

# Report of the Director of Collaboration to the meeting of Health and Wellbeing Board to be held on 16th September 2015.

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**E****Subject:****Better Care Fund: 2015/16 quarter 1 submission****Summary statement:**

This paper presents the Better Care Fund Quarter 1 (2015/16) report for the Health and Wellbeing Board's information. The report was submitted to NHS England on 26<sup>th</sup> August 2015. The report has been signed off by the Chief Executive of the Council on behalf of the Health and Wellbeing Board, out of Committee due to a misalignment of BCF reporting deadlines and HWB meeting dates.

The paper also sets out progress in delivery of the BCF commitments, risks, mitigating actions and the plan going forward.

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**Portfolio:****Health and Social Care**

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**Overview & Scrutiny Area:****Health and Social Care**

## 1. BACKGROUND

The Bradford BCF plan for 2015/16, covering the Bradford Health and Wellbeing Board geographical footprint, was approved in full by NHS England in January 2015 and is now being implemented. The total BCF fund for 15/16 is £37,345,000.

The *Guidance for the Operationalisation of the Better Care Fund in 2015-16* was published in March 2015. The document sets out guidance for local partners on how to operationalise the local BCF plan.

The Guidance sets out requirements for the following to be in place:

1. That the Health and Wellbeing Board oversee the strategic direction of the BCF
2. That the funds are paid into a section 75 pooled fund with an accompanying agreement setting out:
  - a. The arrangements for monitoring the delivery of the services
  - b. Who the host organisation is (responsible for accounting and audit) and
  - c. Who the pool manager is (responsible for submitting to the partners quarterly reports and an annual return, all signed off by the HWB)
3. A Partnership Board with minimum representation across the relevant CCGs and Local Authority to provide the HWB with appropriate information to enable it to review performance and consider future work.

NHS Bradford Districts Clinical Commissioning Group is the Host Organisation for the pool and a Pool Manager has also been identified. The role of the Partnership Board is fulfilled by Bradford Health and Care Commissioners.

The Health and Wellbeing Board is required to submit quarterly returns to NHS England demonstrating progress on delivery of the BCF plan and management of the fund. Due to a misalignment of HWB dates and submission dates, the report for 2015/16, quarter 1 was signed off out of Committee by Kersten England, Chief Executive Officer of CBMDC on behalf of the Chair of the Health and Wellbeing Board and submitted, as required, on 26<sup>th</sup> August 2015.

The report demonstrates that progress is being made on implementation of the plan and that the associated metrics or performance indicators are consistent with the plan.

## 2. OTHER CONSIDERATIONS

2.1 At Quarter 1, the main risk to Plan implementation relates to a delay in the expansion of the Virtual Ward provided by the Bradford Teaching Hospitals NHS Foundation Trust. This is due to recruitment difficulties which are expected to be resolved in time to allow the expanded service to be available from the end of October 2015. This will affect the level of non-elective hospital activity which may not be reduced by the expected amount and this could affect the value of the Better Care Performance fund that is released in 2015/16.

Performance fund release is planned from Quarter 3 onwards and will be subject to an assessment of BCF scheme performance and CCG affordability. Deferring the release of performance funds until later in the year is necessary to manage the risk around the sustainability of BCF scheme performance and to provide greater certainty over CCG financial performance.

2.2 NHS England have asked us what additional support we would like to successfully implement the plan and we have identified the need for additional support to align local business intelligence and analytics across all health and care partners who are party to the BCF plan.



This is a persistent issue because of different reporting requirements placed on partners and could be addressed by the development of a central intelligence and analysis unit supporting the health and care economy in Bradford.

2.3 Bradford Health and Care Commissioners are considering the approach for the BCF in 16/17, however this is subject to national guidance which is not likely to appear until October.

Consideration needs to be given to the scale of ambition for the BCF in 16/17 and beyond and its role in supporting the ambitions of the HWB to integrate the total health and care budget by 2020 and transform care for local people.

### **3. FINANCIAL & RESOURCE APPRAISAL**

BCF financial performance at Q1 is in line with the plan, except for a small underspend on Virtual Ward expansion.

### **4. RISK MANAGEMENT AND GOVERNANCE ISSUES**

Bradford Health and Care Commissioners maintain oversight of the operation of the BCF and advise that there are no other issues that need to be brought to the attention of the Board.

### **5. LEGAL APPRAISAL**

None

### **6. OTHER IMPLICATIONS**

Nothing to report

#### **6.1 EQUALITY & DIVERSITY**

Nothing to report.

#### **6.2 SUSTAINABILITY IMPLICATIONS**

Nothing to report

#### **6.3 GREENHOUSE GAS EMISSIONS IMPACTS**

Nothing to report.

#### **6.4 COMMUNITY SAFETY IMPLICATIONS**

Nothing to report

#### **6.5 HUMAN RIGHTS ACT**

Nothing to report



## **6.6 TRADE UNION**

Nothing to report

## **6.7 WARD IMPLICATIONS**

Nothing to report

## **6.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS (for reports to Area Committees only)**

Nothing to report.

## **7. NOT FOR PUBLICATION DOCUMENTS**

None

## **8. RECOMMENDATIONS**

8.1 That the BCF Quarter 1 (2015/16) report is accepted by the Health and Wellbeing Board.

8.2 Agreement to develop a proposal for a central intelligence and analysis unit for the health and care economy in Bradford.

8.3 That Bradford Health and Care Commissioners develop the 16/17 BCF plan on behalf of the HWB and bring proposals to a future Board.

## **9. APPENDICES**

9.1 Better Care Fund 15-16 Q1 report submitted to NHS England 26.08.15

## **10. BACKGROUND DOCUMENTS**

None.

