



Report of: Steve Hume (Chief Officer, Adults & Health, Leeds City Council) & Sue Robins (Director of Operational Delivery, NHS Leeds CCG)

Report to: Leeds Health and Wellbeing Board

Date: 16th September 2019

Subject: Draft Leeds BCF Plan 2019/20

Are specific geographical areas affected? If relevant, name(s) of area(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. The Better Care Fund (BCF) was established in 2013 and the current two year Leeds BCF Plan ended in March 2019. The Ministry of Housing, Communities and Local Government (MHCLG) is jointly leading a review of the BCF with the Department of Health and Social Care (DHSC) therefore 2019/20 is to be a year of minimal change with any major changes from the review being implemented from 2020 onwards.
2. Both the BCF 2019/20 policy framework and planning template have now been received and Leeds is required to set out in the planning template, its vision for health and social care integration (including where appropriate how the activities in the BCF align with system level plans), confirm expenditure and set out how the National Conditions and metrics will be met. BCF Plan 2019/20 has to be signed off by the Leeds Health and Wellbeing Board.
3. The date for submitting a completed planning template is 27 September 2019. In order to ensure robust partnership engagement is fed into this process and feedback from the Yorkshire and Humber BCF Assurance panel is incorporated into the final version of the Leeds BCF Planning Template 2019/20, it will follow as a late supplementary appendix.

Recommendations

The Health and Wellbeing Board is asked to:

- Review and agree the draft Leeds BCF Plan 2019/20.

1. Purpose of this report

- 1.1. The purpose of this report is to obtain sign off from the Leeds Health and Wellbeing Board for the draft Leeds BCF Plan 2019/20.

2. Background information

- 2.1. The BCF was established in 2013 and is a national programme spanning both the NHS and local government. It represents a unique collaboration between NHS England, the MHCLG, DHSC and the Local Government Association. The four partners work closely together to help local areas plan and implement integrated health and social care services across England, in line with the vision outlined in the Long Term Plan.
- 2.2. The BCF encourages integration by requiring CCGs and local authorities to enter into pooled budget arrangements and agree an integrated spending plan.
- 2.3. An improved Better Care Fund (iBCF) was announced in the Government's 2015 Spending Review with additional iBCF funding announced in the 2017 Spring Budget.

3. Main issues

- 3.1. The current two year Leeds BCF Plan ended in March 2019. The MHCLG is jointly leading a review of the BCF with the DHSC therefore 2019/20 is to be a year of minimal change with any major changes from the review being implemented from 2020 onwards
- 3.2. Initial discussions between health and social care colleagues indicated that due to the BCF review, it would be appropriate for the Leeds BCF Plan 2019/20 to continue to fund services as per the existing Leeds BCF 2017/19 plan. It was acknowledged that Leeds had made significant progress since 2017 and therefore to continue to invest in these existing services at this time made the best use of the Leeds £. This ensured that BCF funding had the greatest level of impact by being aligned to our strategic priorities as outlined in the Leeds Plan. It was also agreed that once planning for 2019/20 was completed that there will be a series of strategic workshops and robust engagement in order to prepare for the next version of the BCF Plan that will be in line refreshed Leeds Health and Care Plan. Approval for this approach was sought and obtained from the Integrated Commissioning Executive (ICE) on 21 August 2019.
- 3.3. The Leeds Health and Wellbeing Strategy 2016-21 clearly articulates Leeds' vision to be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest. The Leeds BCF Plan 2019/20 helps to deliver this vision by continuing to build on the strong integrated health and care working that has already been put in place in the city enabling easier access to services in the community, preventing admissions to hospital and reducing delays getting out of hospital.
- 3.4. It also supports the principles of the Leeds Health and Care Plan (Leeds Plan) by focusing on preventative services including mental health, out of hospital services

including community beds and proactive services including reablement services and support for carers.

3.5. The principle of providing person-centred integrated care is at the heart of the Leeds BCF Plan 2019/20 with partnership working including with Leeds' Third Sector being fundamental to its success.

3.6. The key points of the Leeds BCF Plan 2019/20 to note are:-

- The plan is for one year only
- The National Conditions are the same as in 2017/19
- CCGs are required to pool a mandated minimum amount of funding
- Local Authorities are required to pool grant funding from the improved Better Care Fund, the Disabled Facilities Grant and the Winter Pressures Grant – this is the first time the Winter Pressures funding is to be pooled into the BCF. Reporting on this funding will be managed through the wider BCF reporting
- A separate narrative BCF plan is not required - narrative elements are included in the planning template
- Currently there is a shortfall showing under the section 'Expenditure' of £524k approx. in respect of the Adult Social Care services spend from the CCG minimum allocations. This is because the overall increase in the CCG minimum contribution has not been allocated at a flat rate of 1.8% (as per the CCG operating planning guidance) but a 5.3% uplift nationally. NHS England is making funding available to cover this financial pressure and NHS Leeds CCG are undertaking a separate assurance process in order to receive this funding
- In addition, the 2017-19 plan included a planning assumption for the release of £2.8m additional funding to Adult Social Care within the 2020/21 financial year. This planning assumption will be carried forward into the 2019/20 BCF plan (see para 4.5.1 of the Risk Management section below)
- There are some minor issues with the planning template itself mainly that the completion checks (red/green flags) on the checklist are not functioning correctly for some fields and scenarios

3.7. As in 2017, plans will be assured by NHS regional teams and local government representatives. Regional assurance outcomes will be calibrated with support from the Better Care support team (BCST) and plans approved by national partners. NHS England will send approval letters, giving specific approval to CCGs to spend from the CCG minimum contribution.

