




<b>Report to:</b>	Health and Wellbeing Board	<b>Date:</b>	5 December 2016
<b>Report title:</b>	Better Care Fund Update		
<b>Report from:</b>	Tolis Vouyioukas, Strategic Director, People Directorate		
<b>Ward/Areas affected:</b>	Borough Wide		
<b>Chair of Committee/Lead Member:</b>	Councillor Ruth Dombey		
<b>Author(s)/Contact Number(s):</b>	Carol Lambe, Director – System Resilience and Integration, Sutton Clinical Commissioning Group, 020 8407 3602		
<b>Corporate Plan Priorities:</b>	<ul style="list-style-type: none"> <li>• A Smart Council</li> </ul>		
<b>Open/Exempt:</b>	Open		
<b>Signed:</b>		<b>Date:</b>	23 November 2016

## 1. Summary

- 1.1. The 2016/17 Sutton Better Care Fund plan received full assurance by NHS England on 21 July 2016. The Section 75 Agreement between the London Borough of Sutton and Sutton Clinical Commissioning Group for 2016/17 has therefore been agreed. The budget remains as agreed at the March 2016 meeting.
- 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 continuation and progress of the implementation work to deliver the 2016/17 Better Care Fund.

## 3. Background

- 3.1. All Clinical Commissioning Groups and local authorities are required to pool budgets and to agree an integrated spending plan for how they will use their Better Care Fund allocation. The Health and Wellbeing Board has previously approved the 2016/17 Sutton Better Care Fund plan submitted to NHS England in March 2016.

- 3.2. Following receipt of national guidance in January and February 2016, the 2016/17 BCF budget was developed and agreed at the 21 March 2016 Health and Wellbeing Board.
- 3.3. The Director of System Resilience and Integration has coordinated work streams to develop and deliver the implementation plans for 2016/17, including the work to deliver a further 3.5% reduction required in emergency hospital admissions, redesign the Intermediate Care pathway and ensure coordination with the South West London Sustainability and Transformation Plan (STP).
- 3.4. Monthly progress against the 2016/17 Better Care Fund Plan is monitored via the Sutton Integration and Transformation Board (SITB).

#### **4. Issues: Implementation Areas for 2016/17**

- 4.1. 2016/17 priority work areas which support Sutton to meet the BCF national conditions are outlined below:
  - i. Aligning BCF with our 'Sutton Homes of Care' Vanguard to focus on:
    - weekend discharges to care homes
    - smoother assessment processes and discharge to residential homes
    - support to patients and their families in choosing long term residential care
  - ii. Aligning to the CCG's Long Term Conditions work streams for Respiratory and Diabetes.
  - iii. Working closely with extended partners in the Borough to tackle complex discharge, frequent attenders and maintaining independence at home including the London Ambulance Service, Sutton Housing Partnership, Age UK, Sutton Fire Brigade and providers of telecare.
  - iv. Working with General Practice colleagues to support further implementation of the 'Primary Care Support Model' for high risk patients. In 2016/17 the local community services provider, Sutton Community Health Services, has been commissioned to provide two full-time nurses to work in general practices to ensure that care plans for the vulnerable 2% of patients are kept up-to-date, developed with input from patients and carers in partnership with the wider MDT, and that they are fully actioned. Focus in the first year is housebound patients whose health and social situation would be responsive to a more proactive care planning process.
  - v. Personal health budgets – extending the CCG offering for personal health budgets in line with national guidance.

#### Integrated Localities

- 4.2. The September Sutton Integration and Transformation Board (SITB) agreed to progress co-location and integration of planned care services across health and social care in Sutton through the development of space available at Wallington Library. Co-location provides the



opportunity for teams which deliver services across a collective caseload to work together to provide efficiencies through enhanced, joined-up working practices. Further work is underway to scope the additional services/team members who could add value to the integrated locality model beyond the community health integrated locality teams and social services; assessment officers, social workers and occupational therapists. This will include brokerage and care coordinators from locality care providers. The integrated locality hubs will be staffed so that they enable integrated working for all Sutton residents.

- 4.3. Project management and project support resource has been allocated to deliver the co-location move requirements by June 2017 including refurbishment; networking /IT etc.
- 4.4. Organisational development work is planned to take place in parallel to the building works to ensure all opportunities for integration through co-location are realised and provide efficiencies through enhanced, joined-up working practices. This work with front-line staff will be supported by the Institute of Public Care (IPC) through the BCF support package already commissioned to support integration in Sutton.
- 4.5. In addition, work has progressed around options for integration for unplanned care services. Detailed analysis of all patients entering unplanned care services, both health CRISIS and social care START services, in the first two weeks of April 2016 has suggested that a single point of access could facilitate more efficient integrated working. The analysis indicated that although patients received good care they may not always access the most appropriate care service to meet their needs in the first instance. A single point of access has the potential to reduce duplication; improve efficiency ensuring the patient/clients access the right service at the right time, so improving patient experience and outcome. Project support is in place to scope possible models of service delivery with stakeholders and undertake an options appraisal which will inform future opportunities for integration. This will be progressed in the coming months for implementation in 2017

#### Integrated Intermediate Care

- 4.6. The focus of this work stream is to enable delivery of a reduction in length of stay to support the recommendations of South West London (SWL) bed audit. The audit was conducted by the Oak Group across all SWL Trusts as part of the SWL Sustainability and Transformation Planning (STP) and proposed two requirements by 2020: a reduction in non-elective admissions of 1:8 and a reduction in length of stay of 2.5 days per patient spell. High level modelling on staffing resource and costs to achieve the reductions is being developed for inclusion in the sub-regional STP.
- 4.7. In addition work is underway to further develop a discharge to assess model as per the recommendation within the NHSE/NHSI (NHS Improvement) rapid implementation guidance to deliver A&E improvement. This work is being progressed via the A&E Delivery Board as part of the five mandated initiatives including improving discharge processes.

