

Template for BCF submission 2: due on 21 March 2016

Sheet: 4. Health and Well-Being Board Expenditure Plan

Selected Health and Well-Being Board:

Merton

Data Submission Period:

2016/17

4. HWB Expenditure Plan

This sheet should be used to set out the full BCF scheme level spending plan. The table is set out to capture a range of information about how schemes are being funded and the types of services they are providing, which is required to demonstrate how the national policy framework is being achieved. Where a scheme has multiple funding sources this can be indicated and split out, but there may still be instances when several lines need to be completed in order to fully describe a single scheme. In this case please use the scheme name column to indicate this.

On this tab please enter the following information:

- Enter a scheme name in column B;
- Select the scheme type in column C from the dropdown menu (descriptions of each are located in cells B270 - C278); if the scheme type is not adequately described by one of the dropdown options please choose 'other' and give further explanation in column D;
- Select the area of spending the scheme is directed at using from the dropdown menu in column E; if the area of spending is not adequately described by one of the dropdown options please choose 'other' and give further explanation in column F;
- Select the commissioner and provider for the scheme using the dropdown menu in columns G and J, noting that if a scheme has more than one provider or commissioner, you should complete one row for each. For example, if both the CCG and the local authority will contract with a third party to provide a joint service, there would be two lines for the scheme: one for the CCG commissioning from the third party and one for the local authority commissioning from the third party;
- In Column K please state where the expenditure is being funded from. If this falls across multiple funding streams please enter the scheme across multiple lines;
- Complete column L to give the planned spending on the scheme in 2016/17;
- Please use column M to indicate whether this is a new or existing scheme.
- Please use column N to state the total 15-16 expenditure (if existing scheme) This is the only detailed information on BCF schemes being collected centrally for 2016-17 but it is expected that detailed scheme level plans will continue to be developed locally.

