Cheshire East Council

Cabinet

Date of Meeting:	13 th March 2018
Report of:	Linda Couchman, Interim Director of Operations, Adult Social Care
Subject/Title:	Better Care Fund – Agreement of Section 75 for 2018/19 - 19/20
Portfolio Holder:	Cllr. Janet Clowes, Adult Social Care and Integration

1. Report Summary

1.1. The report requests that Cabinet supports the Council to maintain and continue the current arrangements and enter into two new S75 Partnership Agreements from 1st April 2018 until 31st March 2019 with local health partners (namely NHS Eastern Cheshire CCG and NHS South Cheshire CCG) with the option to extend those agreements for a further period of one year, subject to there being a national requirement to operate the Better Care Fund as a Section 75 pooled budget agreement until 2020.

2. Recommendation

That Cabinet authorises:

- 2.1. The Executive Director of People in consultation with the Cabinet member for Adult Social Care and Integration to agree terms and enter into two S75 Agreements (Pooled Fund) one with NHS Eastern Cheshire CCG Clinical Commissioning Group (ECCG); and one with NHS South Cheshire Clinical Commissioning Group (SCCCG) for an initial period of one year (2018-19).
- 2.2. The Council to enter into a pooled budget(s) for 2018/19 that meet(s) the minimum required budget. In 2018/19 uplifts to all four funding sources mean that the revised Pool will be £31.331m. Disabled Facilities Grant is expected to be £1.89m, the minimum contributions from the Clinical Commissioning Groups are expected to be £11.104m from South CCG and £12.337m from East CCG and the Improved Better Care Fund allocation is £6.0m. Some examples of schemes included within BCF are shown in Appendix One.
- 2.3. The Executive Director of People in consultation with the Cabinet member for Adult Social Care and Integration to decide to extend the agreement for a period of one further year (2019/2020) and that the Council enter into

pooled budget(s) agreement for 2019/20, subject to there being a continuing national requirement to operate the Better Care Fund and Improved Better Care Fund as a Section 75 pooled budget agreement for that period.

- 2.4. The Better Care Fund Governance Group to continue oversight and responsibility for reviewing the delivery of the agreement.
- 2.5. Approves delegated authority to the Executive Director of People in consultation with the Cabinet member for Adult Social Care and Integration to make decisions and agreements on behalf of the Council in relation to the commissioning of schemes funded by the Better Care Fund.

3. Reasons for Recommendation

- 3.1. Today, people are living much longer, often with highly complex needs and multiple conditions. These needs require ongoing management from both health and care services, which combine both the medical and social models of care.
- 3.2. As our population ages and the financial pressures on the health and care system increase, we need to be better at providing proactive, preventative care in community settings, so that people can be supported to live at home for longer and avoid the need for commissioned health and care services (2017-19 Integration and Better Care Fund Policy Framework).

4. Other Options Considered

4.1. No other options have been considered. The S75 agreement is a statutory requirement.

5. Background

- 5.1. The Better Care Fund provides a mechanism for joint health and social care planning and commissioning, bringing together ring-fenced budgets from Clinical Commissioning Group allocations, the Disabled Facilities Grant and funding paid directly to local government for adult social care services the Improved Better Care Fund. The Spring Budget 2017 announced an additional £2 billion to support adult social care in England. This money is included in the Improved Better Care Fund grant to local authorities and will be included in local Better Care Fund pooled funding and plans.
- 5.2. On 23rd February 2017 the Council approved the revenue budget for 2017/18. Subsequently, on 8th March, in the Spring Budget, the Chancellor announced additional funding for Adult Social Care (known as the Improved Better Care Fund [iBCF]) amounting to £2 billion nationally over a 3 year period. The allocation for 2017/18 for the Cheshire East Council is £4.69m; however this is subject to performance over the next two years.

