

SURREY COUNTY COUNCIL**CABINET****DATE: 25 MARCH 2014****REPORT OF: MR MICHAEL GOSLING, CABINET MEMBER FOR PUBLIC HEALTH AND HEALTH & WELLBEING BOARD****LEAD OFFICER: DAVE SARGEANT, INTERIM STRATEGIC DIRECTOR ADULT SOCIAL CARE****SUSIE KEMP, ASSISTANT CHIEF EXECUTIVE****SUBJECT: SURREY BETTER CARE FUND****SUMMARY OF ISSUE:**

1. The Better Care Fund is designed to improve outcomes for people through better integrated care and support, and a significant expansion of care in community settings. It will achieve this by shifting resources from acute services into preventative services in primary care, community health and social care.
2. The Surrey Better Care Fund return outlines how Adult Social Care and the six Clinical Commissioning Groups will work together to transform local health and social care services during 2015/16, with 2014/15 designed as a transitional year. The Surrey Better Care Fund return has to be agreed between the County Council and Surrey's six Clinical Commissioning Groups, signed-off by the Surrey Health & Wellbeing Board and submitted to NHS England by 4 April 2014.

[Please note that the 'draft' Surrey Better Care Fund return is attached. Challenging timescales and the complexities of partnership working across the County Council and the six Clinical Commissioning Groups means that work is still underway on the 'final' return – this will be available for the Cabinet meeting on 25 March 2014.]

RECOMMENDATIONS:

3. It is recommended that:
 - Cabinet notes the Surrey Better Care Fund return on behalf of the County Council. The return will proceed to the Surrey Health & Wellbeing Board for sign off and submission to NHS England by 4 April 2014 deadline.
 - Cabinet agrees to delegate to the Assistant Chief Executive and Interim Strategic Director Adult Social Care, in consultation with the Leader of the Council and the Cabinet Member for Public Health and Health & Wellbeing Board, to make any final amendments to the Surrey Better Care Fund return prior to final submission.

REASON FOR RECOMMENDATIONS:

4. The Local Government Association (LGA) and NHS England guidance on the Better Care Fund states that the return should be agreed between the County Council and Clinical Commissioning Groups and that it has to be signed off by the Health and Wellbeing Board for final submission by 4 April 2014.

DETAILS:

Background

5. The Better Care Fund (formerly known as the Integration Transformation Fund) is a national fund which was announced in the June 2013 Spending Round. The fund is designed to:
 - Improve outcomes for people.
 - Drive closer integration between health and social care.
 - Increase investment in preventative services in primary care, community health and social care.
 - Support the strategic shift from acute to community and to protect social care services.
6. The Better Care Fund is part of Surrey County Council's Public Service Transformation Programme. It is also aligned with the strategic intent set out in the Adult Social Care Directorate Strategy around collaborative working with health and other partners, and the provision of leadership in the joint commissioning of health and social care services.

Prevention

7. Key themes in the Surrey Better Care Fund return are:
 - **Enabling people to stay well:** Maximising independence and wellbeing through prevention and early intervention for people at risk of being unable to manage their physical health, mental health and social care needs.
 - **Enabling people to stay at home:** Integrated care delivered seven days a week through enhanced primary and community services which are safe and effective and increase public confidence to remain out of hospital or residential/nursing care.
 - **Enabling people to return home sooner from hospital:** Excellent hospital care and post-hospital support for people with acute, specialist or complex needs supported by a proactive discharge system which enables a prompt return home.
8. Prevention is identified as a priority theme in Surrey's Joint Health and Wellbeing Strategy which was approved in April 2013 and is at the heart of the Better Care Fund agenda. The Better Care Fund will build on the work already underway in Surrey through the Whole Systems Partnership, the Personalisation and Prevention Partnership Fund etc. Examples of the

prevention schemes in which health and social care will invest in during 2015/16 as part of the Better Care Fund will include:

- Recognising the connections individuals have with their family, friends and local community networks, to support them to stay healthy, independent and to manage their own care.
- Improving the networks of provision and coordination of practical preventative support services with district and borough councils, the voluntary sector and carers organisations.
- Offering universal advice and information services to all local people to promote their independence and wellbeing.
- Increasing support for health and social care self management and self care supported by the community delivery of specialist health services
- Creating dementia friendly communities

Funding

9. The Better Care Fund is made up of a number of existing elements of funding, most of which will come from health budgets (ref Annex 1). It is important to emphasise that this is a confirmation of existing funding continuing and being rebadged, not new funding streams. The announcement covered two financial years:

- For 2014/15, the expected Whole Systems Funding for Surrey = £18.3m. This will be transferred to Surrey County Council with joint investment decisions being made.
- For 2015/16, the Better Care Funding total position for Surrey is expected to be a revenue allocation of £65.5m + capital of £6.0m = £71.5m in total. This will be put into a pooled budget under Section 75¹ joint governance arrangements between Clinical Commissioning Groups and the County Council.

Protection

10. One of the main conditions of the Better Care Fund is to 'protect' social care services. In Surrey it has been agreed that plans will be drawn up on the basis that "the system across Surrey has committed to jointly investing the Better Care Fund to improve services and outcomes for patients and to creating financial benefit as a result. We have agreed to share this benefit for further investment in services and to ensure the sustainable delivery of better care for the future. In 2015/16 we expect the benefit to social care to be £25m".

11. We will ensure the £25m benefit to social care in 2015/16 is realised by:

- Ensuring the six local joint work programmes include sufficient investment in both 2014/15 and 2015/16 in local social care provision.

¹ Section 75 of the NHS Act, provides for Clinical Commissioning Groups and local authorities to pool budgets

- Adopting a peer review process to support and challenge where a particular Clinical Commissioning Group locality may not be performing against their targets.
- Setting up robust governance arrangements with the Surrey Better Care Board overseeing investment decisions and monitoring performance (any decisions that require a change in agreed policy will be referred back to the County Council's Cabinet and the Governing Boards of the six Clinical Commissioning Groups).

Governance

12. The following arrangements are being put in place for oversight and governance of progress and outcomes and are illustrated in Annex 2:
- There will be six Local Joint Commissioning Groups in Surrey – one for each of the six local Clinical Commissioning Group areas - with membership drawn from Adult Social Care, the Clinical Commissioning Group and other local stakeholders.
 - The Local Joint Commissioning Groups will be responsible for all Better Care Fund investment decisions and for overseeing the operational delivery of the schemes set out in their local joint work programme. These investment decisions will be made jointly by health and social care partners at a local level.
 - The Surrey Better Care Board will provide strategic leadership across the Surrey health and social care system. The Board will challenge and support the Local Joint Commissioning Groups to deliver improved outcomes for local people. Membership will be drawn from Adult Social Care and the Clinical Commissioning Groups.
 - Surrey's Health and Wellbeing Board will continue to set and monitor the overarching strategy across the Surrey health and social care system.

<u>CONSULTATION:</u>

13. Throughout 2013/14, health and social care providers have been engaged in developing an integrated vision for out of hospital care in each local area through the five Local Transformation Boards. Patients, people who use services and the public have been involved through a number of partnership boards and via local engagement events held during 2013.
14. Work on the Surrey Better Care Fund return began in Autumn 2013. Joint workshops, with Adult Social Care and Clinical Commissioning Group representatives, were held in November, January and February. The timescales and complexity of partnership working have consequently been very challenging.
15. Each of the Local Joint Commissioning Groups has developed a local joint health and social care work programme. The decision to develop local joint work programmes is designed to enable each area to address the range of different communities in Surrey, as well as the need for local ownership and leadership.

- 16. Adult Select Committee considered a briefing on the Better Care Fund on 13 February 2014 and the Health Scrutiny Select Committee are due to receive a briefing at their meeting on 19 March 2014. The Surrey Health & Wellbeing Board signed-off the 'draft' Surrey Better Care Fund return on 6 February 2014 (as authorised by the Cabinet on 4 February 2014) which was submitted to NHS England on 14 February.

