



Leicester City Clinical Commissioning Group

Name of meeting	Integrated Systems of Care Group (ISOC)	Date	15.10.2019	Paper	
Report title	Better Care Fund Annual Plan 2019-20				
Lead Director	Sarah Prema, Director of Strategy and Implementation, Leicester City CCG.	Tel/Email	Sarah.Prema@Leicestercityccg.nhs.uk		
Report Author	Mark Pierce, Senior Strategy and Implementation Manager, Leicester City CCG.	Tel/Email	Mark.Pierce@leicestercityccg.nhs.uk		
Clinical Lead	Dr Raj Than, CCG GP Clinical Lead for Integrated Care.	Tel/Email	Tun.Than@gp-c82033.nhs.uk		
Links to CCG strategic objectives	<input checked="" type="checkbox"/> Through better commissioning, improve local and national health outcomes, particularly by addressing poor outcomes and inequalities; <input checked="" type="checkbox"/> Balance the NHS budget and improve efficiency and productivity; <input checked="" type="checkbox"/> Lead a step change in the NHS in preventing ill health and supporting people to live healthier lives;				
Purpose	Note	√	Discuss and recommend		Approve
Report summary	<ol style="list-style-type: none"> The purpose of this report is to inform Leicester City ISOC members of the details of the Leicester Better Care Fund (BCF) Plan for 2019/20, including the final expenditure plan submitted to NHS England on 27.09.2019 following the delayed publication of the BCF planning guidance and final CCG financial allocations into the BCF. A full narrative plan is not required with the BCF submission this year. Instead, the template includes short sections to set out Leicester's approach to integration of health and care. The full template submission, including details of the investment plan submitted, has been provided as an appendix for reference. The main thrust of the CCG minimum spend element of the plan – strategy, details of investments and targets for achievement on the four national BCF metrics – continues the strategic direction of the 2017-19 plan. The submission is overwhelmingly based upon the 2019-20 BCF investment plan already supported by ISOC earlier this year. Additional detail about investments from within Local Authority's IBCF, Disabilities Facilities Grant and Winter Pressure Grant are also included in the submission. 				
Identified risks and risk management actions	<p>The additional CCG investment in social care (5.9%) mandated by NHSE/I in this year's plan is not a risk as formal assurance has been given at national level that the additional monies required will be granted to the CCGs.</p> <p>The single biggest risk in terms of delivery lies in the area of non-elective admissions. This is a system-wide risk across LLR and mitigations are in place across a wide range of projects under the governance of the Leicester, Leicestershire and Rutland</p>				

	(LLR) Integrated Urgent and Emergency Care Board.								
Resource and financial implications	<p>The plan details a total investment of £43,368,727. This is made up of:</p> <table border="1"> <tr> <td>Better Care Fund CCG contribution</td> <td>£23,936,545</td> </tr> <tr> <td>Improved Better Care Fund (iBCF) (Local Authority)</td> <td>£15,466,521</td> </tr> <tr> <td>Disabilities Facilities Grant (local Authority)</td> <td>£2,391,923</td> </tr> <tr> <td>Winter Pressures Grant (Local Authority)</td> <td>£1,573,738</td> </tr> </table>	Better Care Fund CCG contribution	£23,936,545	Improved Better Care Fund (iBCF) (Local Authority)	£15,466,521	Disabilities Facilities Grant (local Authority)	£2,391,923	Winter Pressures Grant (Local Authority)	£1,573,738
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Conflicts of interest	None identified								
Engagement and/or consultation considered?	<p>Nationally, the 2019-20 plan is aimed at continuing the themes for delivery set out in the previous BCF 2017-19 plan. As the range of services funded through both elements of the BCF and the other grants are those commissioned partly in response to previous and on-going public engagement processes (e.g. findings from the carers' strategy work, feedback from patients accessing current BCF services) additional public engagement has not been sought at this point. MP has previously engaged with city patient representatives on the concept and constituents of our Integrated System of Care as funded through the BCF.</p> <p>Mark Pierce and Ruth Lake collaborated on the contents of the submission. The allocation recommendations for use of the CCG minimum contribution, the details of system organisational redesign, and community services redesign, upon which much of this submission is based have been subject to consultation within and across partner organisations during 2018-19 as well as at ISOC meetings during the same period.</p>								
Clinical input assurance	Assurance on clinically orientated services funded (or part-funded) in the city through the BCF is via the GP members of ISOC on an ongoing basis.								
Due regard/equality considerations?	Existing impact assessments will be reviewed to ensure that there have been no revisions are required.								
Report history (audit trail)	The high-level principles and broad details of the submission have been approved for submission by Councillor Vi Dempster, Assistant Mayor for Health and Chair of the Leicester City Health and Wellbeing Board (HWBB) prior to submission. This is in line with national requirements. The submission will be taken as a paper to the November meeting of the HWB for formal approval. The gaining of retrospective approval from HWB is accepted in the guidelines.								
Appendices									
Recommendation	<p>The Integrated Systems of Care Group is asked to:</p> <ol style="list-style-type: none"> a. Note the BCF Plan for 2019/20 for submission to NHS England by 27th September 2019. b. Note that the Health and Wellbeing Board will receive the BCF Plan at the November meeting – the Chair, Councillor Dempster having given her approval in principle as per the national guidelines for submission. 								

