

# KEY POINTS BCF PLANNING GUIDANCE JULY 2017

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# National Conditions

## Jointly Agreed Plan

- Agreement by Local Health & Wellbeing Board
- Evidence of involvement of other stakeholders
- Meets all minimum funding requirements, including CCG minimum contributions/uplifts
- Agreement on use of IBCF allocation, per grant conditions.
- Agreement on use of DFG funding.

## Social care maintenance

- Applies to the minimum contribution from CCGs into the BCF, based on 2016-17 baseline , with inflation uplift applied for 2017-18 and 2018-19.
- BCF Planning Template will be pre-populated with contribution figures – any validation issues to be raised by 31/7/2017.
- Local areas can agree higher contributions if so wish.

# National Conditions (cont)

## NHS Commissioned Out of Hospital Services

- Ring-fenced amount for use on NHS commissioned out of hospital services.
- This applies to the CCG minimum contribution and covers any NHS commissioned service that is not acute care – can include non NHS providers, including social care.
- Areas are expected to place a financial contingency in the BCF plan against this national condition, if the BCF Non-Elective Admissions (NEA) target is above the CCG operational plan target (this is not the case in Leicestershire)

## Managing Transfers of Care

- All local areas must implement the high impact change model for managing and improving delayed transfers of care – see later slides.
- This is also a condition of the IBCF grant
- Plans for Delayed Transfers of Care (DTOC) improvement to be jointly agreed and funded.
- Discussions about local plans and priorities for DTOC improvement should involve NHS trusts.

# Four BCF Metrics

Metric	Collection Method	Data Required
<b>Non-elective admissions (General and Acute)</b>	<ul style="list-style-type: none"> <li>Collected nationally through UNIFY at CCG level</li> <li>HWB level figures confirmed through BCF Planning Return</li> </ul>	Quarterly HWB level activity plan figures for 2017-18, mapped directly from CCG operating plan figures, against the original 2014-15 baseline and 2015-16 metrics
<b>Admissions to residential and care homes</b>	<ul style="list-style-type: none"> <li>Collected through nationally developed high level BCF Planning Return</li> </ul>	Annual metric for 2017-18 and 2018-19
<b>Effectiveness of reablement</b>	<ul style="list-style-type: none"> <li>Collected through nationally developed high level BCF Planning Return</li> </ul>	Annual metric for 2017-18
<b>Delayed transfers of care</b>	<ul style="list-style-type: none"> <li>Collected nationally through UNIFY at CCG level</li> <li>HWB level figures confirmed through BCF Planning Return</li> </ul>	Quarterly metric for 2017-18. Each HWB area must submit their agreed DTOC metrics by 21 July 2017 alongside their first quarterly return for IBCF spending.

# IMPROVING DELAYED TRANSFERS OF CARE

- BCF plans must show how the national 8 high impact changes for improving transfers of care are being delivered locally. These are:
  - Early discharge planning
  - Monitoring patient flow
  - Discharge to assess
  - Trusted assessors
  - Multi-disciplinary discharge support
  - Seven day services
  - Focus on choice (early engagement with patients and their families/carers)
  - Enhancing health in care homes.
- Across LLR a self assessment has been undertaken against these 8 elements.
- The local improvement plan focuses on remaining gaps against these elements.
- The LLR Discharge Working Group in place to coordinate and oversee the action plan, but each organisation must ensure their component(s) of the action plan are being delivered.
- A new integrated LLR dashboard for monitoring DTOC performance is being roadtested with effect from July 2017.



# DTOC TARGETS

- The BCF Planning Guidance
  - Requires each HWB Board area to set a planned reduction in the rate of DTOC for **both** NHS and social care delays.
  - Requires each area to submit their draft DTOC targets by 21 July.
  - States the government will review progress in November 2017, and will consider changes to IBCF allocations for poorly performing areas.
  - The CQC will be involved in inspecting 12 local areas (already identified) as poorly performing in the first tranche of this process (none of these are in LLR)
  - A further 8 inspections of local areas are planned between February and April (which may include some high performing areas).
- A template has since been issued for each local area to complete which includes pre populated improvement rates, based on local DTOC performance as at February 2017 and national thresholds for improvement, with expectation of improvement by September 2017.
- The LGA has formally objected to these late changes in the BCF planning guidance and issued a statement and FAQs about their position.

<https://www.local.gov.uk/sites/default/files/documents/Better%20Care%20Fund%20July%20Guidance%20-%20FAQs%202017.pdf>



# Financial Planning – Key Issues

- The BCF financial plan is more complex than last year:
  - The additional IBCF allocations for adult social care have increased the financial envelope of the local BCF plan to £52m in 2017/18 (previously £40m).
  - Expectation that the new IBCF ASC allocation will be committed in full in 2017/18, with quarterly reporting to DCLG commencing in July.
  - Increasing financial pressures on all partners, with a £1m cost improvement plan within the BCF as a result of this.
  - Late publication of BCF technical guidance (and the pre populated financial planning template) for 2017/18 – 2018/19.
  - Lack of clarity on implied financial risks if there is poor DTOC performance from November 2017.
  - ASC departmental services, financial plans, and transformation programme place reliance on BCF/IBCF allocations.
  - LLR-wide STP programmes and financial plans place reliance on BCF/IBCF allocations.
  - Ongoing system risks such as high levels of emergency admissions, increasing demand on health and care overall, due to population demography of LLR etc.



# National BCF Assurance Timeline

