Readiness for implementing the BCF

Aggregate national analysis of local self-assessments March 2015

The Better Care Fund

The BCF 'Readiness' Survey

The Better Care Support Team issued a survey in March to ascertain how ready local areas across the country felt to deliver their Better Care Fund plans from 1st April 2015.

The purpose of the survey was to:
1) to support local areas in carrying out a self-assessment of their own readiness for delivery to inform discussions locally;
2) to inform the planning and allocation of resources and support that will be made available to areas in 2015-16 to further help them with implementation and delivery of Better Care Fund plans; and
3) to provide feedback on how the national team could best support local areas in 2015-16.

149 out of 150 fully completed surveys were returned. This slide pack sets out an aggregate summary of the key findings from the survey. Further information on the process, approach and the six 'domains' of integrated care can be found in Appendix 1.

Data notes:
1. *There are 151 Health and Wellbeing Boards (HWBs) in England.*
2. *1 HWB failed to submit a readiness survey, reducing the denominator to 150.*
3. *Cornwall and the Isles of Scilly have a single plan and therefore have completed a single readiness return. This has been counted once for the purposes of analysis, further reducing the denominator to 149.*
4. *1 HWB failed to answer questions 2&3, so for these questions it is down to 148.*
5. *The regional footprint used here relates to the 4 NHS England regions.*
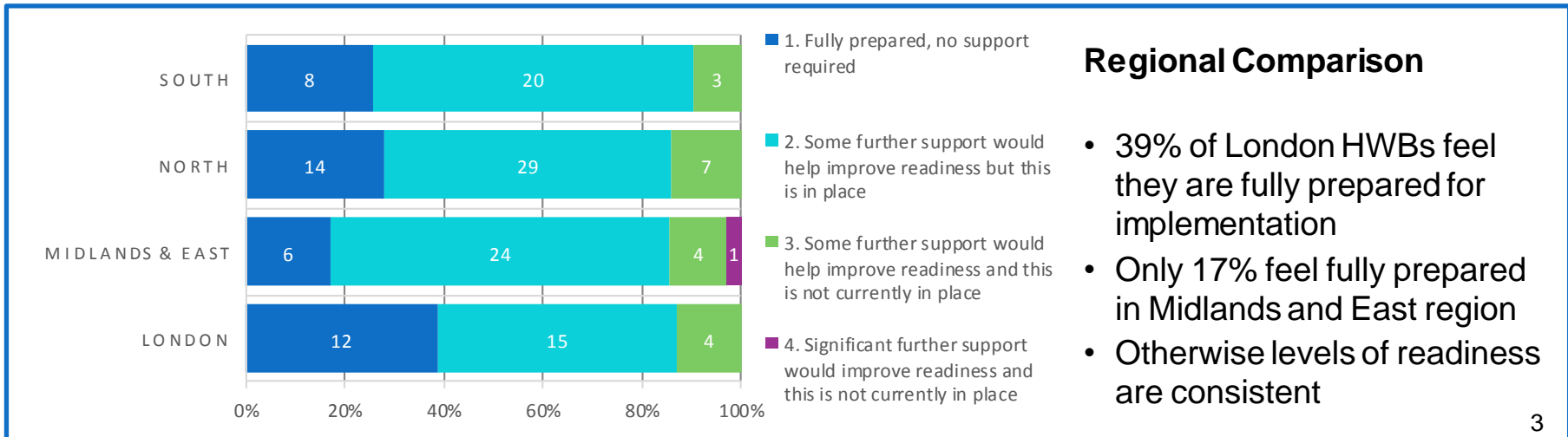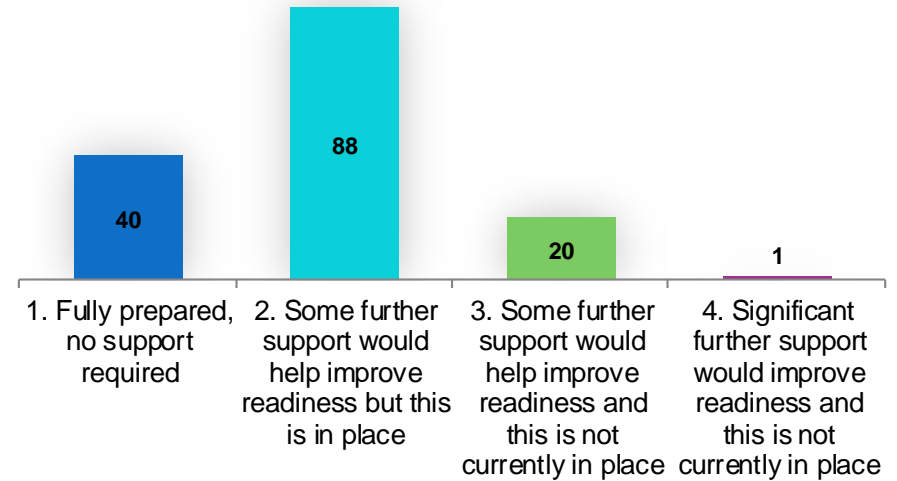
Key findings