- 5.3. One of the conditions attached to the Improved Better Care Fund grant is that it needs to be aligned with the Better Care Fund pooled budget through Section 75 of the NHS Act 2006 (S75).
- 5.4. Local Better Care Fund plans are subject to national conditions and guidance. Local plans are monitored through NHS England and there are strict timelines regarding submission of plans for both regional and national assurance of plans to take place.
- 5.5. National Conditions for 2017-19:

In 2017-19, NHS England required that Better Care Fund plans demonstrated how the area will meet the following national conditions:

- Plans to be jointly agreed
- NHS contribution to adult social care is maintained in line with inflation
- Agreement to invest in NHS commissioned out-of-hospital services, which may include 7 day services and adult social care
- Managing Transfers of Care (Delayed Transfers of Care)
- 5.6. Detailed Implementation Plans were developed as part of the 'Delivering the Better Care Fund in Cheshire East 2017-19,' which was fully assured by NHS England on 21st December 2017. The progress against the delivery of these plans will be shared and monitored by the Better Care Fund Governance Board and will also be presented to the Cheshire East Health and Wellbeing Board on a quarterly basis.

6. Wards Affected and Local Ward Members

6.1. All wards.

7. Implications of Recommendation

7.1. Policy Implications

- 7.1.1. By 2020, with greater focus on supporting independence and choice, the Cheshire East Council's Commissioning Three Year Plan will have delivered a wider range of preventative alternative services resulting in a significant reduced demand for traditional, hospital-based care and a fundamental drive to embedding personal self-care and patient choice. The Better Care Fund work streams will compliment this ensuring that schemes build on the strengths of communities and to keep people healthy and active for as long as possible. Where possible the Better Care Fund will seek to maximise new technologies, community based support, rehabilitation and supportive Extra Care housing to keep people out of high cost services for longer.
- 7.1.2. All partners within Cheshire East are committed to maximising the opportunities afforded via the Better Care Fund to further integrate health

and social care, to promote health and wellbeing and improve the health outcomes of the local population.

- 7.1.3. The Better Care Fund and Improved Better Care Fund will be used to target those areas identified as requiring immediate improvement to enable more people to remain independent and effectively cared for in the community, care in the community as an appropriate alternative to hospital admission and to support the timely discharge of anyone who is admitted to hospital with a focus on Home First. Our local plans are consistent with Integration and the Better Care Fund (Local Government Association 2015), the NHS Five Year Forward View (NHS 2015), Getting it Right First Time (The Kings Fund 2017), Making Every Contact Count (Public Health England 2016), General Practice Forward View (NHS 2016), Primary Care Home (National Association of Primary Care 2017) and the Five Year Forward View for Mental Health.
- 7.1.4. 'Delivering the Better Care Fund in Cheshire East, 2017-19' is aligned with our system-wide vision, objectives and principles related to the use of the Better Care Fund namely: Person centred, safe and sustainable integrated care.

7.2. Legal Implications

- 7.2.1. Under Section 75 of the National Health Service Act 2006, NHS bodies may enter into arrangements with local authorities in relation to NHS functions and the health functions of local authorities.
- 7.2.2. S141 of the Care Act 2014 provides for the Better Care Fund Pooled Funds to be held under and governed by an overarching s75 National Health Service Act 2006 Partnership Agreement.
- 7.2.3. The Council may therefore enter into an agreement with NHS Eastern Cheshire Clinical Commissioning Group and NHS South Cheshire Clinical Commissioning Group under S75 of the NHS Act 2006 or renew an existing agreement.
- 7.2.4. In 2016 Cheshire East Council entered into two separate section 75 agreements, one with each Clinical Commissioning Group operating within the Cheshire East Borough footprint. In accordance with those agreements (and the statutory requirement to hold Better Care Fund pooled funds under a section 75 agreement), the agreements operated for a period of one year with an option to renew. Albeit that the agreement as not formally extended it has continued to be operated by the parties for the whole two year period.

