# Better Care Fund Update

**Report to:** Health and Wellbeing Board  
**Date:** 12 October 2015

**Report from:** Tolis Vouyioukas, Strategic Director, People Directorate  
**Ward/ Areas affected:** Borough Wide

**Chair of Committee/Lead Member:** Councillor Ruth Dombey  
**Author(s)/Contact Number(s):** Megan Milmine, Director – System Resilience and Integration, Sutton Clinical Commissioning Group (020 8251 0145)

**Corporate Plan Priorities:**  
- A Smart Council

**Open/Exempt:** Open

**Signed:**  
Tolis Vouyioukas  
**Date:** 1 October 2015

**Strategic Director - People**  
**Chief Operating Officer, Sutton Clinical Commissioning Group**  
**Date:** 1 October 2015

## 1. Summary

1.1 Following receipt of full approval for the Sutton Better Care Fund plan by NHS England in January 2015, as reported to the Health and Wellbeing Board in March, a Section 75 Agreement has been put in place between the London Borough of Sutton and Sutton Clinical Commissioning Group and the focus has been on the implementation plan for 2015/16.

1.2 This paper provides an update on progress with implementation.

## 2. Recommendations

The Health and Wellbeing Board is recommended to:

2.1 Note the transfer of Programme Management responsibility for the Better Care Fund Programme to the Director of System Resilience and Integration, Sutton CCG from August 2015;

2.2 Note the continuation of the implementation work to deliver the Better Care Fund Plan; and

2.3 Note the quarterly performance reporting requirements from NHS England against progress in delivering the plan.
3. Background

3.1 In order to meet the government requirement for all localities to put a pooled budget in place as of 1 April 2015, called the Better Care Fund, the Health and Wellbeing Board previously approved the work that delivered Better Care Fund submissions to NHS England on 4 April 2014 and 19 September 2014, and noted progress at the Board meetings of 8 December 2014, 9 March and 8 June 2015.

3.2 Following the agreement of the revised Better Care Fund plan by the Health and Wellbeing Board on 15 September 2014, the Transformation Programme Board and associated work streams have been working with the Programme Manager, and more recently, the Director of System Resilience and Integration, to develop and deliver the implementation plans for 2015/16, including the work to deliver the 3.5% reduction required in emergency hospital admissions.

4. Issues

4.1 Implementation Progress

Work is progressing on the five design team priority areas reported to the Health and Wellbeing Board in June 2015. The headlines are as follows:

- **Integrated Localities** – This work is still at the planning stage in considering the requirements and options for bringing together three integrated locality teams. Sutton Clinical Commissioning Group has agreed additional funding to support work at a GP practice level to take forward multi-disciplinary team working and decision making, which is a core component of effective integrated working. A Project Manager has been appointed to implement this work stream, which will provide resource in the form of Locality Facilitators to support General Practices to establish their multi-disciplinary teams and develop robust case management plans for those patients who require them.

- **Integrated Intermediate Care** – Following the stakeholder workshop held in March, the Integrated Intermediate Care Design Group has met to consider the report from the workshop and continues to design the interface between the hospital and community based provision of care, along with development of a single point of access for all community based intermediate care services.

- **Integrated Equipment** – The work to understand current trends in service usage has been completed. The next phase of work for the Equipment design team will focus on understanding the training needs analysis between community and acute care staff in order to minimise unnecessary spending and maximise the potential of this budget stream in supporting independence at home.

- **Seven Day Services** – A weekend discharge initiative was held in late July with a senior team from Community and Social Services as well as the Acute Trust on site at St Helier hospital on a weekend day to facilitate discharge where possible, and identify issues affecting discharge. This initiative took place in response to directives from NHS England that weekend discharge rates should be at least 80% of those achieved during the week. The issues identified as a result of the initiative have been developed into an action plan which is being actively monitored by both the System Resilience Group and the One
Sutton Commissioning Collaborative with a repeat of the initiative occurring in early October.

- Mental Health Low Symptom Pathway – The core group of this design team have agreed the priority areas for taking this work forward. A mapping event was held in June to understand how current service configurations operate as a basis for focusing improvements.

4.2 National condition – integrated data sharing

The Sutton IDCR (Integrated Digital Care Record) project, previously known as the Sutton Care passport, a joint initiative between NHS Sutton Clinical Commissioning Group and LB Sutton is progressing on time and on budget. During September the final data sharing contracts for Sutton Practices will be signed, allowing for data to be uploaded from the HSCIC (Health and Social Care Information Centre). A communications consultation for patients has already begun with the plan to communicate directly with social care service users, health and social care staff during September/October. Testing of the system with Sutton Practices and Health providers is ongoing and staff training is expected during November.