- **Health and Wellbeing Boards are confident in their overall readiness to deliver their BCF Plans** with 87% self-assessing that they require no support for implementation or already have in place the support they need;

- **However only 27% felt 'fully ready' for implementation**, with variation between regions: 39% in London, 28% in the North, 24% in the South, and 17% in the Midlands and East.

- **Integrating Datasets and Information Systems** is the area of integration that HWBs feel least prepared to deliver in 2015-16 based on responses to question 1-7, and only 32% feel they will have this in place from 1st April and 32% citing this as the greatest challenge or barrier to successful implementation.

- **Developing Workforce and Culture to Support Collaborative Working** (21%) and **Alignment of Financial systems, Benefits and Risks** (22%) are also significant barriers.

- In total only **28 (19%) of HWBs have self-assessed themselves as requiring any support** that is not currently in place. 15 of these HWBs had previously accessed support during the second phase of the planning process from November to January.

- **The South of England is the region which assesses itself as most ready for delivery**, with a lower average score across all readiness questions, 20, compared to 21.45 in London, 22.04 in the North and 23.20 in the Midlands and East.

Overall readiness

We asked: Which statement best describes the **overall readiness** of your local system to deliver your Better Care Fund plan successfully in 2015-16?

- The vast majority (87%) of Health and Wellbeing Boards feel they either require no support for implementation or already have in place the support they need;
- 20 HWBs have assessed themselves as requiring 'some further support' that is not currently in place;
- Only 1 HWB felt they needed 'significant support'.
- **Overall only 14% of HWBs indicated that they require any additional support in readying themselves for implementation**

Bar chart values:
- 1. Fully prepared, no support required: 40
- 2. Some further support would help improve readiness but this is in place: 88
- 3. Some further support would help improve readiness and this is not currently in place: 20
- 4. Significant further support would improve readiness and this is not currently in place: 1

Regional stacked bar chart:
- SOUTH: 8 | 20 | 3
- NORTH: 14 | 29 | 7
- MIDLANDS & EAST: 6 | 24 | 4 | 1
- LONDON: 12 | 15 | 4

