## Discharge fund 2022-23 Funding Template

2. Cover





Version 1.0.0

Please Note:

- You are reminded that much of the data in this template, to which you have privileged access, is management information only and is not in the public domain. It is not to be shared more widely than is necessary to complete the return.

- Please prevent inappropriate use by treating this information as restricted, refrain from passing information on to others and use it only for the purposes for which it is provided. Any accidental or wrongful release should be reported immediately and may lead to an inquiry. Wrongful release includes indications of the content, including such descriptions as "favourable" or "unfavourable".

- This template has been produced for areas to confirm how the additional funding to support discharge from hospital and bolster the social care workforce will be spent in each area. The government has also produced guidance on the conditions attached tothis funding, that you should ensure has been followed.

- This template collects detailed data on how the funding allocated to each area will be spent. The portion of the funding that is allocated via Integrated Care Boards (ICBs) does not have a centrally set distribution to individual HWBs. ICBs should agree with local authority partners how this funding will be distributed and confirm this distribution in a separate template. The amount pooled into the BCF plan for this HWB from each ICB should also be entered in the expenditure worksheet of this template (cell N31) (The use of all funding should be agreed in each HWB area between health and social care partners.

| Health and Wellbeing Board: | Barking and Dagenham           |
|-----------------------------|--------------------------------|
| Completed by:               | Louise Hider-Davies            |
|                             |                                |
| E-mail:                     | louise.hiderdavies@lbbd.gov.uk |
| Contact number:             | 020 8057 5553                  |

Please confirm that the planned use of the funding has been agreed between the local authority and the ICB and indicate who is signing off the plan for submission on behalf of the HWB (delegated authority is also accepted):

| Confirm that use of the funding has been agreed (Yes/No) | Yes                                     |
|--|---|
| Job Title:   | Chair of the Health and Wellbeing Board |
| Name:  | Councillor Maureen Worby                |

### If the following contacts have changed since your main BCF plan was submitted, please update the details.

|  |  | Professional    |             |          |                                       |
|--|--|-----------------|-------------|----------|---------------------------------------|
|  |  | Title (e.g. Dr, |             |          |                                       |
|  | Role:  | Cllr, Prof)     | First-name: | Surname: | E-mail:                               |
| *Area Assurance Contact Details:                                       | Health and Wellbeing Board Chair   | Councillor      | Maureen     | Worby    | <u>maureen.worby@lbbd.gov</u><br>.uk  |
|  | Integrated Care Board Chief Executive or person to whom they have delegated sign-off |                 | Charlotte   | Pomery   | charlotte.pomery@nhs.net              |
|  | Local Authority Chief Executive  |                 | Fiona       | Taylor   | fiona.taylor@lbbd.gov.uk              |
|  | LA Section 151 Officer   |                 | Philip      | Gregory  | philip.gregory@lbbd.gov.u<br><u>k</u> |
| Please add further area contacts<br>that you would wish to be included |  |                 |             |          |                                       |
| in official correspondence e.g.  |  |                 |             |          |                                       |
| housing or trusts that have been<br>part of the process>               |  |                 |             |          |                                       |

When all yellow sections have been completed, please send the template to the Better Care Fund Team <u>england.bettercarefundteam@nhs.net</u> saving the file as 'Name HWB' for example 'County Durham HWB'. Please also copy in your Better Care Manager.

# See next sheet for Scheme Type (and Sub Type) descriptions

Discharge fund 2022-23 Funding Template 5. Expenditure

Selected Health and Wellbeing Board:

Barking and Dagenham

Source of funding LA allocation

Yellow sections indicate required input

| Scheme<br>ID | Scheme Name                                     | Brief Description of Scheme<br>(including impact on<br>reducing delayed<br>discharges). | Scheme Type   | Sub Types  | Please specify if<br>'Scheme Type' is<br>'Other' | Estimated<br>number of<br>packages/benefic<br>iaries | Setting | Spend Area  | Commissioner         | Source of Funding        | Planned<br>Expenditure<br>(£) |
|--------------|---|---|---|--|--|--|---------|-------------|----------------------|--------------------------|-------------------------------|
| 1            | Hospital<br>discharge,<br>planning and          | Administrative resource   | Administration  | <please select=""></please>                          |  |  |         | Social Care | Barking and Dagenham | Local authority<br>grant | £15,504                       |
| 2            | Hospital<br>discharge,<br>planning and          | Commissioning project<br>management to support<br>initiatives outlined                  | Additional or redeployed<br>capacity from current care<br>workers | Redeploy other local authority staff                 |  |  | Both    | Social Care | Barking and Dagenham | Local authority<br>grant | £70,000                       |
| 3            | Hospital<br>discharge,<br>planning and          | Support for complex<br>homelessness discharge<br>cases                                  | Reablement in a Person's Own<br>Home                              | Other  | Accommodation<br>and placement<br>support for    | 12   |         | Social Care | Barking and Dagenham | Local authority<br>grant | £72,000                       |
| 4            | Hospital<br>discharge,<br>planning and          | Consultant Social Work<br>capacity to support complex<br>discharge for people with      | Additional or redeployed<br>capacity from current care<br>workers | Redeploy other local<br>authority staff              |  |  | Both    | Social Care | Barking and Dagenham | Local authority<br>grant | £25,000                       |
| 5            | Market<br>stabilisation and<br>workforce issues | Care Provider Voice support<br>around workforce<br>recruitment, retention and           | Local recruitment initiatives                                     |  |  |  | Both    | Social Care | Barking and Dagenham | Local authority<br>grant | £70,000                       |
| 6            | Market<br>stabilisation and<br>workforce issues | Provider payments to<br>incentivise workforce<br>recruitment and retention              | Improve retention of existing workforce                           | Incentive payments                                   |  |  | Both    | Social Care | Barking and Dagenham | Local authority<br>grant | £240,000                      |
| 7            | Targeted out of hospital care                   | Unfunded homecare and<br>crisis intervention packages<br>to support discharge (single   | Home Care or Domiciliary Care                                     | Domiciliary care<br>packages                         |  | 70   |         | Social Care | Barking and Dagenham | Local authority<br>grant | £268,380                      |
| 8            | Targeted out of hospital care                   | Unfunded residential,<br>nursing and mental health<br>placements to support             | Residential Placements  | Care home  |  | 25   |         | Social Care | Barking and Dagenham | ICB allocation           | £404,709                      |
| 9            | Targeted out of hospital care                   | Reablement pilot as bolt on<br>to Home First discharges                                 | Reablement in a Person's Own<br>Home                              | Reablement to<br>support to discharge –<br>step down | -  | 80   |         | Social Care | Barking and Dagenham | ICB allocation           | £309,852                      |

|   |                           | Amount pooled                             | Planned spend |
|---|---------------------------|---|---------------|
| ı |                           | £760,884                                  | £760,884      |
|   | NHS North East London ICB | £789,561                                  |               |
| n |                           | Please enter<br>amount pooled<br>from ICB |               |
|   |                           | Please enter<br>amount pooled<br>from ICB |               |

| 10 | Hospital     | Agency support to open up | Additional or redeployed   | Costs of agency staff | 7 | Residential care | Social Care | Barking and Dagenham | ICB allocation | £75,000 |
|----|--------------|---------------------------|----------------------------|-----------------------|---|------------------|-------------|----------------------|----------------|---------|
|    | discharge,   | residential care beds     | capacity from current care |                       |   |                  |             |                      |                |         |
|    | planning and |                           | workers                    |                       |   |                  |             |                      |                |         |

### Scheme types and guidance

### This guidance should be read alongside the addendum to the 2022-23 BCF Policy Framework and Planning Requirements.

The scheme types below are based on the BCF scheme types in main BCF plans, but have been amended to reflect the scope of the funding. Additional scheme types have been added that relate to activity to retain or recruit social care workforce. The most appropriate description should be chosen for each scheme. There is an option to select 'other' as a main scheme type. That option should <u>only</u> be used when none of the specific categories are appropriate.

The conditions for use of the funding (as set out in the addendum to the 2022-23 BCF Policy Framework and Planning Requirements) confirm expectations for use of this funding. Funding should be pooled into local BCF agreements as an addition to existing section 75 arrangements. Local areas should ensure that there is agreement between ICBs and local government on the planned spend.

The relevant Area of Spend (Social Care/Primary Care/Community Health/Mental Health/Acute Care) should be selected

The expenditure sheet can be used to indicate whether spending is commissioned by the local authority or the ICB.

This funding is being allocated via:

- a grant to local government (40% of the fund)
- an allocation to ICBs (60% of the fund)

Both elements of funding should be pooled into local BCF section 75 agreements.

Once the HWB is selected on the cover sheet, the local authority allocation will pre populate on the expenditure sheet. The names of all ICBs that contribute to the HWB's BCF pool will also appear on the expenditure sheet. The amount that each ICB will pool into each HWB's BCF must be specified. ICBs are required to submit a separate template that confirms the distribution of the funding across HWBs in their system. (Template to be circulated separately).

