

HEALTH AND WELLBEING BOARD

13 September 2022

Title:	Better Care Fund 22/23
Report of the Strategic Director, Children's and Adults	
Open Report	For Decision
Wards Affected: All	Key Decision: Yes
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Sponsor: Elaine Allegretti, Strategic Director, Children's and Adults	
Summary: <p>The Better Care Fund (BCF) provides financial support for councils and NHS organisations to jointly plan and deliver local services. Every year the local authority and the CCG (now ICB) are required to submit a template and/or narrative to NHS England to set out how the BCF is delivered in Barking and Dagenham. This year we were given 8 weeks to produce the template and narrative, alongside partners in LBH, LBR and the ICB, showing how the plan meets the metrics and requirements of the BCF. The plan requires formal ratification by the Health and Wellbeing Board before submission to NHS England on 26 September.</p>	
Recommendation(s) <p>The Health and Wellbeing Board is recommended to:</p> <ol style="list-style-type: none">1. Agree the Better Care Fund submission to NHS England	
Reason(s) <p>The Better Care Fund enables the local authority and NHS organisations to jointly plan and deliver local services to support Barking and Dagenham residents. The BCF funds projects and services that are delivered by stakeholders from across the system, designed to improve health and social care outcomes, prevent re-admission to hospital, maintain and improve independence and support hospital discharge. The BCF works to deliver the Council's vision and priorities.</p>	

1. Introduction and Background

- 1.1 The Better Care Fund (BCF) provides financial support for councils and NHS organisations to jointly plan and deliver local services. It brings together ring-fenced budgets from Integrated Care Board (ICB) allocations, and funding paid

directly to local government, including the Disabled Facilities Grant (DFG), the improved Better Care Fund (iBCF) and the Winter Pressures grant.

1.2 In summary, this encompasses:

1) Minimum ICB (Min ICB):

- ICB funding including s256 proportion to LAs to support out-of-hospital services such as Reablement funding to maintain reablement capacity in LAs, community health services, independent/voluntary sectors
- Care Act monies to support the implementation of the Care Act 2014
- Carers' Break funding so carers can have a break

2) Disabled Facilities Grant (DFG) paid directly to LAs: for home adaptations and technologies to support people to live independently at home

3) Winter Pressures (WP): support the local health and care system to manage demand pressures including interventions that support people to be discharged from hospital, with the appropriate social care support in place, and promote people's independence.

4) Improved Better Care Fund (iBCF) paid directly to LAs for Social Care Funding:

- Meeting adult social care needs
- Reducing pressures on the NHS, including seasonal winter pressures
- Supporting more people to be discharged from hospital when they are ready
- Ensuring that the social care provider market is supported.

1.3 We have a Section 75 that governs the arrangement between us and NHS North East London. An executive group steers the development of the BCF and in terms of governance, this group feeds up into the Joint Commissioning Board (JCB). This arrangement will be reviewed as the Place Based Partnerships in each area develop over the coming year.

Preparation for BCF 22/23

1.4 Last year colleagues across BHR wrote a new joint plan with a set of new overarching schemes to meet changing guidance, metrics, terminology and the ongoing impact and recovery from the pandemic. It was agreed that due to the lack of time provided to submit the BCF plan and the developing agendas of the Place Based Partnerships and workstreams, we would update the last joint plan to be focused on 'Place' and to meet the conditions for 22/23 and look at whether we wish to disaggregate the plan to a Barking and Dagenham level over the coming year.

1.5 As a reminder, the four overarching schemes that were designed last year were as follows:

- i) **Hospital Discharge Planning & Support:** Ensuring effective discharge & increasing patient independence
- ii) **Targeted Out-of-Hospital Care:** Supporting people with higher care needs in the community
- iii) **Community Wellbeing, Care & Support:** Prevention & early intervention for low level care & support needs.
- iv) **Integration, market stabilisation and Covid recovery:** Strategic joint working to support integration and borough partnerships; essential market and provider support to ensure services are available; reducing the risk of provider failure and to minimise the impact of recent effects of the COVID 19 pandemic and beyond.