4.3 Quarterly Reporting to NHS England

From May 2015, each Health & Wellbeing Board area is required to make a quarterly report to NHS England on progress in implementing the plan. The report covering Quarter 1 2015/16 was submitted to NHS England in August.

4.4 Governance

Governance arrangements will remain the same as those agreed by the Health and Wellbeing Board on 15 September 2014. The changes to the Better Care Fund programme management arrangements, referred to in 2.1 to ensure that implementation work is delivering the requirements of the Better Care Fund in 2015/16, began in August 2015.

5. Options Considered

5.1 This report provides an update on the programme of work that has already been agreed by the Health and Wellbeing Board, therefore there are no options to be considered at this time.

6. Impacts and Implications

Financial

6.1 The initial total BCF investment proposed for 2015/16 was £14.7m. However this has been revised to £15.7m. The additional £1m results from the carry forward of a 2014/15 underspend into 2015/16. Such carry forward is permitted under the S75 agreement between the Local Authority and Clinical Commissioning Group. The 14/15 underspend was largely the result of funds reserved in anticipation of forecast significant overspends in the Short Term Assessment and Reablement Team (START) and Integrated Community Equipment Store (ICES) services. The significant overspends did not materialise. Minor variances were accommodated within budget and therefore the reserve is carried forward. The underspend was not a result of under-delivery of services.
The 2015/16 BCF budget of £15.7 m has been agreed by the One Sutton Commissioning Collaborative (OSCC).

The enhanced budget gives more flexibility for BCF investment which is managed through the One Sutton Commissioning Collaborative albeit much of the underspend is non recurrent which will be taken into account in setting the 2016/17 BCF budget.

6.2 As previously reported The Sutton Clinical Commissioning Group will work with the Health and Wellbeing Board through the One Sutton Commissioning Collaborative to agree how any recurrent savings will be invested in existing and new Better Care Fund schemes and developments in future years.

Legal

6.3 The Better Care Fund work remains compliant with the legal requirements to allow for the transfer of NHS funds from the Clinical Commissioning Group to the Council, on the basis that those funds will be invested in social care services that also have a positive impact on the health of local people.

6.4 The London Borough of Sutton and the Sutton Clinical Commissioning Group have put in place a Section 75 Agreement, as agreed by the Health and Wellbeing Board, as part of the governance arrangements for the Better Care Fund.

Other impacts and implications

Community Engagement and Consultation

6.5 Extensive consultation has taken place in order to put together both the original Better Care Fund submission and the final September 2014 submission.

6.6 Good communication and engagement is critical to success and communications leads from both partner organisations are developing a Better Care Fund Communications and Engagement Plan. Early outputs include:

- The development of a stakeholder newsletter; and
- The development of an on-line community or forum that will enable stakeholders to comment and discuss issues on line. This is still in the process of being launched.

Equalities

6.7 The Better Care Fund will help to achieve a greater level of integration across health, social care and wellbeing services for all parts of the community. The plans being developed locally make specific reference to people with learning disabilities and mental health problems who often experience greater difficulty in accessing services and can experience poorer health outcomes than the wider population. Our plans, approved by the Health and Wellbeing board and by NHS England, will support the achievement of this ambition.

6.8 The Integrated Impact Assessment and Equalities Impact Assessment document has been considered by the Transformation Programme Board and One Sutton Commissioning Collaborative. This is a live document and will be reviewed by the Transformation Programme Board twice yearly to ensure that all parts of the community are given due consideration within this process.
### Appendix Letter

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### Background Documents

| Better Care Fund report to the Health and Wellbeing Board 27 January 2014 |
| Better Care Fund report to the Health and Wellbeing Board 10 March 2014 |
| Sutton Better Care Fund Final Submission 4 April 2014 |
| Better Care Fund report to the Health and Wellbeing Board 30 June 2014 |
| Better Care Fund report to the Health and Wellbeing Board 15 September 2014 |
| Sutton Better Care Fund Second Submission 19 September 2014 |
| Better Care Fund report to the Health and Wellbeing Board 8 December 2014 |
| Better Care Fund report to the Health and Wellbeing Board 9 March 2015 |
| Better Care Fund report to the Health and Wellbeing Board 8 June 2015 |

### Audit Trail

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### Consultation with other officers

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<tr>
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<td>Yes</td>
<td>Akin Akintola, Business Advice &amp; Support Manager – Resources Geoff Price, Chief Financial Officer, Sutton CCG</td>
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<tr>
<td>Legal</td>
<td>Yes</td>
<td>Meera Leavey, SLLP</td>
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<td>Other Officers:</td>
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<td>Jan Underhill, Executive Head of Wellbeing</td>
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