When completing the expenditure plan, the two elements of funding that is being used for each line of spend, should be selected. The funding will be paid in two tranches, with the second tranche dependent on an area submitting a spending plan 4 weeks after allocation of funding. The plan should cover expected use of both tranches of funding. Further reporting is also expected, and this should detail the actual spend over the duration of the fund. (An amended reporting template for fortnightly basis and end of year reporting, will be circulated separately)

| Local areas may use up to 1% of their total allocati | on (LA and ICB) for reasonable administrative costs asso | ciated with distributing and reporting on this funding. |
|--|--|---|
|--|--|---|

For the scheme types listed below, the number of people that will benefit from the increased capacity should be indicated - for example where additional domiciliary care is being purchased with part of the funding, it should be indicated how many more packages of care are expected to be purchased with this funding.

Assistive Technologies and Equipment Home Care or Domiciliary Care Bed Based Intermediate Care Services Reablement in a Person's Own Home Residential Placements

| Scheme types/services                | Sub type                     | Notes             |
|--------------------------------------|------------------------------|-------------------|
| Assistive Technologies and Equipment | 1. Telecare                  | You should inclu  |
|                                      | 2. Community based equipment | beneficiaries for |
|                                      | 3. Other                     | category          |

|                           | home care? |
|---------------------------|------------|
| ude an expected number of |            |
| r expenditure under this  |            |
|                           | Y          |

| Home Care or Domiciliary Care                               | 1. Domiciliary care packages                                   |   |                             |
|---|--|---|-----------------------------|
|   | 2. Domiciliary care to support hospital discharge              | You should include an expected number of  |                             |
|   | 3. Domiciliary care workforce development                      | beneficiaries for expenditure under this  |                             |
|   | 4. Other   | category  | Y                           |
| Bed Based Intermediate Care Services                        | 1. Step down (discharge to assess pathway 2)                   |   |                             |
|   | 2. Other   | You should include an expected number of  |                             |
|   |  | beneficiaries for expenditure under this  |                             |
|   |  | category  | Ν                           |
| Reablement in a Person's Own Home                           |  |   |                             |
|   | 1. Reablement to support to discharge – step down              |   |                             |
|   | 2. Reablement service accepting community and discharge        | You should include an expected number of  |                             |
|   | 3. Other   | beneficiaries for expenditure under this  |                             |
|   |  | category  | Y                           |
| Residential Placements                                      | 1. Care home   |   |                             |
|   | 2. Nursing home  | You should include an expected number of  |                             |
|   | 3. Discharge from hospital (with reablement) to long term care | beneficiaries for expenditure under this  |                             |
|   | 4. Other   | category  | Ν                           |
|   | 1. Childcare costs   |   |                             |
| Increase hours worked by existing workforce                 |  |   |                             |
| increase nours worked by existing workforce                 | 2. Overtime for existing staff.                                | You should indicate whether spend for this  |                             |
|   |  | category is supporting the workforce in:  |                             |
|   |  | - Home care   |                             |
|   |  | - Residential care  | Area to indicate            |
|   |  | - Both  | setting                     |
| Improve retention of existing workforce                     | 1. Retention bonuses for existing care staff                   | You should indicate whether spend for this  |                             |
|   | 2. Incentive payments  | category is supporting the workforce in:  |                             |
|   | 3. Wellbeing measures  | - Home care   |                             |
|   |  | - Residential care  | Area to indicate            |
|   | 4. Bringing forward planned pay increases                      | - Both  | setting                     |
| Additional or redeployed capacity from current care workers | 1. Costs of agency staff                                       |   |                             |
|   |  |   |                             |
|   | 2. Local staff banks   | You should indicate whether spend for this  |                             |
|   |  | category is supporting the workforce in:  |                             |
|   | 3. Redeploy other local authority staff                        | - Home care   |                             |
|   |  | - Residential care  | Area to indicate            |
|   |  | - Both  | setting                     |
|   |  |   | setting                     |
|   |  |   |                             |
|   |  | Iyou should indicate whether spend for this   |                             |
|   |  | You should indicate whether spend for this category is supporting the workforce in:     |                             |
|   |  | category is supporting the workforce in:  |                             |
|   |  | category is supporting the workforce in:<br>- Home care                                 | Area to indicate            |
| Local recruitment initiatives                               |  | category is supporting the workforce in:  | Area to indicate<br>setting |
| Local recruitment initiatives                               |  | category is supporting the workforce in:<br>- Home care<br>- Residential care<br>- Both | Area to indicate<br>setting |
| Local recruitment initiatives                               |  | category is supporting the workforce in:<br>- Home care<br>- Residential care           |                             |

|                | Areas can use up to 1% of their spend to    |    |
|----------------|---|----|
|                | cover the costs of administering this       |    |
|                | funding. This must reflect actual costs and |    |
|                | be no more than 1% of the total amount      |    |
| Administration | that is pooled in each HWB area             | NA |