Policy Framework and Previous Decisions

1. The [2019-20 BCF Policy Framework](#) was published on 10th April 2019. This confirmed that the BCF policy framework provides continuity from the previous round of the programme. The delayed [BCF Planning Requirements for 2019-20](#) were published on 18th July 2019, along with the final financial allocations for the BCF Plan.
2. The four national conditions set by the government in the Policy Framework remain the same and are:
 - a. That a BCF Plan, including at least the minimum mandated funding to the pooled fund specified in the BCF allocations and grant determinations, must be signed-off by the Health and Wellbeing Board, and by the constituent local authorities and CCGs.
 - b. A demonstration of how the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the uplift to the CCG minimum contribution.
 - c. That a specific proportion of the area's allocation is invested in NHS-commissioned out of hospital services, which may include seven-day services and adult social care.
 - d. A clear plan on managing transfers of care (and improving DTOC), including implementation of the national high impact change model for managing transfers of care.

BCF Plan for 2019/20

3. The BCF Plan for 2019/20 is viewed as a continuation of the previous plan which covered 2017-19. Therefore materials for the national submission to NHS England were collected through a planning template, and we were not required to provide a detailed narrative report on this occasion.
4. The narrative section (available at Appendix A) sets out Leicestershire's approach to the integration of health and social care under the headings from the template:
 - a. Joined up care around the person;
 - b. Joint commissioning and delivery of health and social care at health and wellbeing board level;
 - c. How the BCF plan and relevant elements of the STP/ICS plan aligns, including any jointly owned outcomes.
5. In terms of the CCG minimum contribution. The final figure (confirmed only in July 2019) increased by 5.3% against 2018/19 spend. NHS England have recognised that there will be a funding pressure on CCGs with the additional increase and have looked at ways to support CCGs with the social care element of this funding pressure. Further information has been received which shows how much additional allocation CCGs should receive to cover the

social care uplift. This confirmed that LC CCG should receive £551,000 to cover the social care cost pressure. The remaining pressures have been addressed from within the Performance Fund (now reduced) and the inclusion of existing recurrent CCG investment in community therapy within the BCF budget.

- 6 This amount will cover the funding pressure for the CCG relating to the social care spend. CCGs should receive formal confirmation from NHS England shortly. The additional funding should be released to CCGs following regional assurance that the BCF Plan meets the appropriate criteria.
- 7 The BCF expenditure plan, provided in Tab 6 of the submission spread sheet, sets out the line items/ service areas for each element of the BCF pooled budget.
- 8 The line items funded by the Improved Better Care Fund and Winter Pressures Grant are subject to Local Authority determination and associated grant conditions.
9. The Disabled Facilities Grant (DFG) allocation is automatically transferred to each District Council per the apportionment set out by government.
- 10 Tab 7 provides details on our priorities for embedding elements of the high impact change model (HICM) for managing transfers of care; which includes the current performance issues that need to be addressed and future changes planned for 2019/20. This section also sets out our current position of maturity for each of the eight changes in the model and the planned level of implementation by March 2020. The Discharge Working Group has oversight on the progress of the HICM for Leicester, Leicestershire and Rutland (LLR).
11. Tab 8 provides details on the proposed trajectory for the achievement of targets in the four national BCF metrics in 2019/20; a summary of the rationale for the level of performance being aimed for and an update on the current progress against the planned target.
12. The following table lays out the timetable for approval of the submitted plan:

BCF planning submission from local Health and Wellbeing Board areas (agreed by CCGs and local government).	By 27 th September
Scrutiny of BCF plans by regional assurers, assurance panel meetings, and regional moderation	By 30 th October
Regionally moderated assurance outcomes sent to BCST	By 30 th October
Cross regional calibration	By 5 th November
Assurance recommendations considered by Departments	5 th – 15 th

and NHSE	November
Approval letters issued giving formal permission to spend (CCG minimum)	Week commencing 18 th November
All Section 75 agreements to be signed and in place	By 15 th December

- 13 Work to update the BCF Section 75 agreement will now commence and will be submitted to the CCG Governing Body and Joint integrated Commissioning Board ahead of the deadline of 15th December for approval.
- 14 Leicester City ISOC is asked to support this plan acknowledging that this reflects the work reported upon to ISOC and JICB at regular intervals.