RISK MANAGEMENT AND IMPLICATIONS:

- 17. Key risks for Surrey associated with the Better Care Fund and mitigating actions are summarised in the section 4 of the Better Care Fund return (Annex 3).

Financial and Value for Money Implications

- 18. Submission of this return is necessary to obtain full access to the Better Care Fund. As such, it supports the future financial viability of both the County Council and the whole health and social care system. The return is structured to demonstrate the value for money obtained.
- 19. The Better Care Fund and the associated partnership agenda is welcome, but it must be emphasised that across the whole health and social care system, it represents a confirmation of funding continuing and rebadged, not new funding streams. Moreover, central Government has unhelpfully double counted most of the £65.5m revenue by including it in both the County Council's 'spending power' and Clinical Commissioning Groups funding allocations, so setting up potentially incompatible expectations in both.
- 20. That, together with the constrained timescales and complexity of working across seven organisations and their partners, makes for a challenging process for all parties. Nonetheless, work is well advanced jointly with the Clinical Commissioning Groups to submit the return as required by the Department of Health, whilst accepting that this will need further development during 2014/15 in order to optimise value for money and establish the financial benefits flowing to all partners.

Section 151 Officer Commentary

- 21. This is an important element in the Council's forward financial planning. In particular, the agreement reached with Clinical Commissioning Groups that £25m of additional benefit flows to Adult Social Care in 2015/16 compared with 2014/15 is a key factor in the Council's forward MTFP projections.

Legal Implications – Monitoring Officer

- 22. The Better Care Fund return sets out how the Council will commission services to meet its duties towards vulnerable adults, in partnership with the local Clinical Commissioning Groups. The proposals are aligned to existing Surrey County Council policy and the strategic intent set out in the Adult

Social Care Directorate Strategy around collaborative working. The proposals are in accordance with priorities set by the Health & Wellbeing Board and are focussed on delivering improved outcomes.

23. The commissioning will be governed by formal agreements with the Clinical Commissioning Groups under Section 75 of the National Health Service Act 2006, which will set out the framework for investing in services and managing the pooled budgets. Further legal advice, and any necessary Equality Impact Assessments, will be required as these agreements are put in place.

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Equalities and Diversity

24. This is a high level return and the detailed local schemes will be planned during the course of 2014/15, for implementation in 2015/16. An Equality Impact Assessment (EIA) will be completed as part of this process to assess the impact upon residents, people who use services, carers and staff with protected characteristics.
25. Equality Impact Assessments have already been undertaken for a number of existing joint schemes which are likely to be rolled forward in 2015/16. These include for example, telecare, reablement, extended hours in the hospitals.

Safeguarding responsibilities for vulnerable children and adults implications

26. The Better Care Fund is designed to improve outcomes for vulnerable people through better integrated care and support, and a significant expansion of care in community settings. It will achieve this by shifting resources from acute services into preventative services in primary care, community health and social care.

Public Health implications

27. The Better Care Fund Programme will have a positive impact on the health outcomes of our elderly frail population in Surrey by keeping them independent, healthier and preventing emergency admissions to hospitals. This will support the public health priority to improve healthy life expectancy and reduce health inequalities.

WHAT HAPPENS NEXT:

28. The 'final' Surrey-wide Better Care Fund return is due to be signed-off by the Surrey Health and Wellbeing Board and submitted as part of the overall NHS planning round by 4 April 2014.
29. During 2014/15, the Local Joint Commissioning Groups will undertake detailed planning of their schemes for 2015/16 and will manage the transition towards this.

