

By: Roger Gough, Chair of Kent Health and Wellbeing Board

To: Kent Health and Wellbeing Board – 25<sup>th</sup> January 2017

Subject: **The Kent Better Care Fund 2017-19**

Classification: Unrestricted

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**Summary:** This paper provides an update on the requirements for the Kent Better Care Fund Plan (KBCF) 2017-19. It also seeks clarification on the strategic direction and its part within the wider Integration by 2020.

## **FOR DECISION**

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### **1. Introduction**

- 1.1 As the second year of the Kent Better Care Fund is nearing completion attention needs to be drawn to developing the future year plans. At the time of writing the Policy Framework and Planning Guidance has not been issued. However there is sufficient information to provide an update to the Board on the expected planning requirements and to agree the strategic direction.

### **2. The 2017-19 Kent Plan**

- 2.1 There will be a requirement to submit two year plans covering 2017-19. The intention is to reduce the overall planning burden as far as possible. They are expected to be an evolution from previous plans rather than a complete rework. They should be part of the wider integration approach and should align, where appropriate to other plans locally, for example STP and Social Care Transformation.

- 2.2 The planning requirement includes the following:

- Narrative Plan
  - Vision for health and social care integration (Roadmap)
  - National conditions
  - Evidence based plan
  - Approach to risk
- Funding Contributions
  - Confirm funding, including in relation to national conditions
- Spending Plan
  - Confirm Schemes, including amounts, funding source and commissioner
- Metrics
  - Four national metrics – Non Elective Admissions; Admissions to residential care homes; Effectiveness of reablement; Delayed transfers of care

- 2.3 Areas are being given the opportunity to ‘graduate’ from the BCF if they are able to move beyond its planning requirements. There will be a first wave to trial the process. The likely requirements include a shared commitment and vision for integration by 2020 with a sufficiently mature system for health and social care as well as pooling above the minimum and commitment to greater alignment.
- 2.4 The assurance process will consist of two rounds and will be a shared process across the NHS and Local Government with simplified plan ratings.
- 2.5 The Local Government Finance Settlement 2016/17 confirmed the continuation of the BCF (for 2016/17 the existing Kent Better Care Fund totaled £105m) and additional funding for adult social care through the Improved Better Care Fund (iBCF) worth £1.5bn by 2019/20. In the interim years, the additional funding through the iBCF will be worth £105m in 2017/18 and £825m in 2018/2019. This additional funding will come from the Department of Communities and Local Government (DCLG), the same source as the Revenue Support Grant (RSG). Indicative allocations for Kent are as follows:

Year	Allocation £m
2017-18	£ 0.3m
2018-19	£17.5m
2019-20	£33.7m

### 3. Integration & Graduation Roadmap

- 3.1 The requirement for Areas to submit their vision for health and social care integration provides an opportunity to articulate what this looks like for Kent in line with the STP. Whilst it is likely to change there needs to be agreement about the milestones and direction. For example:

2017/18	Integrated teams with joint leadership
2018/19	Further Alignment
2019/20	Full Integration

- 3.2 By identifying the key objectives which can be delivered through the plans now (for example integrated equipment, care navigators) and those that take us further as the STP plans develop (e.g. integrated commissioning) we ensure that any roadmap laid out in BCF plans aligns with and compliments the STP timetable.

### 4. National Conditions

- 4.1 The number of National Conditions has been reduced from eight to three:

- Jointly agreed plan
  - Agreed by HWB(s)
  - All minimum funding requirements met
- Social Care maintenance
  - Real-terms uplift over the SR period
  - Local areas can agree higher contributions from the CCG minimum

- NHS commissioned out of hospital services
    - Ring-fenced amount for use on NHS commissioned out of hospital services
    - Areas are expected to consider holding funds in a contingency if they agree additional targets for NEA above those in the CCG operational plan
- 4.2 Narrative plans are expected to detail how the BCF monies will deliver these National Conditions over the two year period.
- 4.3 Although there is no longer a national condition on Delayed Transfers of Care (DToC), they will continue to be measured as in previous years.
- 4.4 Plans should set ambitions for reduction and link these to wider activity plans to reduce DToC

## **5. Performance Metrics**

- 5.1 The performance metrics remain the same as previous years. The HWB is required to agree performance targets against these metrics for the two year period. Performance against the targets will be reported again quarterly.

## **6. Recommendations**

The Kent Health and Wellbeing Board is asked to:

- (1) Note the draft planning guidance for the KBCF 2017-19.
- (2) Discuss the Integration Roadmap and agree the strategic approach.

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