Legend:
- 1. Fully prepared, no support required
- 2. Some further support would help improve readiness but this is in place
- 3. Some further support would help improve readiness and this is not currently in place
- 4. Significant further support would improve readiness and this is not currently in place
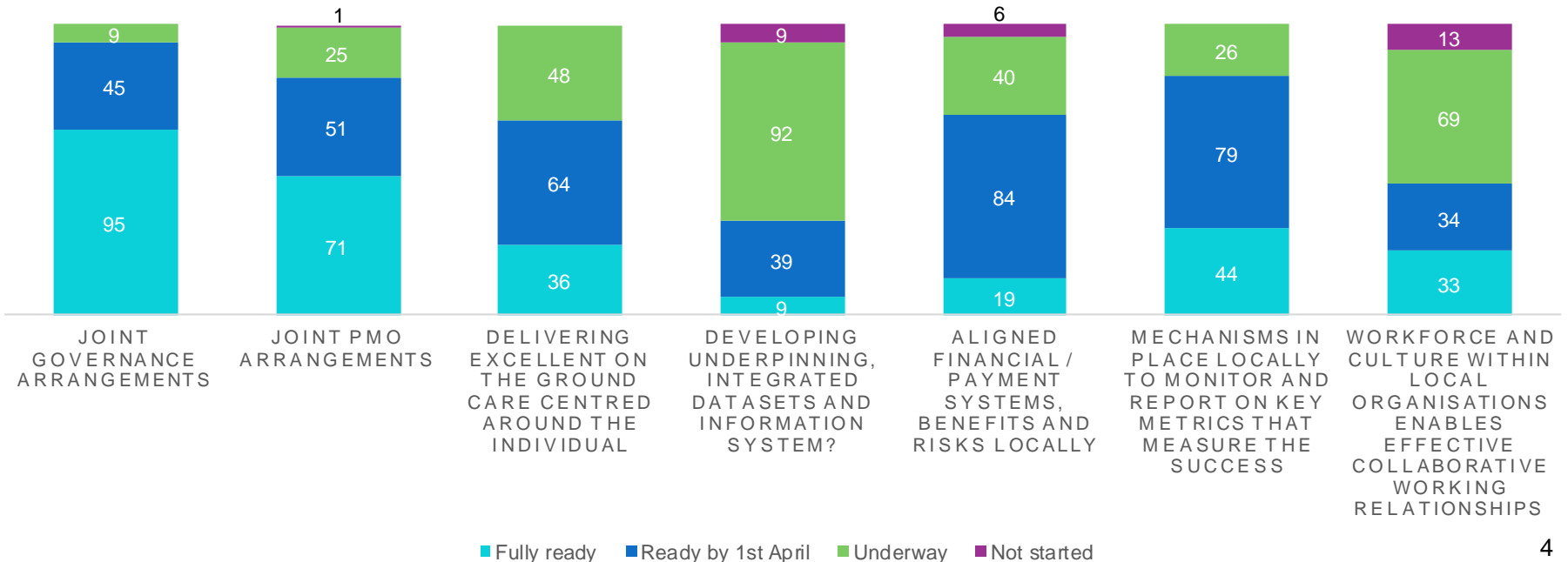
Regional Comparison

- 39% of London HWBs feel they are fully prepared for implementation
- Only 17% feel fully prepared in Midlands and East region
- Otherwise levels of readiness are consistent

3

Overview of the six domains

There is a marked difference in the level of confidence expressed against different criteria when asked about each one. The headlines are:

- HWBs were most confident that they will have Governance (94%), PMO (82%), and Reporting (83%) arrangements in place by 1st April;

- But feel least confident about Integrating Datasets and Information Systems, with only 32% HWBs confident they will have arrangements in place by 1st April, and developing Workforce and Culture to Enable Effective Collaborative Working (45%).

- Across these 2 domains 22 HWBs felt they have not yet started addressing the issue.

- In addition 6 HWBs were yet to start Aligning Financial / Payment Systems and Risks

9	1		9	6		13
45	25	48		26		69
	51	64	92	40	79	34
95	71	36	39	84	44	33
			9	19		
JOINT GOVERNANCE ARRANGEMENTS	JOINT PMO ARRANGEMENTS	DELIVERING EXCELLENT ON THE GROUND CARE CENTRED AROUND THE INDIVIDUAL	DEVELOPING UNDERPINNING, INTEGRATED DATASETS AND INFORMATION SYSTEM?	ALIGNED FINANCIAL / PAYMENT SYSTEMS, BENEFITS AND RISKS LOCALLY	MECHANISMS IN PLACE LOCALLY TO MONITOR AND REPORT ON KEY METRICS THAT MEASURE THE SUCCESS	WORKFORCE AND CULTURE WITHIN LOCAL ORGANISATIONS ENABLES EFFECTIVE COLLABORATIVE WORKING RELATIONSHIPS

