

REPORT TO: Health and Wellbeing Board

DATE: 4th November 2015

REPORTING OFFICER: Gerald Meehan, Strategic Director

PORTFOLIO: Health and Wellbeing

SUBJECT: Better Care Fund Quarter 1 report 2015/16

WARD(S) Borough-wide

1. PURPOSE OF THE REPORT

To inform the Board of the progress, performance and financial aspects of the Better Care Fund as reflected in the attached mandatory submission to the Local Government Association and NHS England.

2. RECOMMENDED: That the content of the report be noted.

3. SUPPORTING INFORMATION

The Health and Well Being Board agreed the submission of the Better Care Fund plan in December 2014. This was authorised by the Department of Health in January 2015 without conditions

The Better Care Fund plan outlines key areas for development, performance metrics and the associated finance. Progress against these areas are subject to a quarterly return to the Local Government Association and NHS England.

The template for the return is published by the national Better Care Support Team. The time between publishing and submission preclude review at the Health and Well Being Board prior to submission. The submission is reviewed by the Better Care Board Executive Committee who monitor the plan on a monthly basis.

In summary the submission demonstrates that Halton has made substantial progress on the implementation of the plan, has achieved the national and local targets and is delivering within the budget as planned.

Quarter 1 Report April to June 2015/16

Below is a summary of the Quarter 1 template submitted on 28th August

Tab 2 – Budget Arrangements:

This page just confirms that the budget arrangements for the BCF are contained within a Section 75 Joint Working Agreement.

Tab 3 – National Conditions

This page confirms that we are on track with all the National Conditions.

Tab 4 – Non-Elective Admissions and Payment for Performance

The maximum number of non-elective admissions to achieve the quarterly target should not exceed 4,292. The actual figure for Q1 is 4,128, therefore the target has been achieved.

Tab 5 – Income and Expenditure

This were delivered to plan for Quarter 1

Tab 6 – Local Metrics

- **Hospital Readmissions where original admission was due to a fall.** The maximum number to meet the target for Q1 was 40. The actual was significantly below this with 23 reported.
- **Do Care and Support help you to have a Better Quality of Life?** As this is an annual survey, there is no information for this quarter.

Tab 8 – Narrative

Halton has benefitted from its existing joint working relationships between adult social care and NHS Halton CCG enabling a smooth transition for the BCF into jointly agreed outcomes, processes and procedures. The two urgent care centres, whilst experiencing technical delays, are now on track to deliver credible alternatives to A&E attendances by Autumn 2015. The addition of Prime Ministers Challenge Fund for primary care is further supporting the development of integrated services around GP hubs as well as extending access to primary medical care across the 7 day period. The solutions to integrating IT systems and processes are dependent upon regional work-streams which while progressing realistically will not deliver within the life of the BCF.

4. POLICY IMPLICATIONS

None identified.

5. FINANCIAL IMPLICATIONS

The success of the BCF is reliant on the success of the schemes within it. These schemes will be regularly monitored through the BCB ECB and Better Care Board.

6. 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

If an area fails to meet any of the standard conditions of the BCF, including if the funds are not being spent in accordance with the plan with the result that delivery of the national conditions is jeopardised, the Better Care Support Team may make a recommendation to NHS England that they should initiate the escalation process. The process ultimately leads to the ability for NHS England to use its powers on intervention provided by the Care Act legislation, in consultation with DH and DCLG as the last resort. The quarterly reporting templates allow for any variation in spending from the plan to be explained.

8.0 EQUALITY AND DIVERSITY ISSUES

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 under the meaning of the Act.