	GNCCP Quality and Performance Committee	Includes Greater Nottingham performance on metrics, finance, risks etc.
Quarterly national return	Quarterly	January, April, July, October	BCF Delivery Group	Health and Wellbeing Board Sub Committee	Submission of NHS England Better Care Fund excel template
Yearly national plan submissions	Yearly	March – April	BCF Delivery Group	Health and Wellbeing Board Sub Committee	Submission of plan detail as outlined by NHS England
Yearly Assurance Report	Yearly	March	BCF Delivery Group	GNCCP Joint Commissioning Committee	In line with GNCCP governance procedures

1.7 Managing Risk

Ensuring risks are managed effectively, consistently and systematically including identification, evaluation and documentation is integral to the effective and timely delivery of the Better Care Fund.

The BCF Delivery Group is committed to a risk management approach which minimises risks wherever possible, providing a robust framework that is underpinned by the concepts of effective governance and other systems of internal control that enables the identification and management of both acceptable and unacceptable risks. All members of the BCF Delivery Group are required to identify, document, evaluate and manage any risks on a monthly basis, in line with the risk management framework below:

1. Risk identification – initial listings of risks applicable to the BCF and the schemes within this programme
2. Risk Evaluation – allocation of cost and/or time estimates to identified risks
3. Risk Analysis – analysis of the cumulative effect of the cost and/or time consequences of the evaluated risks
4. Risk Mitigation – provision within programme management procedures for methods of responding to or accommodating cumulative risks
5. Risk Management – management of individual risks as they occur through established risk management procedures.
6. Risk Reporting – regular review and updating of the BCF Risk Register and incorporation of adjustments to risk mitigation procedures and risk management activities.

All identified risks will be added to the BCF Risk Register, which will be reviewed virtually on a monthly basis, and quarterly at each BCF Delivery Group meeting.

Risks are assessed according to the matrix below. The overall risk score is calculated by multiplying consequences and likelihood, with '1' being the lowest possible risk score, and '25' being the highest. An initial risk score is determined, mitigations identified, and a residual risk score is applied.

Consequence	5 - Very High	5	10	15	20	25
	4 - High	4	8	12	16	20
	3 - Medium	3	6	9	12	15
	2 - Low	2	4	6	8	10
	1 - Very low	1	2	3	4	5
		1 - Rare	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain
		Likelihood				

Based on the residual risk score, the BCF Delivery Group will apply the following process to manage risk:

The following categories of risk will be escalated up to the Health and Wellbeing Board Commissioning Sub Committee:

- Any newly identified risk
- Any significant change to an existing risk
- Any risk that the BCF Delivery Groups deems significant

Any significant risk that relates to the performance of the BCF metrics will be escalated by the relevant BCF Delivery Group member to the appropriate forum e.g. System Flow Programme Board or Big Ticket Board.

Any risk that the BCF Delivery Group believes has the potential to impact at organisational level for either NCC or NC CCG will be escalated by the relevant BCF Delivery Group member via their own organisational governance route.

Clare Rourke
Service Improvement Officer
12.03.2019

Appendix 1: Section 75 Agreement – Section 19: Governance

- 19.1 Overall strategic oversight of partnership working between the partners is vested in the Health and Well Being Board, which for these purposes shall make recommendations to the Partners as to any action it considers necessary.
- 19.2 Subject to the coming into force of the 2015 Regulations, the CCG shall delegate to the Council such functions that relate to the roles and responsibilities of the Programme Board that are set out in this Agreement and Council shall establish the Programme Board as sub committee of the Health & Being Board, which shall:
- 19.2.1 include membership from each Partner in accordance with the terms of reference set out in Schedule 2;
- 19.2.2 be responsible for, subject to the level of delegated responsibility from each Partner:
- (a) for the overall approval of the Individual Services, ensuring compliance with the Better Care Fund Plan and the strategic direction of the Better Care Fund;
 - (b) monitoring each Individual Scheme pursuant to this Agreement and the Scheme Specifications;
 - (c) agreeing actions relating to Overspends, Underspends, changes to level of Financial Contributions, agreeing Financial Contributions for each Partner and viring between Pooled Funds;
 - (d) agreeing any variations to Individual Schemes and to this Agreement pursuant to Clause 30;
 - (e) any other matters set out in this Agreement, the Schemes Specifications and Schedule 2.
 - (f) The programme board shall co-operate with the Pooled Fund Manager in relation to reporting requirements set out in National Guidance.
- 19.3 The terms of reference of Programme Board shall be as set out in Schedule 2 and may be varied subject to the Agreement by both Partners in accordance with Clause 30.
- 19.4 Each Partner has secured internal reporting arrangements to ensure the standards of accountability and probity required by each Partner's own statutory duties and organisation are complied with.
- 19.5 Each Services Schedule shall confirm the governance arrangements in respect of the Individual Service and how that Individual Services is reported to Programme Board and Health and Wellbeing Board.
- 19.6 In the event that either:
- 19.6.1 the 2015 Regulations are not in force at the Commencement Date; or
- 19.6.2 the Health & Wellbeing Board revokes the delegated authority that it has granted to the Programme Board or makes any changes to the Programme Board without the CCG's consent,

the Partners shall establish the Programme Board as a joint working group that comprises of officers of each Partner with any decisions being referred to their respective decision making bodies in accordance with any scheme of delegation in place from time to time.