■ Fully ready ■ Ready by 1st April ■ Underway ■ Not started

4

Greatest challenge / barrier

We asked: Which of the 6 domains do you see as the **greatest challenge or barrier to successful system wide implementation of your BCF plan** throughout 2015-16?

- 48 of the 149 HWBs (32%) feel that the development of integrated data sets and information systems is the single great challenge or barrier to successful BCF delivery.

- 32 (21%) cite development of organisational workforce and cultures to support joint working and 33 (22%) the alignment of financial systems, benefits and risks.

- The results of the survey clearly indicate these 3 domains as the greatest barrier across the country

6	12	47	33	6	33	11
1. Leading and managing successful Better Care Fund implementation	2. Delivering excellent on the ground care centred around the individual	3. Developing underpinning, integrated datasets and information systems	4. Aligning systems and sharing benefits and risks	5. Measuring success	6.Developing organisations to enable effective collaborative health and social care working relationships	7. Other - please use the comment box to provide details

The 13 'Other' responses identified fall into the following categories…

No barriers or challenges identified	2 HWBs
Financial pressures	3 HWBs
Workforce – recruitment and retention of the right staff within organisations	2 HWBs
Capacity to deliver the scale of required transformational change	1 HWB
"The complexity of the health and social care system is the biggest challenge"	1 HWB
Combination of domains 4 & 6	2 HWB

Scheme readiness

We asked: Which statement best describes whether your **BCF schemes** have been implemented or are ready to be implemented as planned?
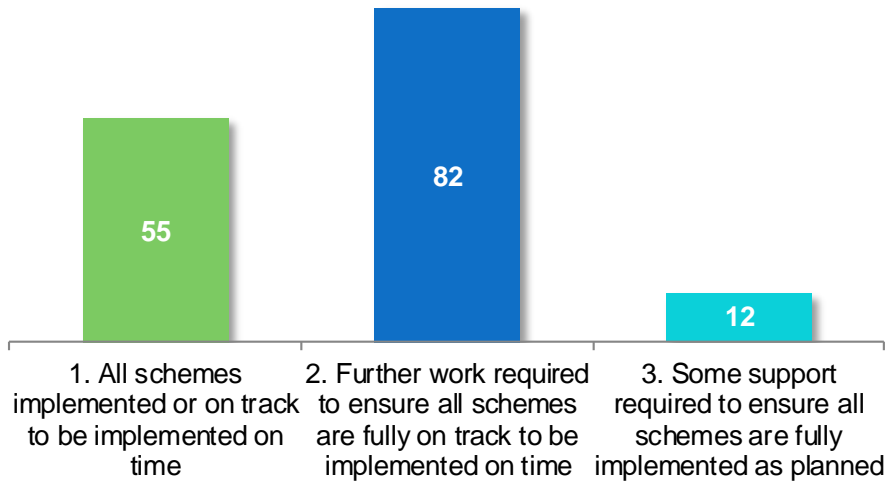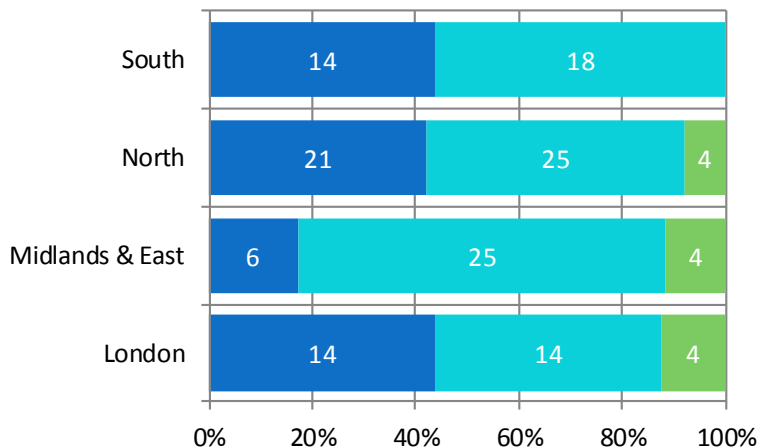

