

BETTER CARE FUND PERFORMANCE AND DELIVERY GROUP

TERMS OF REFERENCE

BETTER CARE FUND (BCF)

The Department of Health published the current BCF Policy Framework in March 2017. It sets out the national approach to local integration of health and social care, summarised thus:

People need health, social care, housing and other public services to work seamlessly together to deliver better quality care. More joined up services help improve the health and care of local populations and may make more efficient use of available resources.

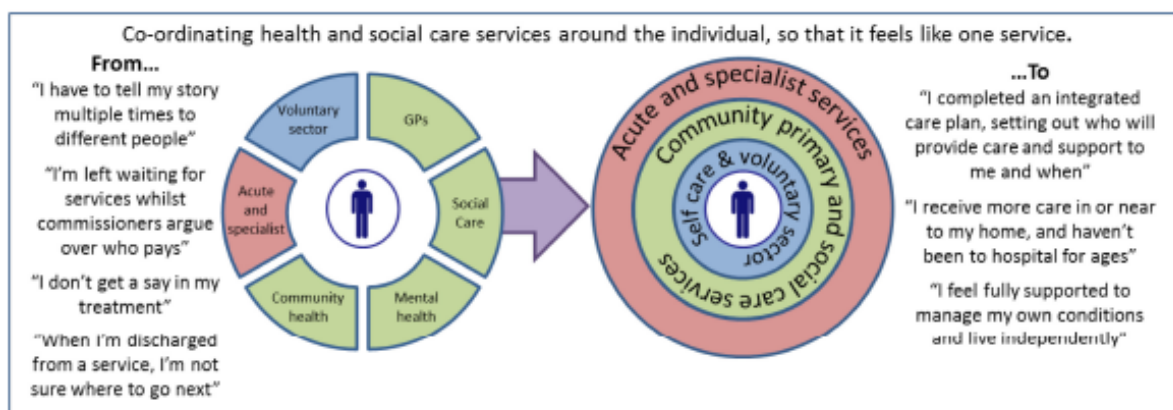


Figure 1: Co-ordinating health and care services around the individual

There is no single way to integrate health and care.

The Better Care Fund is the only mandatory policy to facilitate integration. It brings together health and social care funding.

For 2017-19, there are four national conditions, rather than the previous eight:

- 1. Plans to be jointly agreed**
- 2. NHS contribution to adult social care is maintained in line with inflation**
- 3. Agreement to invest in NHS commissioned out-of-hospital services, which may include 7 day services and adult social care**
- 4. Managing Transfers of Care** (a new condition to ensure people's care transfers smoothly between services and settings).

Beyond this, areas have flexibility in how the Fund is spent over health, care and housing schemes or services, but need to agree how this spending will improve performance in the following four metrics: **Delayed transfers of care; Non-elective admissions (General and Acute); Admissions to residential and care homes; and Effectiveness of reablement.**

As part of Better Care Fund planning, we are asking areas to set out how they are going to achieve further integration by 2020. We would encourage areas to align their approach to health and care integration with Sustainability and Transformation Plan geographies, where appropriate.

What matters is that there is locally agreed clarity on the approach and the geographical footprint which will be the focus for integration.

The framework includes the following examples of integration already in operation around the country:

	Joint commissioning	Lead commissioning	Accountable Care Organisation (ACO) ¹⁷
Characteristics	<p>Some or all CCG/LA commissioning decisions made jointly.</p> <p>Budgets (and other resources) pooled or aligned in line with extent of joint commissioning.</p>	<p>One body exercises some or all functions of both the CCG and the LA, with the relevant resources delegated accordingly.</p>	<p>CCG and LA pay a set figure (possibly determined by capitation) to an Accountable Care Organisation to deliver an agreed set of outcomes for all health and care activity for the whole population, using a multi-year contract.</p> <p>The ACO decides what services to purchase to deliver those outcomes. MCPs and PACs are types of ACOs.</p>

There was a further update to the Planning Framework in July 2018. It sets out:

- accountability structures and funding flows for 2017-19 plans
- refreshed metric plans for 2018-19
- guidance on amending BCF plans
- guidance on reporting on and continued compliance with BCF 2017-19 conditions
- the support, intervention and escalation process
- the legislation that underpins the BCF

In response to this the York BCF S75 Agreement will be updated to reflect new spending commitments which remain within the original financial envelope, and do not require the submission of a revised planning template.

BETTER CARE FUND PERFORMANCE AND DELIVERY GROUP (BCF P&DG)

PURPOSE OF THE GROUP

On behalf of NHS Vale of York CCG, City of York Council and York Health and Wellbeing Board:

- To fulfil the requirements of the BCF Policy Framework
- To comply with the BCF planning requirements
- To provide assurance on the BCF to the Health and Wellbeing Board, reporting through the newly forming One York (Improvement Board)
- To develop and promote opportunities for integration

RESPONSIBILITIES

On behalf of NHS Vale of York CCG, City of York Council and York Health and Wellbeing Board (HWBB) to lead and manage all aspects of the BCF:

- Develop the Integration and BCF narrative plan in accordance with planning requirements – for approval by HWBB
- Respond to changes in guidance
- Complete the necessary returns to government as required
- Report to the York Improvement Board (once established) and the HWBB
- Guide the management of the pooled fund
- Manage the strategic risks associated with BCF
- Provide strategic direction to schemes funded through BCF or iBCF
- Provide local leadership on the operation of schemes in the context of improving integration
- Receive financial and performance information and use this intelligence to develop the BCF and improve outcomes

ACTIVITIES

- Monthly meetings and action between meetings
- Preparation and discussion of relevant reports including development of integration vision and strategy for York
- Monitor and manage the financial position of York BCF
- Monitor and manage the performance of the BCF overall and of individual schemes
- Annual evaluation of schemes
- Annual review of BCF P&DG Terms of Reference and agreements
- Information sharing
- Maintain communication with NHSE BCF manager

FORWARD PLAN

January – March: Q3 returns (19-1-18), develop performance framework

April – June: Q4 returns (24-4-18), re-launch BCF, evaluate schemes, develop draft integration strategy

July – September: Q1 returns, initiate planning for 2019 - 2020

MEMBERSHIP

- NHS Vale of York CCG;
- City of York Council;
- Tees, Esk & Wear Valley NHS Foundation Trust;
- York NHS Foundation Trust;
- Vale of York Clinical Network;
- York Council for Voluntary Service.

MEETINGS

- Monthly, CYC and VOYCCG sharing administration support
- Quorum requires VOYCCG and CYC attendance

REVIEW

The terms of reference will be reviewed annually at the time of the Section 75 renewal.

Draft illustration

