

**REPORT TO:** Health and Wellbeing Board

**DATE:** 12<sup>th</sup> March 2014

**REPORTING OFFICER:** Strategic Director, Communities

**PORTFOLIO:** Health and Wellbeing

**SUBJECT:** Approval of the draft Better Care Fund Submission

**WARD(S)** Borough-wide

**1.0 PURPOSE OF THE REPORT**

1.1 To request that the Board approve the final draft Better Care Fund for submission to the Local Government Association and NHS England by 4<sup>th</sup> April 2014.

**2.0 RECOMMENDATION: That the Board**

- 1. note the content of the report; and**
- 2. approve the final draft Better Care Fund submission (Appendix 1).**

**3.0 SUPPORTING INFORMATION**

3.1 Members of the Board will recall that the initial draft Better Care Fund was submitted to the Local Government Association (LGA) and NHS England on 14<sup>th</sup> February, following approval by the Board.

3.2 Initial feedback has been received from NHS England through an assurance checklist and the Better Care Fund submission has been updated accordingly. The updated submission is attached at Appendix 1.

3.3 The final submission of the Better Care Fund is due on Friday 4<sup>th</sup> April 2014.

**4.0 POLICY IMPLICATIONS**

4.1 Nationally, the Public Health White Paper and the Health and Social Care Act both emphasise more preventative services that are focussed on delivering the best outcomes for local people. Locally, the Integrated Commissioning Framework sets out formally the joint arrangements for Commissioning. The joint Health and Wellbeing

Strategy includes shared priorities based on the Joint Strategic Needs Assessment and local consultation.

## 5.0 FINANCIAL IMPLICATIONS

5.1 Undertaking the recommendations within this report will ensure that the new pooled budget funding is accessible so that outcomes for people living within Halton can be improved further.

5.2 The breakdown of the financial overview for the Better Care Fund is described in the table below.

Organisation	Holds the pooled budget? (Y/N)	Spending on BCF schemes in 14/15	Minimum contribution (15/16)	Actual contribution (15/16)
Local Authority #1	Y	23,525	6,917	25,488
CCG #1	N	12,986	3,208	15,579
Contingency			473	473
<b>BCF Total</b>		<b>36,511</b>	<b>10,598</b>	<b>41,540</b>

## 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

### 6.1 Children & Young People in Halton

Effective arrangements for children's transition services will need to be in place.

### 6.2 Employment, Learning & Skills in Halton

Any long-term integration arrangements will need to focus upon staffing issues.

### 6.3 A Healthy Halton

Developing integration further between Halton Borough Council and the NHS Halton Clinical Commissioning Group will have a direct impact on improving the health of people living in Halton. The plan that is developed will be linked to the priorities identified in the Integrated Commissioning Framework.

### 6.4 A Safer Halton

None identified.

### 6.5 Halton's Urban Renewal

None identified.

## 7.0 RISK ANALYSIS

7.1 Halton Borough Council and the NHS Halton Clinical Commissioning Group may be at risk of losing funding if certain criteria/conditions described in this report are not met. To avoid this, it is vital that we work together to produce the “Plan” in line with the guidance that has been issued.

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 This is in line with all equality and diversity issues in Halton.

9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None within the meaning of the Act.