- 37% of HWBs assessed that all of their BCF schemes are on track to be implemented as planned;

- A further 55% indicated that further work is required to ensure schemes are implemented on time;

- 12 areas suggested that they will need some support to ensure that the schemes within their BCF plans are all implemented on time.

- No area felt they need significant support

Regional Comparison

- No HWBs in the South have suggested they will need support with scheme implementation

- Only 17% of HWBs in Midlands and East region felt that all schemes were on track

Appendix 1

The survey process and the 'domains'

The Better Care Fund

Process and focus

The process for conducting the self-assessment was as follows:

1. Template designed and circulated by task force to NHS England regional leads, copied to LG government regional leads for BCF;
2. NHS England Regions forward to local BCF leads (CCG and LA) who complete on behalf of HWB and return, demonstrating appropriate sign off;
3. NHS England collected responses and submitted them to the BCF Task Force on Thursday 19th March;
4. Task Force collated and carried out analysis of the results to be shared back to local areas.

Focus

- The form was designed to combine the need for responses that can be analysis nationally with room for local areas to choose from a range of possible responses that allow them to properly reflect their own position.
- To this end a range of response options is given for each question along with an opportunity to provide accompanying narrative or comments that further describe your position locally.
- There were 11 questions, 9 of which provide 4 options for a response, 1 of which provides a longer list of response options, and 1 question allows up to three options for free text responses.
- The questions are based on the 6 domains identified through the current implementation programme as supporting effective delivery of better care programmes. These have been used for consistency but have been supplemented by additional questions focused on the specific issues of governance, PMO arrangements and risk management.

Appendix – the 6 'domains'

…Lead and manage a successful Bettercare Implementation (1)

1a. Leading and managing the programme effectively (integrated governance, clarity around scope, accountabilities and progress, etc.)

1c. "Being brave"- leading the way in order to avoid failures in status quo

1b. Engaging and communicating effectively across the system around the change journey with senior leaders and key stakeholders (e.g. HWB, politicians, volunteers, and public)

1d. Understanding the key success factors in "transition planning"- moving away from an old way of working to a new one under operational pressures

…Deliver excellent on-the-ground care centred around the individual (2)

2a. Effective two-way communication with patients and carers

2b. Enacting and managing individual care plans

2c. Defining the new patient centred narrative

2d. Effective procurement and contract specification

2e. Keeping people out of hospital (falls, self care etc.)

2f. Effective integrated discharge

2g. Rehabilitation and re-ablement

2h. Building community assets

2i. Patient and public involvement

2j. Operating as a joined up system (multi-disciplinary teams, information sharing etc.)

…Develop underpinning, integrated datasets and information systems (3)

3a. Creating joined up patient level data and systems

3b. Creating common stratified population data

3c. Creating common financial performance data

…Aligning systems and sharing benefits and risks (4)

4a. Aligning financial and payment incentives with desired whole system outcomes

4b. Aligning risk sharing

4c. Aligning with providers, the wider local system, performance management organisations, regulators and national partners

…Measuring success (5)

5a. Developing effective metrics to prove success (financial, system performance, patient satisfaction)

5b. Developing evaluation criteria and feedback mechanisms

…Develop organisations to enable effective collaborative health and social care working relationships (6)

6a. Workforce development, e.g. Job descriptions, training and development

6b. Culture and other mechanisms to promote integrated working