2. Proposal and Issues

- 1.6 Guidance for this year's BCF was released at the end of July (four months into the year's spend) and a planning template and narrative is required by the regional and national team for submission by 26 September. The policy framework/planning guidance can be found here: <https://www.gov.uk/government/publications/better-care-fund-policy-framework-2022-to-2023/2022-to-2023-better-care-fund-policy-framework>
- 1.7 Attached at Appendix 1 and Appendix 2 is our BCF narrative, produced by the three BHR Boroughs and the ICB, as well as our Borough-based financial and metrics template.
- 1.8 The requirements echo previous years and conditions are as follows:
- A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board.
 - NHS contribution to adult social care to be maintained in line with the uplift to the ICB minimum contribution.
 - Invest in NHS commissioned out-of-hospital services.
 - Plan for improving outcomes for people being discharged from hospital.
 - Plans must have involvement from providers, VCS and housing colleagues.
- 2.4 The Adults Workstream of the Place-Based Partnership will take the lead for the development of the Better Care Fund. Discussions will take place through this workstream as to the future use of the BCF at a Place level, governance, the format of submissions and how funding decisions are made against local priorities, national requirements and other available funding streams. Further discussion will also be required to determine the consistency of approach and offer across NEL Boroughs, and whether joint commissioning approaches continue across BHR.

What's changed since previous years?

- 1.9 **Carers focus:** To support the government's commitments on empowering unpaid carers, as set out in the People at the Heart of Care White Paper, local areas have

been asked to provide a brief overview of how BCF funding available in their locality is being used to support unpaid carers. We have included this in the attached and have made particular reference to our Borough and partnership-wide Carers Charter.

- 1.10 **Capacity and demand plans:** Within this year's BCF, NHS England are particularly keen to see how reablement and rehabilitation services are being delivered to support people to remain at home, or return home following an episode of inpatient hospital care. For the BCF in 2022-23, systems are required to agree high level capacity and demand plans for intermediate care services. Plans should cover demand for both services to support people to stay at home (including admissions avoidance) and hospital discharge pathways 0–3 inclusive, or equivalent, for quarters 3 and 4 of 2022-23 across health and social care. The plan is not assured by the NHS England team and is attached at Appendix 3.
- 1.11 **Two new policy objectives:** NHS England have asked for areas to ensure that their narratives particularly focus on the two objectives of:
- Enable people to stay well, safe and independent at home for longer
 - Provide the right care in the right place at the right time
- 1.12 For both objectives, areas have been asked to describe their approach to integrating care to deliver better outcomes, including how collaborative commissioning will support this and how primary, intermediate, community and social care services are being delivered to support people to remain at home, or return home following an episode of inpatient hospital care. The attached narrative focuses on these two policy objectives.
- 1.13 **Metrics:** Metrics have remained the same as last year, apart from the removal of a metric measuring length of stay. Metrics are therefore as follows:
- Proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation (effectiveness of reablement)
 - Older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population (admissions to residential care homes)
 - Unplanned hospitalisation for chronic ambulatory care sensitive conditions (avoidable admissions to hospital)
 - Improving the proportion of people discharged home, based on data on discharge to their usual place of residence (discharge to usual place of residence).
- 1.14 **5.66% increase in ICB minimum contribution:** The ICB's minimum contribution to social care has increased by 5.66% since last year (in line with previous years). We will be reviewing how this increase will be spent and we are looking to use it innovatively and in line with the developing Adults workstream that forms part of the Place Based Partnership.

Financial summary

1.15 The below table is a summary of the pooled budget that will make up the BCF in 22/23. The DFG, iBCF and Winter Pressures Grant are all directly given to the local authority.

