

# HEALTH AND WELLBEING BOARD PAPER FORMAL PUBLIC MEETING

Report of:	Jayne Ludlum, Executive Director Communities, Sheffield City Council
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Date:	13 <sup>th</sup> July 2017
Subject:	Sheffield's 2017/18 and 18/19 Draft Better Care Fund Narrative Submission
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#### **Summary:**

The Better Care Fund is a key enabler to bring about parts of the transformation the NHS, the Local Authority and local communities via Shaping and Sharing Sheffield have articulated in the Sheffield Place Based Plan. It is an ambitious plan to work at a large scale on an integrated agenda which would impact significantly on the people of Sheffield and improve their care.

Whilst the Better Care Fund has now operated for two full years, its' ambitions and remit are reviewed every year to ensure it reflects the priorities in Sheffield.

Locally, this year, for the first time, we have created a second fully pooled budget (£101m) for mental health services within the overarching BCF arrangements. This currently brings the overall total of the Better Care Fund budget to £352m for 2017/18. Our main areas of focus with the addition of mental health will continue to be on adult admissions to hospital, active, support and recovery, people keeping well, ongoing care, independent living solutions and capital expenditure. All of which are key themes with the Sheffield Place Based Plan.

Additional national funding under the Improved Better Care Fund (iBCF) was recently announced and this will be added into the pooled BCF budget arrangements following

consideration of the planned use of the funding by SCC's Cabinet in July. Key stakeholders have been consulted on the use of the funding and have input into current proposals.

Nationally, we are requested to provide a narrative of our plans for the next two years to NHS England. A complete set of national guidance is still to be issued. However, accompanying this paper is the draft narrative.

Health & Wellbeing Board is required to approve the narrative.

# **Questions for the Health and Wellbeing Board:**

- Is Health and Wellbeing Board satisfied that these plans will progress the Board's ambition to transform the health and care landscape, reduce health inequalities and deliver better outcomes for Sheffield people?
- Where might there be further opportunities for integration and joint working, especially considering the emerging opportunities of commissioners and providers in Sheffield working together more formally as an Accountable Care Partnership to improve the health and wellbeing of Sheffield people?

#### **Recommendations for the Health and Wellbeing Board:**

- That the Health and Wellbeing Board formally approve these plans
- That the Health and Wellbeing Board delegates *final* approval of the Better Care Fund submission to NHS England to the lead executive officers in the Council and the CCG.
- That the Health and Wellbeing Board receives an update on progress at its November 2017 public meeting.

#### **Background Papers:**

Sheffield's Better Care Fund draft submission 17/18 -18/19.

#### What outcome(s) of the Joint Health and Wellbeing Strategy does this align with?

Sheffield is a health and successful city

Health and wellbeing is improving

Health inequalities are reducing

People get the help and support they need and feel is right for them

The health and wellbeing system is innovative, affordable and provides good value for money.

Who have you collaborated with in the writing of this paper?

Both the CCG and Local Authority have contributed to the production of this document via the Executive teams, Work-stream Leads and Executive Management Group – the joint committee with responsibility of the management of the Better Care Fund.

#### Sheffield's Better Care Fund 2017/18 and 2018/19

## 1.0 Summary

- 1.1 The Better Care Fund is a way of bringing together the NHS and Local Authority with local communities to focus on transforming and improving the health and wellbeing of Sheffield People. It includes ambitious plans as articulated in the Sheffield Place Based Plan, to work on a large scale an integrated agenda which would impact significantly on the people of Sheffield and improve their care.
- 1.2 The Fund was agreed in 15/16 and is now in its third year of operation. Whilst its original key priorities are still relevant, each year the CCG and Local Authority evaluates its priorities to ensure they are still relevant for the people of Sheffield. In addition to the priorities identified originally around a focus on people at risk of admission to hospital and those for whom there is the greatest opportunity for health outcomes improvement, starting in 17/18 the pooled budget also includes mental health. A truly integrated commissioning approach will offer more effective commissioning which should lead to better patient outcomes and value for money.
- 1.3 The health and care priorities listed in the Sheffield Plan are being delivered in part through the Better Care Fund. Sheffield is a leader in integration. As well as a substantial integrated commissioning budget, we have set up an Accountable Care Partnership Board to provide overall leadership represented by commissioners and providers. We also have leading organisations across the city signed up to a memorandum of understanding, across commissioners AND providers to enable closer working to deliver our priorities.

#### 2.0 What does this mean for Sheffield people?

- 2.1 Sheffield people have told us:
  - If things go wrong it's difficult to receive the care I might need quickly enough
  - I find it hard to find my way around all the variety of services or even to know if what I need is actually provided by someone
  - We have to constantly repeat information from one person to another
  - I have little control over the care I do or don't receive
  - My psychological needs are not met as part of care for my physical needs
  - Services often aren't available at night or weekends like they are during the week
  - Why don't services plan in advance surely they should know if I get unwell I'll struggle to cope but don't necessarily want or need to go into hospital
  - Why can't I just have one care plan.

- 2.2 Integrated commissioning through the Better Care Fund gives us a real opportunity with all our partners in the city to work with citizens to answer what Sheffield people are saying. This includes improving outcomes:
  - People will find it simpler to get round the care system and experience fewer delays
  - We will build on and further develop, people's self care and health condition management skills, knowledge and abilities
  - There will be improved quality of life for those in active care
  - Services will be more equitable and accessible
  - Services will be much more based in Sheffield's communities and closer to where people live, with staff working collaboratively to achieve the best outcomes for Sheffield People.