4. Health and Wellbeing Board governance

4.1. Consultation, engagement and hearing citizen voice

4.1.1. Routine monitoring of the delivery of the BCF is undertaken by the Leeds Plan Delivery Group (LPDG). This group reports into ICE which is the BCF Partnership Board with quarterly reporting to the Health and Wellbeing Board.

4.1.2. The BCF Plan has been developed based on the findings of consultation and engagement exercises undertaken by partner organisations when developing their own organisational plans. Any specific changes undertaken by any of the

schemes will be subject to agreed statutory organisational consultation and engagement processes.

4.2. Equality and diversity / cohesion and integration

4.2.1. Through the BCF, it is vital that equity of access to services is maintained and that quality of care is not compromised. The vision that 'Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest' underpins the Leeds Health and Wellbeing Strategy 2016 - 2021. The services funded by the BCF contribute to the delivery of this vision.

4.3. Resources and value for money

4.3.1. The agreed approach in Leeds to date has been to use the BCF in such a way as to derive maximum benefit to meet the financial challenge facing the whole health and social care system. Continuing to invest in existing services not only provides stability for those services and service users but also delivers value for money and makes the best use of the Leeds £ as well as addressing the aims of the BCF.

4.3.2. The additional iBCF Grant monies allocated through the Spring Budget 2017 is focussed on initiatives/schemes that have the potential to defer or reduce future service demand and/or to ensure that the same or better outcomes can be delivered at a reduced cost to the Leeds £. As such the funding is being used as 'invest to save'.

4.4. Legal Implications, access to information and call in

4.4.1. There are no legal, access to information or call in implications from this report

4.5. Risk management

4.5.1. The CCG continues to accept a risk share agreement with Leeds City Council regarding £2.8M and the Leeds system's continued focus remains on preventing admissions and facilitating early discharges. The Newton Europe analysis has provided the system with detailed actions and the Leeds system resilience plan details all cross organisational transformation to mitigate the £2.8M risk. This resilience plan will be assessed by the BCF/Leeds Plan Delivery Group to check it is robust in meeting the requirements of the BCF.

4.5.2. There is a risk that some of the individual funded schemes do not achieve their predicted benefits. This risk is being mitigated by ongoing monitoring of the impact of the individual schemes.

5. Conclusions

5.1. The Leeds BCF Plan 2019/20 is a continuation of the existing BCF programme and continues to align itself to the Health and Wellbeing Strategy and Leeds Plan. Once the planning process for 2019/20 has concluded, strategic discussions and robust engagement will take place in preparation for the next version of the BCF Plan.

- 5.2. Leeds continues to work closely with the NHS England/ MHCLG/DHSC/LGA BCF collaboration attending quarterly regional meetings and sharing with others, the work that Leeds is doing.
- 5.3. National quarterly returns in respect of monitoring the performance of the BCF and impact of the additional iBCF/Spring Budget monies will continue to be completed and submitted to NHS England/MHCLG as required under the grant conditions. Locally we will continue to provide assurance to HWB by monitoring the impact of the schemes and plan towards the exit from the Spring Budget funding period.

6. Recommendations

The Health and Wellbeing Board is asked to:

- Review and agree the Leeds BCF Plan 2019/20

7. Background documents

None.

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How does this help reduce health inequalities in Leeds?

The BCF is a national programme, of which the iBCF grant is a part, spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.

How does this help create a high quality health and care system?

The BCF has been created to improve the lives of some of the most vulnerable people in our society, placing them at the centre of their care and support, and providing them with integrated health and social care services, resulting in an improved experience and better quality of life.

How does this help to have a financially sustainable health and care system?

The iBCF Grant funding has been jointly agreed between LCC and NHS partners in Leeds and is focussed on transformative initiatives that will manage future demand for services.

Future challenges or opportunities

The initiatives funded through the iBCF Grant have the potential to improve services and deliver savings. To sustain services in the longer term, successful initiatives will need to identify mainstream recurrent funding to continue beyond the non-recurrent testing stage.

Priorities of the Leeds Health and Wellbeing Strategy 2016-21	
A Child Friendly City and the best start in life	
An Age Friendly City where people age well	X
Strong, engaged and well-connected communities	X
Housing and the environment enable all people of Leeds to be healthy	
A strong economy with quality, local jobs	
Get more people, more physically active, more often	
Maximise the benefits of information and technology	X
A stronger focus on prevention	X
Support self-care, with more people managing their own conditions	X
Promote mental and physical health equally	X
A valued, well trained and supported workforce	
The best care, in the right place, at the right time	X