

13th March 2014	ITEM:
Thurrock Health and Well-Being Board	
THURROCK BETTER CARE FUND PLAN	
Report of: Roger Harris, Director of Adults, Health and Commissioning Thurrock Council; and Mandy Ansell, Chief Operating Officer Thurrock Clinical Commissioning Group	
Accountable Director: Roger Harris/Mandy Ansell	
This report is Public	
Purpose of Report: To enable the Board to agree an updated version of the Better Care Plan Fund; and to inform the Board of the next steps that will be taken to finalise the Plan.	

EXECUTIVE SUMMARY

The Better Care Fund (BCF) was announced in June as part of the 2013 spending round (previously known as the Integration Transformation Fund). All areas (based on Health and Wellbeing Boards) have to produce a BCF Plan, jointly developed by Clinical Commissioning Groups and local authorities and signed off by Health and Wellbeing Boards.

The purpose of the Fund is to provide ‘an opportunity to transform local services so that people are provided with better integrated care and support’ and to ‘help local areas manage pressures and improve long-term sustainability’.

A draft Plan was presented to the Health and Wellbeing Board on the 10th February. This report presents an updated Plan and identifies next steps.

1. RECOMMENDATIONS:

1.1 That the Board agree Thurrock Better Care Fund Plan (subject to final amendments being signed off by the Chair); and

1.2 That the Board note the proposed next steps.

2. INTRODUCTION AND BACKGROUND:

2.1 A special Board meeting was held on the 10th February to enable the Board to discuss and agree the first draft of Thurrock’s Better Care Fund Plan prior to the first submission deadline of the 14th February.

2.2 At the meeting on the 10th February, the Board agreed the draft Plan. It also agreed that any comments should be received by the 28th February; that a co-produced engagement plan should be appended to the final Plan; and that the final Plan should come to the Health and Wellbeing Board on the 13th March (Appendix 1).

2.3 Due to Board publishing dates, the Plan attached is a 'near-to-final' draft. Some amendments are likely to take place after the 13th March. Some of this will be dependent upon feedback from NHS England and the LGA as part of the assurance process. The Board has previously agreed that if further changes to the Plan are required, then the Chair will provide sign-off prior to submission.

3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

Comments Received

3.1 The Board agreed that any comments members wished to make on the draft Plan would be received by the 28th February. Comments received and responses, where required, are attached at Appendix 2.

Assurance Process and Support

3.2 The assurance process is carried out by NHS England Area Teams and local government regional peers. Guidance for the assurance process was issued on the 12th February.

3.3 Areas of assurance include:

- Is the vision is consistent with that of wider CCG strategic plans;
- Have implications for the acute sector and other existing services been adequately addressed;
- Have the national conditions been adequately covered;
- Is there a clear risk mitigation plan;
- Is there a contingency plan for the possibility of targets not being met; and
- Is there is a realistic level of ambition for each of the national metrics.

3.4 It is possible that some of the areas of assurance may not be fully met until our Plans have been developed further during 14/15.

3.5 It is anticipated that we will have received feedback prior to the Health and Wellbeing Board meeting on the 13th March – the scheduled date for feedback is 7th March. Feedback from the assurance process will be provided verbally at the Board meeting.

3.6 After the final deadline for submitting Plans (4th April), further assurance will take place. This will consider whether Plans can be signed off by the national team and also include proposals on the scale, nature and purpose of support required, and to which Health and Wellbeing Boards – NHS England has identified some resource for NHS planning and Area Teams are able to use

some of this for BCF work. Local government also has £2.7 million of funding to be used in 13/14 and 14/15 which will be directed through the regional Director of Adult Social Services (DASS) leads to support both the delivery of the Care Bill and the BCF.

Consultation and Engagement

- 3.7 At the February Board meeting, it was agreed that an engagement plan would be appended to the final Plan and that the engagement plan and subsequent engagement activity should be co-produced. The engagement plan is in the process of being developed by a working group including representation from HealthWatch Thurrock, Thurrock's Commissioning Reference Group, Thurrock Coalition, and Thurrock CVS. The engagement plan will be appended to Thurrock's BCF Plan once sign-off from the Group has been received.

Next Steps

- 3.8 The next milestone is the submission of the final Plan to NHS England on the 4th April. Prior to final submission, the Plan will be considered by the Council's Cabinet and also the CCG's Board before being signed off by the Health and Wellbeing Board's Chair.
- 3.9 A programme of work is required to support the development and delivery of the Plan. The programme of work may include other connected strands of work – e.g. Care Bill 'readiness'. Existing programme management arrangements will be refreshed to ensure that the appropriate arrangements are in place to drive forward the next stage of work.
- 3.10 Part of the programme management arrangements will include appropriate reporting arrangements. This will include regular reporting on programme progress to the Health and Wellbeing Board.
- 3.11 There are a number of issues to resolve if we are to successfully implement the Plan. These issues will be explored by different themed working groups – e.g. governance.

4. REASONS FOR RECOMMENDATION:

- 4.1 The Health and Wellbeing Board have to sign off the Better Care Fund Plan.

5. CONSULTATION (including Overview and Scrutiny, if applicable)

- 5.1 In addition to the development of an engagement plan which will accompany the final BCF Plan and set out how engagement will take place; this Plan has been consulted on with Health and Wellbeing Overview and Scrutiny Committee (11th February) and the CCG Board (29th January). Further consultation will take place through the Council's Cabinet on the 19th March, and the CCG Board on the 26th March.

5.2 Further engagement and consultation will take place as aspects of the Plan are developed throughout 14/15 and beyond. The engagement plan will guide this work.

6. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

6.1 The BCF Plan supports the delivery of Community Strategy priority 'Improve Health and Wellbeing'.

7. IMPLICATIONS

7.1 Financial

Implications verified by: **Roger Harris**
Telephone and email: **01375 652914**
rharris@thurrock.gov.uk

Financial implications will be identified as part of the development of the Plan and be considered by the relevant task and finish group. Contingency arrangements will need to be developed for funding that is dependent upon performance should performance targets not be achieved – this accounts for approximately 25% of the BCF.

7.2 Legal

Implications verified by: **Roger Harris**
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Each 'area' as defined by the geographical area covered must have a BCF Plan in place describing how the fund will be spent. The legal implications associated with the BCF are being considered as part of the development of the Plan.

7.3 Diversity and Equality

Implications verified by: **Teresa Evans**
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The Plan's initial focus will be on improving the health and social care outcomes for older people. System improvement will focus on achieving benefits for older people in the first instance whilst taking in to account the other protective characteristics (Equality Act 2010) of this. These improvements will be supported by carrying out an equality impact assessment to ensure these different needs are identified.

7.4 **Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental**

BACKGROUND PAPERS USED IN PREPARING THIS REPORT (include their location and identify whether any are exempt or protected by copyright):

- Better Care Fund National Guidance
- Better Care Fund – assurance process guide

APPENDICES TO THIS REPORT:

Appendix 1 – Thurrock Better Care Fund
Appendix 2 – Comments and response

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