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Consulted:

The key people consulted include:

- Julia Ross, Chief Officer, North West Surrey CCG
- Mark Bounds, Chief Officer, East Surrey CCG
- Dominic Wright, Chief Officer, Guildford & Waverley CCG
- Maggie MacIsaac, Chief Officer, North East Hampshire & Farnham CCG
- Miles Freeman, Chief Officer, Surrey Downs CCG
- Andy Brooks, Clinical Chief Officer, Surrey Heath CCG
- Cabinet Member for Public Health and Health & Wellbeing Board
- Members of the Surrey Health & Wellbeing Board
- David McNulty, Chief Executive, SCC
- Sheila Little, Chief Finance Officer, SCC
- Health and social care providers through Local Transformation Boards
- Patients, people who use services and the public through partnership boards and local engagement events

Annexes:

- Annex 1 Surrey Better Care Fund – Funding Arrangements
Annex 2 Surrey Better Care Fund – Governance Arrangements
Annex 3 Surrey Better Care Fund Return (Part 1)

Sources/background papers:

- Better Care Fund Guidance - December 2013
 - Better Care Fund Technical Guidance - December 2013
 - Cabinet Report 'Public Service Transformation' – 4 February 2014
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Better Care Fund – Funding Arrangements

The Better Care Fund is made up of a number of existing elements of funding, most of which will come from health budgets, as illustrated in figure 1. For 2015/16, the Better Care Funding total position for Surrey is expected to be a revenue allocation of £65.5m + capital of £6.0m = £71.5m in total.

Figure 1 – Existing elements of funding making up the 2015/16 Better Care Fund

	Nationally £m	Surrey £m
New Care Bill duties	135	2.56
Carers breaks	130	2.46
Reablement	300	5.68
Whole systems	1,100	18.30
Balance for allocation	1,795	36.50
	3,460	65.50
Capital general	134	2.30
Disabled Facilities Grant	220	3.70
	354	6.00

Working together, and taking on board the condition to 'protect' social care services, Adult Social Care and the six Clinical Commissioning Groups have agreed the following broad uses of the £65.5m revenue allocation in the Better Care Fund in 2015/16:

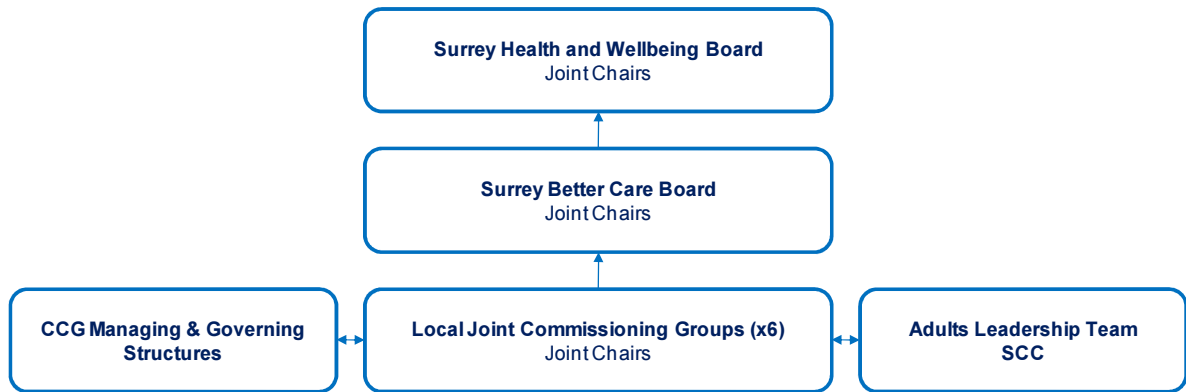
Figure 2 - Possible uses of Better Care Fund in 2015/16

	£m	Notes
Care Bill costs	2.5	Government direction
Carers support	2.2	Agreed priority, existing stream
Health reablement/intermediate care	5.0	Existing stream
Ongoing partnership funding eg virtual wards, risk stratification tool, telecare, telehealth, dementia support, reablement etc	14.3	Assumes 2013/14 level of investment carries on
Joint posts to support integration and transformation	0.5	To improve project management capacity
As per local plans and 'protecting' social care services*	41.0	*We expect the benefit to social care in 2015/16 to be £25m
	65.5	

Better Care Fund – Governance Arrangements

The following governance arrangements are being put in place for oversight and governance of progress and outcomes of the Better Care Fund in Surrey.

Figure 3 – Governance arrangements for the Better Care Fund



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