

Report to: Leader and Lead Cabinet Member for Strategic Management and Economic Development

Date of meeting: 7 April 2017

By: Director of Adult Social Care and Health

Title: 2017/18 Strategic Investment Plan for East Sussex Better Together

Purpose: To seek agreement to a joint Strategic Investment Plan for health and social care which has been developed in partnership with Hastings and Rother Clinical Commissioning Group and Eastbourne Hailsham and Seaford Clinical Commissioning Group

Recommendations:

The Leader and Lead Cabinet Member for Strategic Management and Economic Development is recommended to:

- (1) Agree the Strategic Investment Plan as set out in Appendix 1**
 - (2) Agree that authority is delegated to the Strategic Commissioning Board to make any subsequent amendments to the Strategic Investment Plan as set out in the report**
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1 Background

1.1 East Sussex Better Together (ESBT) is the whole system health and care transformation programme, which was formally launched in August 2014, to fully integrate health and social care across the ESBT footprint in order to deliver high quality and sustainable services to the local population. Originally formed as a partnership between Eastbourne, Hailsham & Seaford (EHS) Clinical Commissioning Group (CCG), Hastings and Rother (H&R) CCG and East Sussex County Council, the Programme now formally includes East Sussex Healthcare NHS Trust (ESHT) and Sussex Partnership NHS Foundation Trust (SPFT). Our shared vision is to ensure that people receive proactive, joined up care, supporting them to live as independently as possible and achieve the best possible outcomes.

1.2 As we approach week 140 of the programme the partnership is moving to the next phase of the work to fully integrate and embed into core business the commissioning and delivery of health and social care. The Council has, through Reconciling Policy Performance Resources, agreed at County Council on 7th February 2017 to align its Adult Social Care budget, Public Health budget and part of its Children's budget with EHS and H&R CCGs, as part of the transition to the ESBT accountable care model which is intended to take a whole-systems approach to the planning and delivery of health and social care across the ESBT area. The aligned budgets have been drawn together into a Strategic Investment Plan (SIP) which is set out in in summary for 2017/18, in Appendix 1. The Council's contribution to this plan was agreed at the County Council meeting. The SIP is a medium term plan covering the period to 2020/21 which following further development with ESBT partners can now be considered for agreement.

1.3 The Government's Spring Budget announced additional funding of £22.09m to East Sussex County Council over three years to support Adult Social Care. The funding will be allocated, through the Improved Better Care Fund, as follows: £11.027m in 2017/18, £7.343m in 2018/19 and £3.649m the year after. Within the ESBT Alliance, the additional funding allocation equates to £8.491m in 2017/18 (77% of the total East Sussex allocation). This funding will be deployed to meet the needs of the population covered by ESBT and the strategic objectives and programmes of work already outlined in the ESBT SIP. Subject to demonstration that the grant conditions are met, the funding will also help mitigate the risks that planned schemes will not be able to deliver the required system change within the 2017/18 timescales.

1.4 Below is the summary of the East Sussex County Council investment in the SIP:

East Sussex Better Together Strategic Investment Plan	2017/18
	£'000
Adult Social Care Base Budget	127,604
Council Tax Additional 1% Precept	1,887
Adult Social Care Base Budget	129,491
Supporting Adult Social Care Grant (one-off for 2017/18)	2,000
Improved Better Care Fund	220
Additional Adult Social Care Funding (Spring Budget)	8,491
Total Adult Social Care	140,202
Public Health	19,313
Children's Services	5,505
Total ESCC Investment in the ESBT SIP	165,020
Clinical Commissioning Group Investment (including NHS England Specialist Commissioning)	697,129
Total ESBT SIP Investment	862,149

1.5 In addition to the development of a SIP the Council, two CCGs and ESHT have agreed to establish an ESBT Alliance Partnership, in order to fully realise our ambition of a fully integrated whole system health and social care economy across the ESBT footprint, through an accountable care model. This involves a test-bed year in 2017/18 enabling us to operate our principles of collectively managing the health and social care system with our ESBT partners. This will help us to establish the best vehicle to enable us to reach our goal of delivering high quality, effective care for the population covered by the ESBT footprint in a way that is sustainable in the long term.

2 Supporting Information

2.1 The vision of ESBT is to meet population health need by delivering fully integrated and sustainable health and social care. The SIP sets out a medium term financial plan that enables the Council to set a balanced budget for 2017/18 and creates a sustainable system that promotes health and wellbeing whilst addressing quality and safety issues, in order to achieve the following triple aims:

- Prevent ill health and deliver improved outcomes for our population
- Enhance the quality and experience of care people receive; and
- Ensure the future affordability and sustainability of services.

2.2 From the outset it was agreed that this will be delivered through a focus on population needs, better prevention, self-care, improved detection, early intervention, proactive and joined up responses to people that require care and support across traditional organisational and geographical boundaries. In delivering this vision, we will see services:

- Move from acute to community settings with a focus on maintaining people safely at home.
- Provided by multidisciplinary teams working across health and social care at a local level who will seek to prevent escalation, reduce the need for complex care packages or hospitalisation, and enable people to leave bedded care quickly following an illness.

- Targeted for people based on a risk stratification approach, focused on individuals, or populations to actively engage them in maintaining their health and wellbeing.
- Transformed within 150 weeks from the current service configuration to one that is integrated.

2.3 The delivery of the SIP will be governed through Council's core processes with any key investment and service decisions being made through Cabinet. The Cabinet also agreed on 7th March 2017 to establish a joint committee, known as the Strategic Commissioning Board, with EHS and H&R CCGs. This Board will play a central role in the joint oversight of the SIP and will be authorised to take decisions within its terms of reference as agreed from time to time. The terms of reference for the Strategic Commissioning Board are attached at Appendix 2. Given the complexity of the health and social care system and the requirement to respond to changing service demands it is likely that the SIP will continue to evolve. It is therefore proposed that authority is delegated to the Strategic Commissioning Board to make any subsequent amendments.

3 Conclusion and reasons for recommendations

3.1 Cabinet has previously agreed the setting up and delivery of the ESBT programme and proposals for moving to an accountable care model and County Council has agreed the budget for Adult Social Care, Public Health and Children's services, that will be the Council's contribution to the SIP. The SIP will enable the Council and EHS and H&R CCGs to align health and social care investment to deliver the transformation in how care is provided across the ESBT footprint and establish a clinically and financially sustainable system. The SIP will also enable the planning and control of ESBT resources through regular monitoring of expenditure against the plan, with corrective action to be taken in year, if required, by the Strategic Commissioning Board.

3.2 In order to build on the progress of the ESBT programme, it is recommended that the Leader agrees the SIP as set out in Appendix 1, which takes account of the additional funding for Adult Social Care from the Spring Budget. The SIP has been considered and agreed by the Governing Bodies of EHS and H&R CCGS and delivery of the plan will be governed by core County Council processes and the Strategic Commissioning Board.

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Background documents:

None