Scheme Name	Scheme Type (see table below for descriptions)	Please specify if 'Scheme Type' is 'other'	Area of Spend	Please specify if 'Area of Spend' is 'other'	Expenditure					2016/17 Expenditure (£)	New or Existing Scheme	Total 15-16 Expenditure (£) (if existing scheme)
					Commissioner	if Joint % NHS	if Joint % LA	Provider	Source of Funding			
Community Services contract	Integrated care teams		Community Health		CCG			NHS Community Provider	Additional CCG Contribution	£16,870,000	Existing	£16,098,000
Community services contract - performance incentive	Other	Performance incentive	Community Health		CCG			Private Sector	CCG Minimum Contribution	£409,000	New	
Merton integrated equipment store	Other	Equipment	Community Health		Local Authority			Private Sector	CCG Minimum Contribution	£776,850	Existing	£752,687
End of life care - local enhanced service	Other	End of life	Primary Care		CCG			Private Sector	CCG Minimum Contribution	£19,209	Existing	£19,000
Nursing - Marie Curie Cancer	Other	End of life	Community Health		CCG			Charity/Voluntary Sector	CCG Minimum Contribution	£101,100	Existing	£100,000
Bereavement service	Support for carers		Mental Health		CCG			Charity/Voluntary Sector	CCG Minimum Contribution	£86,715	Existing	£86,000
Hospices	Other	End of life	Community Health		CCG			Charity/Voluntary Sector	CCG Minimum Contribution	£532,797	Existing	£527,000
Intermediate care beds	Intermediate care services		Community Health		CCG			NHS Community Provider	CCG Minimum Contribution	£594,216	Existing	£656,000
Expert patient programme	Other	Self management	Community Health		CCG			CCG	CCG Minimum Contribution	£96,000	Existing	£90,000
End of life support	Personalised support/ care at home		Community Health		CCG			Charity/Voluntary Sector	CCG Minimum Contribution	£100,000	Existing	£106,500
Data sharing	Other	Project costs	Other	Project costs	CCG			CCG	CCG Minimum Contribution	£30,000	Existing	£0
Continuing care placements	Personalised support/ care at home		Continuing Care		CCG			Private Sector	CCG Minimum Contribution	£8,526,870	Existing	£7,350,750
Joint funded placements	Personalised support/ care at home		Continuing Care		CCG			Private Sector	CCG Minimum Contribution	£564,590	Existing	£559,000
Funded nursing care	Personalised support/ care at home		Continuing Care		CCG			Private Sector	CCG Minimum Contribution	£1,057,860	Existing	£1,428,500
Local Enhanced Services - Diabetes	Integrated care teams		Primary Care		CCG			NHS Community Provider	CCG Minimum Contribution	£15,150	Existing	£15,000
Local Enhanced Services - Care of older people	Integrated care teams		Primary Care		CCG			NHS Community Provider	CCG Minimum Contribution	£1,099,880	Existing	£1,089,000
Mascol	Assistive Technologies		Social Care		Local Authority			Local Authority	CCG Minimum Contribution	£1,444,920	Existing	£1,424,804
Voluntary services grant - Ageing well	Integrated care teams		Community Health		Local Authority			Charity/Voluntary Sector	CCG Minimum Contribution	£450,000	Existing	£307,111
Reablement	Reablement services		Community Health		Local Authority			Local Authority	CCG Minimum Contribution	£2,038,350	Existing	£2,467,053
Placements Care Packages	Personalised support/ care at home		Social Care		Local Authority			Private Sector	Local Authority Social Services	£36,172,283	Existing	£41,302,841
3 Health workers	Integrated care teams		Community Health		Local Authority			Local Authority	CCG Minimum Contribution	£150,000	Existing	£150,000
Health based day working	7 day working		Community Health		Local Authority			Local Authority	CCG Minimum Contribution	£500,000	Existing	£500,000
Heat recovery contract	Other	Equipment maintenance	Community Health		Local Authority			Private Sector	CCG Minimum Contribution	£57,000	Existing	£57,000
Data sharing (NHS number cross reference)	Other	Project costs	Social Care		Local Authority			Local Authority	CCG Minimum Contribution	£42,000	Existing	£42,000
Market based placement - packages of care	Other	Project costs	Social Care		Local Authority			Local Authority	CCG Minimum Contribution	£15,000	Existing	£15,000
Project staff	Other	Project costs	Social Care		Local Authority			Local Authority	CCG Minimum Contribution	£30,000	Existing	£30,000
Project staff	Other	Project costs	Other	Transformation	Local Authority			Local Authority	CCG Minimum Contribution	£94,000	Existing	£94,000
Carers including respite	Support for carers		Social Care		Local Authority			Local Authority	Local Authority Social Services	£365,377	Existing	£417,200
Equipment underspend 14/15	Other	Risk Pool	Social Care		Local Authority			Local Authority	Local Authority Social Services	£200,000	New	
Cost of Non-Intensive Admissions for people over 50	Other	Acute Activity	Acute		CCG			CCG	Additional CCG Contribution	£17,414,310	Existing	£17,892,385
Disabled Access Grant	Other	Capital costs for disabled facilities	Other	Capital costs	Local Authority			Local Authority	Local Authority Social Services	£889,718	Existing	£528,000

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On this tab please enter the following information:

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Scheme Type	Description
Reablement services	The development of support networks to maintain the patient at home independently or through appropriate interventions delivered in the community setting. Improved independence, avoids admissions, reduces need for home care packages.
Personalised support/ care at home	Schemes specifically designed to ensure that the patient can be supported at home instead of admission to hospital or to a care home. May promote self management/expert patient, establishment of 'home ward' for intensive period or to deliver support over the longer term. Admission avoidance, re-admission avoidance.
Intermediate care services	Community based services 24x7. Step-up and step-down. Requirement for more advanced nursing care. Admissions avoidance, early discharge.
Integrated care teams	Improving outcomes for patients by developing multi-disciplinary health and social care teams based in the community. Co-ordinated and proactive management of individual cases. Improved independence, reduction in hospital admissions.
Improving healthcare services to care homes	Improve the quality of primary and community health services delivered to care home residents. To improve the consistency and quality of healthcare outcomes for care home residents. Support Care Home workers to improve the delivery of non essential healthcare skills. Admission avoidance, re-admission avoidance.
Support for carers	Supporting people so they can continue in their roles as carers and avoiding hospital admissions. Advice, advocacy, information, assessment, emotional and physical support, training, access to services to support wellbeing and improve independence. Admission avoidance
7 day working	Seven day working across health and/or social care settings. Reablement and avoids admissions
Assistive Technologies	Supportive technologies for self management and telehealth. Admission avoidance and improves quality of care