

REPORT TO THE HEALTH AND WELLBEING BOARD
22nd April 2015

Better Care Fund Operational Guidance

Report Sponsor: RCCG and RMBC

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to provide Board Members with an update on the publication by NHS England (NHSE) of a key document: The Operationalisation of the Better Care Fund in 2015/6, and the implications for Health and Wellbeing Boards

2. RECOMMENDATIONS

It is recommended that:-

- 2.1 Members note the NHSE document Better Care Fund: Guidance for the Operationalisation of the BCF in 2015-16, published on 26th March 2015.**
- 2.2 Members note the requirement to send quarterly reports and an annual report To NHSE, and for these reports to be presented to and signed off by the Health and Wellbeing Board.**
- 2.3 Members consider the suggested format for the BCF Quarterly Report and mandate officers to develop an appropriate report format for Rotherham, ensuring the NHSE requirements are fully met.**
- 2.4 Members mandate the BCF Operational Executive to sign off the first quarterly BCF return, due for submission to NHSE May 2015, and receive a report at the next HWB meeting.**

3. INTRODUCTION / BACKGROUND

- 3.1 NHS England states “The Better Care Fund (BCF) is one of the most ambitious ever programmes across the NHS and Local Government. It creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their well-being as the focus of health and care services. The BCF is a critical part of the NHS 2 year operational plans and the 5 year strategic plans as well as local government planning”.
- 3.2 On 21st January 2015 Rotherham’s BCF plan was approved by NHS England. The plan contained high level performance monitoring information but detail could not be developed until NHS England requirements were known. The 2015/6 guidance, published in late March 2015 has provided this clarity.

3.3 In particular this guidance sets out:-

- the Care Act legislation underpinning the BCF;
- the accountability arrangements and flows of funding;
- the reporting and monitoring requirements for 15-16;
- arrangements for the operation of the payment for performance framework;
- how progress against plans will be managed and what the escalation process will look like; and
- the role of the BCF Task Force / Better Care Support Team going forward.

3.4 The operationalization Guidance sets out the NHSEs expectations for how localities will measure, manage and report performance, and the reporting timeframe for NHS England, and in particular clarifies the pay for performance element of the BCF. NHSE has developed a quarterly reporting template (contained in annex 2. The template covers reporting on: income and expenditure, payment for performance, the supporting metrics, and the national conditions. An annual report will also be required but as yet, the draft format for that report has not been devised by NHSE. The guidance suggests these reports are discussed and signed-off by HWBs.

3.5 Quarterly reports are due for submission at 5 points in the year:

- 29 May 2015 – for the period January to March 2015
- 28 August 2015 – for the period April to June 2015
- 27 November 2015 – for the period July to September 2015
- 26 February 2016 – for the period October – December 2015
- 27 May 2016 – for the period January – March 2016

The reason the reporting commences from January 2015, is due to the baseline for the quarterly Payment for Performance schedule, linked to the non-elective admissions targets.

The guidance invites Health and Wellbeing Boards to consider the alignment of BCF targets with the planning assumptions included in CCG operational plans, and where the target in BCF plans is greater than 2 percentage points away from assumptions in operational plans to amend the BCF target

4. CONCLUSION / NEXT STEPS

4.1 The HWB is asked to consider the operational guidance, and to mandate officers to discuss, agree and implement a performance management programme using a customised version of the attached quarterly monitoring form, and an annual return when a NHSE has devised a template. The quarterly format, and the timetable for submitting the quarterly and annual returns have been included within the draft Section 75 Partnership Framework Agreement for the BCF, thus ensuring both the CCG and Local authority are jointly responsible for compiling and submitting these reports to the HWB and NHSE.

5. FINANCIAL IMPLICATIONS

The Operational Guidance emphasises the requirement for the CCG and Local authority to be clear on pay for performance, and ensuring BCF monies are not paid if the locality does not meet its performance target for the number of non-elective admissions. The pay for performance element of the BCF fund in Rotherham is £1.416 m. A risk pool is in place, and the Section 75 agreement sets out a risk sharing agreement which will apply if BCF funding is withheld due to non-achievement of the target for non-elective admissions reductions.

6. CONSULTATION WITH STAKEHOLDERS

The BCF operations group and BCF Executive Group are aware of this paper and will be further discussing at their next scheduled meetings.

7. Appendix

7.1 Appendix 1 – Better Care Fund: Guidance for the Operationalisation of the BCF in 2015-16

<http://www.england.nhs.uk/wp-content/uploads/2015/03/bcf-operationalisation-guidance-1516.pdf>

7.2 NHSE suggested Quarterly report format

<http://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/>

8. Background Papers

Better Care Fund Plan.

Officer Contacts: Keely Firth CFO, RCCG **Telephone No:** 302025

Officer Contacts: Lynda Bowen, RMBC **Telephone No:**

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