#### 3.0 Introduction to the Better Care Fund

- 3.1 In 2013 NHS Sheffield Clinical Commissioning Group (CCG) and Sheffield City Council (SCC) agreed to work towards a single budget for health and social care. This agreement was developed through the Sheffield Executive Board and the Health and Wellbeing Board and both organisations jointly set ambitious targets. The ambition through integrated commissioning was to:
  - Ensure people have a seamless, integrated experience of care, recognising that separate commissioning can be a block to providers establishing integrated services
  - Achieve greater efficiency in the delivery of care by removing duplication in current services
  - Be able to redesign the health and social care system, reducing reliance on hospital and long term care so that we can continue to provide the support people need within a reduced total budget for health and social care.
- 3.2 In 2015, in line with national guidance and direction and as part of the Health and Wellbeing Board strategy, the CCG and SCC entered into a section 75 Agreement covering the operation of the Better Care Fund. This agreement established a pooled budget and supported by formal governance arrangements to create flexibility between health and social care budgets, with a view to making the best use of the available resource within the city to address the needs of Sheffield People in a joined up approach.
- 3.3 The key priorities agreed at the time were to:
  - Increase wellbeing of people at risk or emerging risk of declining health and loss of independence

- Support people to remain at home and avoid unnecessary admission, responding quickly when necessary.
- Minimising hospital stay and discharging with the appropriate support and maximising their recovery and independence
- Integrate assessments, placement and contract management of services looking after people needing ongoing care
- Reduce demand for admission

#### 3.4 Successes to date include:

- A Sheffield system Memorandum of Understanding has been signed by major organisations. It provides a framework and process for collaborative working in Sheffield.
- Sixteen neighbourhoods set up across the city made up of groups of GP
  practices, and forming stronger partnership working with community services and
  the VCF to address specific local needs in their communities.
- The establishment of community partnerships across the city whereby larger and smaller VCF groups come together in partnership and identify any gaps in their services to meet the needs of their communities.
- The establishment of a clear way for services to refer people who need some additional low level support through a form of social prescribing.
- Further development of person-centred care planning, and developing an outcome measure to assess whether people feel more activated in the management of their own care.
- The introduction of technological schemes to improve the digital literacy of people and testing out new technology to help people manage their care in a more pro-active way.
- Discharge of patients at weekend is now supported by volumes of Planned
  Discharge Dates which are shared with transport providers enabling them to plan
  additional capacity when required to support the hospital at times of peak
  demand.
- Implementation of the Teaching Hospitals Excellence in Emergency Care Assessment model in Admissions units:
- Implementation of planned approach to discharge management and themes of safer, better, faster.

### 4.0 Our priorities for 17/18 and 18/19

4.1 The Better Care Fund works in alignment with our Sheffield Place Based Plan. The work plan informed the Sheffield Place Based Plan which has in turn also informed our plans.

Our key themes as outlined above will remain our priorities. In addition, in 17/18 we have combined both CCG's and SCC's mental health budgets into one pooled budget of £101m which will give us the ability to commission whole pathways of care, establish a single integrated commissioning team, develop a single transformation programme, delivered jointly with our main provider of mental health services, underpinned by the principles of joint delivery and joint accountability.

- 4.2 In 17/18 we will continue to explore the possibility of incorporating the Childrens' services into the BCF arrangement from April 2018.
- 4.3 All of our priorities are listed in our key areas of work and delivery plan in section three of the BCF narrative which accompanies this paper.
- 4.4 We will also include in 17/18, capital expenditure grants to explore the potential of using the grants more strategically to help with Delayed Transfers of Care and Out of Hospital targets.

### 5.0 NHS England and H&WB Board Sign off process

- **5.1** The CCG and City Council are required to submit a plan to cover 2017-2019 which describes our plans and our targets. Health and Wellbeing Board need to approve the plan accompanying this paper. Final submission to NHS England is 11<sup>th</sup> September.
- 5.2 At the time of submitting this paper and accompanying plan to H&WB Board, not all of the guidance and requirements have been published. Health and Wellbeing Board need to be aware that because of timing, not all the financial details and targets are included in this paper. We will share this with HW&B Board later in the summer, once all the work is undertaken.
- 5.3 The Better Care Fund narrative which accompanies this paper describes the intentions for the next two years which are funded via the Better Care Fund.

#### 6.0 Questions for the Board:

- 6.1 Is Health and Wellbeing Board satisfied that these plans will progress the Board's ambition to transform the health and care landscape, reduce health inequalities and deliver better outcomes for Sheffield people?
- 6.2 Where might there be further opportunities for integration and joint working, especially considering the emerging opportunities of commissioners and providers in Sheffield working together more formally as an Accountable Care Partnership to improve the health and wellbeing of Sheffield people?

#### 7.0 Recommendations for the Health and Wellbeing Board:

7.1 That the Health and Wellbeing Board formally approve these plans

- 7.2 That the Health and Wellbeing Board delegates *final* approval of the Better Care Fund submission to NHS England to the lead executive officers in the Council and the CCG.
- 7.3 That the Health and Wellbeing Board receives an update on progress at its November 2017 public meeting.