1.16 It should be noted that, as in previous years, all BCF money is allocated for 22/23 against schemes and activities apart from the 5.66% increase which will be discussed through the Adults workstream of the Place Based Partnership. Any changes in spend in future years would require early planning and engagement with all partners to enable changes to be made as a large majority of spend pays for packages, placements, services and teams that support the delivery of the national conditions/metrics.

Funding Sources	Income
DFG	£1,856,901
Minimum ICB Contribution	£17,452,259
iBCF	£10,707,003
Additional LA Contribution	£0
Additional ICB Contribution	£227,527
Total	£30,243,690

1.17 To provide some context to the above and the financial template in Appendix 2, the below list outlines the key areas that are funded by the Better Care Fund:

- Community Health Services
- Locality multi-disciplinary and integrated case management teams across the community, integrated care and mental health
- The Integrated Discharge Hub that coordinates hospital discharge and the Community Health and Assessment Team (CHAT) of social workers within the local authority that supports discharge and assessment
- The British Red Cross Home, Settle and Support Service
- Home First discharge process to facilitate same day and next day discharge
- Ageing Well urgent care and 2 hour response bridging services
- Packages and placements within extra care, domiciliary care, supported living, residential and nursing care
- Crisis intervention packages for the first six weeks of an individual leaving hospital
- Commissioning and safeguarding resource and systems
- Care Act implementation support
- Mental health and learning disabilities supported employment
- Admiral nurses
- Carers services
- Support for the Personal Assistant market

- Falls prevention
- End of life care
- Equipment, adaptations and care technology
- Social isolation support – in development with the voluntary sector
- Support to stabilise the market and respond to demand

Next Steps

- 1.18 Once the Board has approved the submission, the authority will be provided to NHS England colleagues. The narrative and template will go through a scrutiny process and we will be hoping to receive assurance in November as per the table below. Once the BCF is approved, the Section 75 arrangement will be updated.

Activity	Date
Submission	26 September
Scrutiny of BCF plans by regional assurers, assurance panel meetings, and regional moderation	26 September – 24 October
Approval letters issued giving formal permission to spend (ICB minimum)	30 November
All Section 75 agreements to be signed and in place	By 31 December

3 Consultation

- 3.1 As stated in the narrative at Appendix 1, stakeholders, providers and residents are engaged in the BCF development and delivery throughout the year. The planning group for the Place Based Partnership have been consulted and their comments have been included in the above report. Additionally, the ICB Sub-Committee will be presented with the BCF Plan on 29 September. Charlotte Pommery has signed the Plan off on behalf of the ICB.

4 Implications

4.1 Financial Implications

Implications completed by Murad Khan, Finance Manager (Care & Support)

BCF is integral to funding the Adult Social Care Budget. This funding needs to be retained and utilised. If this funding were to be lost there would be a significant gap in the Council's finances that would result in deeper cuts. In addition, there would be significant detriment to the outcomes for service users and partnership working.

4.2 Legal Implications

Implications completed by: Kayleigh Eaton, Principal Contracts and Procurement Solicitor, Law & Governance

This report sets out an update on the Better Care Fund for the year 2022-2023. The Better Care Fund encourages the integration of health and social care systems locally to support person centred care by requiring the ICB and local authorities to enter into pooled budget arrangements and agree an integrated spending plan. Local Authorities and the ICB formalise these arrangements under a section 75 Agreement as provided for under the NHS Act 2006.

This report states that once the Council has approved the arrangements there will be an update to the existing section 75 agreement between LBBD, Havering, Redbridge and the ICB.

The Legal team will be on hand to assist with these updates to the agreement, where required.

4.6 Risk Management

The sign off of the BCF must be undertaken by the Health and Wellbeing Board otherwise NHS England will not assure our BCF narrative and plan.

Public Background Papers Used in the Preparation of the Report:

None

List of Appendices:

Appendix 1 - Better Care Fund BHR Narrative

Appendix 2 - Better Care Fund Barking and Dagenham Funding and Metrics Template

Appendix 3 Capacity and Demand Plan