

WOLVERHAMPTON CCG

GOVERNING BODY

12th July 2016

Agenda item 11a

Title of Report:	Grant Policy/ Funding Allocations
Report of:	Vic Middlemiss
Contact:	Vic Middlemiss
Primary Care Joint Commissioning Committee Action Required:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
Purpose of Report:	To update the Governing Body on the outcome of grant allocations to the third sector, following the second round of bidding which concluded in May 2016.
Public or Private:	This Report is intended for the public domain
Relevance to CCG Priority:	
Relevance to Board Assurance Framework (BAF):	
<ul style="list-style-type: none"> • Domain 2a: Performance – delivery of commitments and improved outcomes 	The increase of working with Third Sector organisations will support the delivery of the Better Care Programme by helping people to remain in their own home, reducing emergency attendances and admissions and supporting early discharge
<ul style="list-style-type: none"> • Domain 2b: Quality (Improved Outcomes) 	Enabling patients to have improved experience by receiving care closer to home
<ul style="list-style-type: none"> • Domain 4: Planning (Long Term and Short Term) 	Third sector investment supporting the Better Care Programme Plan for 2016/17 and beyond



1. BACKGROUND AND CURRENT SITUATION

- 1.1. Approximately 12 months ago, the CCG developed a Grant Policy specifically aimed at supporting the Third Sector and providing a mechanism for third sector organisations to bid against allocated funding. 2016 is the first year of implementation. The policy states that funding will be determined against fixed budgets and set criteria will be updated each year at the beginning of the application process. The criteria will reflect national and local CCG strategy and priorities for commissioning as well as its statutory limitations for commissioning healthcare services to support the needs of its local population.

2. MAIN BODY OF REPORT

- 2.1. In January 2016, the CCG initiated the second step in the process; that of publicising the grant fund to enable organisations to prepare bids for submission. This publication was done via the CCG website, direct advertising using an existing database as well as a specific workshop event held at the science park. Organisations were advised that the CCG would consider applications that met the following criteria:
- Application for funding up to £25,000
 - Provides a service or benefit within the CCG's geographical boundary of Wolverhampton
 - Able to demonstrate a health impact for the population
 - In line with key CCG priority areas of:
 - Right Care, Right Place, Right Time
 - Supporting Independent Living
 - Combating Social Isolation
 - Focussing on people with a Long Term Condition and/ or the Frail Elderly.
- 2.2. In this first round, 34 applications were received and four were approved. A further three exceeded the minimum threshold of 64 points and were designated as 'possible'. The evaluation panel determined that a second round should be undertaken and this was initiated in late March. A further interactive workshop was held in mid-April and like the first this was well attended. Unsuccessful applicants from the earlier round were invited to re-apply and a longer period was allocated for all applicants based on feedback received. 22 applications were received, some of which were revised from Round 1 but most of which were new.
- 2.3. The second round evaluation of the bidding process was concluded in May and a further 6 applications were approved, meaning that across both rounds a total of 10 organisations have been successful. Grant schedules (which are a form of contract agreement) have been sent out accordingly. Across the ten projects, the CCG has committed a total of £185,857. Details of the successful organisations and a summary of their projects can be found in Appendix 1.



- 2.4 In order to support the delivery of the Better Care programme and consequently to support Primary Care a number of steps were undertaken with the successful bidders of the first round and these will be replicated with the second round of bidders. The key objective is to introduce the third sector organisations to the community neighbourhood teams (CNTs) to begin to build relationships and to develop referral pathways. The model below demonstrates how the CNTs will be wrapped around the patients and Primary Care.
- 2.5 The organisations that have been awarded grants have been can be found on the CCG's Internet and Intranet sites. They will be publicised in the GP and Staff newsletters and information will be cascaded at TEAM W, GP Locality meetings and the Practice Managers Forum.
- 2.6 The organisations are initially invited to the Adult Community Care work stream meetings to present what their service can offer to support the work of the CNTs. They are then invited to attend the meetings on a regular basis so that discussions can be held about appropriate referrals and to monitor the progress of the projects and the impact upon the service user. Work is underway to co-locate the CNTs. Once the teams are co-located there will be more opportunity to integrate the third sector into the teams on a more effective basis.

3. CLINICAL VIEW

- 3.1. The senior nurses within the teams will ensure that patients are appropriately referred into the services. GPs are also able to refer directly into services.

4. PATIENT AND PUBLIC VIEW

- 4.1. Patient feedback and evaluation will be built into the monitoring of the services.

5. RISKS AND IMPLICATIONS

Key Risks

- 5.1. There are risks that the services do not receive enough referrals to make their services effective.
- 5.2. There are risks that some of the services only address a very small cohort of patients and therefore it may be difficult for GPs to determine which patients meet the referral criteria.

Financial and Resource Implications

- 5.3. Financial Implications are covered by the CCG Grant Policy Framework



Quality and Safety Implications

- 5.4. The quality and safety of the services will be managed via the management of the Grant Schedule and via the evaluation process.

Equality Implications

- 5.5. Equality Impact Assessments have not been undertaken for these grant awards.

Medicines Management Implications

- 5.6. There are no medicines management implications.

Legal and Policy Implications

- 5.7. Any legal implications are managed through the CCG Grant Policy Framework and the contract management of the service.

6. RECOMMENDATIONS

- 6.1. It is recommended that the Governing Body receives and discusses this report.

Name: Vic Middlemiss
Job Title: Head of Contracting and Procurement
Date: 29th June 2016

ATTACHED:

(Attached items: Appendix 1 - Summary of grant allocations)

RELEVANT BACKGROUND PAPERS

CCG Grant Funding Policy



REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View	N/A	
Public/ Patient View	Pat Roberts	29.06.16
Finance Implications discussed with Finance Team	Andrea Hadley	29.06.16
Quality Implications discussed with Quality and Risk Team	Sarah Southall	29.06.16
Medicines Management Implications discussed with Medicines Management team	N/A	
Equality Implications discussed with CSU Equality and Inclusion Service	N/A	
Information Governance implications discussed with IG Support Officer	N/A	
Legal/ Policy implications discussed with Corporate Operations Manager	N/A	
Signed off by Report Owner (Must be completed)		

