

Title: Integration Plan (Integrated Transformation Fund)

Wards Affected: All

To: Health and Wellbeing Board **On:** 3 December 2013

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1. Purpose

- 1.1 To present to the Health and Wellbeing Board the outline plan which is being developed as part of the requirements of the Integration Transformation Fund. Following the success of the health and social care community being approved as a Pioneer site, partners have come together to develop the Integration Plan which will deliver the priorities set out to achieve whole system change through the Integrated Care Organisation and progress the projects as set out in the original Pioneer bid.

2. Recommendation

- 2.1 That the draft Integration Plan be reviewed and that the Board discuss and comment on its further development.
- 2.2 That the final Integration Plan be presented to the Health and Wellbeing Board in line with national expectations.
- 2.3 That the principle of a 'single pooled' arrangement for revenue aspects of the Integrated Transformation Fund, in line with the local work to date on an Integrated Care Organisation and our pioneer plans for improving the outcomes of the health and well being of our community, be endorsed.

3. Integration Transformation Fund

- 3.1 As part of the 2013 Spending Round funding was announced to assist with closer integration between health and social care. The funding is described as: 'a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities.' It is expected that the Integrated Transformation Fund (ITF) will be a 'significant catalyst for change'.

3.2 The Fund will be a pooled budget which will be deployed locally on social care and health, subject to the following national conditions which will need to be addressed in the Integration Transformation Plans:

- plans to be jointly agreed;
- protection for social care services;
- as part of agreed local plans, 7-day working in health and social care to support patients being discharged and prevent unnecessary admissions at weekends;
- better data sharing between health and social care, based on the NHS number
- ensure a joint approach to assessments and care planning;
- ensure that, where funding is used for integrated packages of care, there will be an accountable professional;
- risk-sharing principles and contingency plans if targets are not met – including redeployment of the funding if local agreement is not reached; and
- agreement on the consequential impact of changes in the acute sector.

The ITF in 2015/16 will be dependent on performance achieved in 2014/15.

3.3 Whilst the ITF does not come into full effect until 2015/16 there is an expectation that CCGs and local authorities build momentum in 2014/15, using the additional £200 million due to be transferred to local government from the NHS to support transformation. The plan for 2015/16 needs to start in 2014 and form part of a five year strategy for health and care. The NHS planning framework will invite CCGs to agree five year strategies, including a two year operational plan that covers the ITF, through their health and wellbeing boards.

3.4 The two year operational plan will need to be in place by March 2014. It will need to be developed jointly by the CCG and the local authority and signed off by both parties and the Health and Wellbeing Board. The Health and Wellbeing Board is best placed to decide whether the plan is best for the locality, engaging with local people and bringing a sector-led approach to the process.

3.5 The £3.8 billion pool brings together NHS and local government resources which are already committed to existing core activity. The Council and CCG may need to redirect funds from these activities to shared programmes that deliver better outcomes for individuals. Again, these discussions need to take place through the Health and Wellbeing Board.

3.6 The CCG and the Council will need to engage with all providers (both NHS and social care) likely to be affected by the use of the fund. The implications for local providers will need to be set out clearly for the Health and Wellbeing Board and that the Board's agreement for the deployment of the fund includes agreement to the service change consequences.

- 3.7 Locally, the Fund will provide an opportunity to think widely about how we jointly commission integrated services in order to get maximum benefit from our combined resources. Although we're waiting for confirmation of the value of ITF for our community, our initial planning assumptions show our combined ITF value is £12.7million (with £11.4m from health). Although this is a significant amount of money, and is already committed to providing excellent joined up services, we think that the opportunities of ITF could apply equally to the whole integrated care organisation across all local health and social care funding; this would maximise the potential benefits available to us and get better value for each Torbay pound. The ITF is mainly a revenue pooled fund but has some aspects of capital spend- particularly capital currently allocated to disabled facilities grants (DFG). With the Integrated Care Organisation (ICO) we have a transformative opportunity – offering far greater scope for making these integrated services better but more efficient across the whole acute and community landscape.
- 3.8 The ICO is a key part of the wider Pioneer plan, and the approval process is happening currently. It is important for us now, but in the future will continue to develop as services across other organisations, e.g. GP services, mental health, etc. work in a more joined up way. This is where our integration programme will find the flexibility to deliver. It will need time, and as a Pioneer site we will be asking for time, so that over a five year timescale we can reap the benefits of this flexibility, and achieve the goals set out in our Pioneer programme.
- 3.9 The CCG is working with both Torbay Council and Devon County Council in a partnership with NEW Devon CCG which will ensure join up at a strategic commissioning level where it makes sense to do so, while maintaining local commissioning at a Torbay geography where there is focused delivery on local priorities.
- 3.10 The process for development and approval is as follows :
- A two year plan for 2014/15 and 2015/16 to be in place by March 2014 which sets out how the pooled funding will be used and how national and local targets will be met.
 - Completion of required template setting out allocation and plans for the use of pooled monies which will need to be signed off by CCG, Local Authority and Health and Wellbeing Board.
 - In order to progress and meet the deadline, the first draft copy of the Integration Plan is presented to the Health and Wellbeing Board in December.
 - Following feedback and a process to ensure alignment with Devon Integration Fund the final plan will be submitted for sign off to the CCG Governing Body and Health and Wellbeing Board in February 2014.
- 3.11 **Risks:** It is acknowledged that both CCGs and Local Authorities are experiencing significant financial pressures with budget reductions, increasing prescribing and referrals to acute care. Therefore it is critical that the CCG

and local authority work jointly on the plan and deployment of the funding as it is likely that money will need to be redirected from NHS services and savings found in existing services to release funding to be directed to the pooled budget.