National condition – integrated data sharing

- 4.8. The Sutton Integrated Digital Care Record (IDCR) project; a joint initiative between Sutton CCG and LB Sutton continue to progress. Data from 24 out of the 27 GP practices has now been successfully loaded. 91 social care records were uploaded to the Sutton IDCR and the deletion script for social care records has been successfully tested. However, upload is dependent on the current system upgrade planned to start November 2016. Until the upgrade solution for social care is in place (April 2017) social care records will be presented in PDF format. Currently consent has been obtained for over 600 clients.
- 4.9. Access to the system has been provided to all clinicians at St Helier Hospital using single sign on from their clinical manager system. Feedback from clinicians, particularly in A&E and the Acute Medical Unit, has been very positive with growing recognition of the positive impact of the new access to clinical records.
- 4.10. Work to provide SELDOC out of hours GP service with access to the system using single sign on from their patient record system (Adastra) has now been successfully tested and is awaiting roll out by Adastra.
- 4.11. It is anticipated that Sutton Community Health Services staff will have access to the system using single sign on from their patient record system by December 2016 (some staff already have direct access to Sutton IDCR).
- 4.12. Work has started on the technical requirements for data feeds from Community Services and Epsom and St Helier Hospital. IG sign off from Epsom and St Helier is expected within the next month which will allow development and testing to begin.
- 4.13. Work continues to collect case studies, benchmark surveys and record the benefits realised through the introduction of the Sutton IDCR.
- 4.14. Sutton CCG has recently received approval to proceed to the next stage in the Estates and Technology Transformation Fund (ETTF) process. Sutton CCG and Sutton Council bid to further develop the IDCR already in place in Sutton and Kingston boroughs, to incorporate mental health information in addition to acute, primary care, community health and social services information and roll out to Richmond. Further to the opportunity to share additional information, this bid includes work to improve operational efficiency through mobile working, integrated care planning and a patient portal. This will promote better sharing of information between health and care organisations to provide safer, more-timely care to the residents across these 3 south west London boroughs.

Quarterly Reporting to NHS England

- 4.15. Each Health & Wellbeing Board area is required to submit a quarterly report to NHS England on progress with implementing the plan. The Q2 2016/17 report was submitted to NHS England at the end of November reporting all national conditions are being met and progress towards



targets in all six nationally and locally defined metrics. The reduction in non-elective admissions is slightly below plan; but the proportion of permanent admissions to residential homes and older people still at home 91 days after discharge into reablement is well above target. Delayed transfer of care is improving in Q2 moving towards plan (222.5 days of delay per 100,000 population compared to a plan of 198.9). The dementia diagnosis rate compared to estimated prevalence is now 66.5% against the target of 66.7%. This improvement has been achieved through a continued focus on good coding management in GP practices, data harmonisation across providers and improving diagnosis rates in our care homes.

## 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 for the year 2016/17.

## 6. Impacts and Implications

### Financial

- 6.1 The provisional Better Care Fund pooled budget for 2016/17 of £15.619m was agreed at the Health and Wellbeing Board in March 2016. The final 2016/17 Better Care Fund pooled budget is £16.388m, various adjustments were made to the provisional budget during the completion of the budget setting process. The growth in the budget of £769k is due to an additional budget allocation for inflation and national insurance (£258k), carried forward Capital Budget from 15/16 (£449k) and carried forward revenue budget from 15/16 (£62k).
- 6.2 The final Better Care Fund pooled budget is split £14,706m revenue funding and £1.682m capital funding. To balance the budget in 2016/17, £200k of capital funding is being used to support the Community Equipment Service.
- 6.3 When the 16/17 BCF budget was formulated, a funding gap was recognised. Part of the gap was met by LBS and the balance was met by setting a savings target of £253k. Meeting this savings target is dependent on savings in other BCF budgets. It was agreed that to the extent the savings target was not met, the CCG would fund the shortfall subject to meeting its own statutory targets. Given this, the forecast is a balanced budget at year end.

### Legal

- 6.4 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.
- 6.5 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. Following assurance of the 2016/17



Sutton Better Care Fund the Section 75 has been updated, agreed and submitted to NHS England.

Community Engagement and Consultation

- 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 regular stakeholder newsletter.
- 6.7 Work is beginning in partnership with Healthwatch to further understand from service users/patients what they think about health and social care integration overall; including co-location of health and social care staff and the sharing of health and social care information. The learning from the recently completed Kingston project 'the voice of the customer' will be used to inform a comprehensive understanding of the needs of patients/service users/staff in relation to the Better Care Programme.

Equalities

- 6.8 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, support the achievement of this ambition.

**7. Appendices and Background Documents**

Appendix letter	Title
Not Applicable	

Background documents
Not Applicable

Audit Trail		
Version	Final	Date: 23 November 2016
Consultation with other officers		
Finance	Yes	Geoff Price, Sue Hogg
Other Officers:	Yes	Nick Ireland



Integrated Impact Assessment required?	Yes	Completed Previously
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