7.3. Financial Implications

7.3.1. In 2017/18, the minimum required pool at the outset of the year was £24.778m and consisted of Local Authority Capital funding (Disabled Facilities Grant) of £1.775m, NHS Eastern Cheshire Clinical

Commissioning Group funding of £12.107m, and NHS South Cheshire Clinical Commissioning Group funding of £10.897m. In his Autumn 2017 statement the Chancellor of the Exchequer increased Disabled Facilities Grant funding in 2017/18 for Cheshire East by £0.156m to £1.931m, meaning the revised pool is now £24.935m. When the Improved Better Care Fund allocation of £4.692m is added the total pooled fund is £29.627m. In 2018/19 uplifts to all four funding sources mean that the revised Pool will be £31.331m. Disabled Facilities Grant is expected to be £1.89m, the minimum contributions from the Clinical Commissioning Groups are expected to be £11.104m from South CCG and £12.337m from East CCG and the Improved Better Care Fund allocation is £6.0m. It is envisaged the majority of the Improved Better Care Fund will continue to be spent to sustain capacity, capability and and quality within the social care market place.

- 7.3.2. The Cheshire East local health and social care economy will work together to deliver the Better Care Fund arrangements for its population, seeking to support individuals health and wellbeing needs within the community setting, reduce non-elective admissions, avoiding hospital/residential nursing care where possible.
- 7.3.3. Following the agreement to continue to operate two S75 agreements within the Cheshire East area, the respective Clinical Commissioning Groups and Council are responsible for producing the pooled budget's accounts and audit in respect of those elements of the budget which they receive directly from government. This arrangement reduces the number of transactions across organisations and provides the opportunity for the pooled budgets to be aligned to the local health and social care transformation programmes.
- 7.3.4. The organisations host the budget in line with the agreed plans of all partners and the funding would be used explicitly for the agreed areas of spending identified in the, *'Delivering the Better Care Fund in Cheshire East 2017-19'* plan. The Council takes responsibility for the collation and consolidation of standardised financial and reporting information for the Cheshire East Health and Wellbeing board.

7.4. Equality Implications

7.4.1. The recommendations will most likely benefit over 65's and people living in disadvantaged areas more than other parts of the population.

7.5. Rural Community Implications

7.5.1. None.

7.6. Human Resources Implications

7.6.1. None. The Better Care Fund is managed and overseen by a full time Programme Manager.

7.7. Health and Wellbeing Implications

7.7.1. The recommendations will have a positive impact on populations experiencing the greatest inequities in health and social care, e.g. those aged 65 years and above, and those with lower incomes / living in disadvantaged areas.

7.8. Implications for Children and Young People

7.8.1. Although the implications for children and young people are limited in scope, the changes to Carers Services from April 2018 to become an 'all age' service will mean that young carers will now be supported by Better Care Funds, as well as those families who provide care for their children.

7.9. **Overview and Scrutiny Committee Implications**

7.9.1. Overview and Scrutiny are aware of the Better Care Fund plan and will be monitoring progress.

7.10. Other Implications (Please Specify)

7.10.1. The future of the Better Care Fund is subject to ongoing national review from March 2019. It is prudent to have a S75 place for 2018/19 with a further one year's extension, should the government decide to extend Better Care Fund for an additional year to 2020.

8. Risk Management

8.1. The Better Care Fund plan includes a detailed Risk Register and each operational lead is responsible for maintaining a monthly account of any emerging risks and relevant mitigations via the Better Care Fund Monthly Highlights Reporting procedure. The Better Care Fund Risk Register is monitored by the Better Care Fund Governance Group on a bi-monhtly basis.

9. Access to Information

9.1. Delivering the Better Care Fund in Cheshire East 2017-19

Better Care Fund Letter of Approval. 21/12/17

Risk Register. 12/12/17

Better Care Fund Monthly Highlights Report. January. 11/01/18

Section 75 Agreements (Eastern Cheshire Clinical Commissioning Group and South Cheshire Clinical Commissioning Group) including schedules.

10. Contact Information

Contact details for this report are as follows:

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