

## HEALTH AND WELLBEING BOARD: 28 JANUARY 2021

### REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

#### BETTER CARE FUND PLAN 2020/21

##### Purpose of report

1. The purpose of this report is to seek approval from the Health and Wellbeing Board for the Leicestershire Better Care Fund (BCF) Plan for 2020/21 due to be submitted to NHS England before the end of the financial year and confirm the associated Expenditure

##### Recommendation

2. It is recommended that:
  - a) The BCF Plan, including the associated expenditure, for 2020/21 for submission to NHS England be approved;
  - b) That should there be any further changes to guidance or funding allocations which require minor amendments to the BCF Plan, the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing Board, be authorised to finalise the BCF Plan and submit to NHS England.
  - c) It be noted that the NHS Policy Statement did not set national metrics for 2020-21;

##### Policy Framework and Previous Decisions

3. The BCF Policy Framework was introduced by the Government in 2014, with the first year of BCF plan delivery being 2015/16. The Cabinet in February 2014 authorised the Health and Wellbeing Board to approve the BCF Plan and plans arising from its use.
4. The Health and Wellbeing Board approved the BCF Plan for 2019/20 at its meeting on 26 September 2019.
5. Due to the cancellation of several meetings of the Board as a result of the Coronavirus pandemic, members were provided with a report concerning the BCF Plan for 2020/21 outside of the formal meeting process, which sought support for the interim BCF Expenditure Plan.
6. Those who responded supported the plans and therefore the Chief Executive of the County Council, under delegated powers, approved the interim Expenditure Plan. The Plan was subsequently approved by East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG) and West Leicestershire (WL CCG) Boards in April.

7. Submission to the Health and Wellbeing Board has been on hold pending publication of the BCF Policy Framework for 2020-21.
8. The Better Care Fund Policy Statement for 2020-21 now confirms that:
  - a) Systems will not be required to submit plans for assurance in 2020-21.
  - b) Areas must ensure that the use of money in their area meets the national conditions.
  - c) The funding is placed in a section 75 agreement with appropriate governance.
9. The statement also confirmed the different funding elements for the Better Care Fund in 2021-22 following the Spending Review. The improved Better Care Fund grant (iBCF) will continue in 2021-22, maintained at its current level. The CCG contribution will again increase by 5.3% in line with the NHS Long Term Plan settlement. The Policy Framework and Planning Requirements for 2021-22 will be published in early 2021.

### **BCF National Conditions**

10. The four national conditions set by the Government in the policy framework for 2019/20 remain the same for 2020/21:
  - a) That a BCF plan, including at least the minimum mandated funding to the pooled fund specified in the BCF allocations and grant determinations, must be signed off by the Health and Wellbeing Board, and by the constituent local authorities and CCGs;
  - b) A demonstration of how the area will maintain the level of spending on social care services from the CCG minimum contribution in line with the uplift to the CCG minimum contribution;
  - c) That a specific proportion of the area's allocation is invested in NHS-commissioned out of hospital services, which may include seven-day services and adult social care;
  - d) A clear plan on managing transfers of care (and improving delayed transfers of care), including implementation of the national high impact change model for managing transfers of care.

### **Background**

#### **BCF Plan for 2020/21**

11. The primary purpose of BCF reporting is to ensure a clear and accurate account of continued compliance of spending in line with the national conditions of the Fund. The secondary purpose is to inform policy making, the national support offer and local practice sharing by providing a fuller insight from narrative feedback on local progress, challenges and highlights on the implementation of BCF plans and progress on wider integration.
12. In March 2020, local areas were informed that publication of the Government's approach to the BCF in 2020-21 would be delayed, to allow areas to better focus on responding to the pandemic, but that minimal changes would be made for 2020-21. As set out in the statement issued on 3 December 2020, it has now been confirmed that areas will be required to submit BCF plans in 2020-21 to NHS England by the

end of the financial year to set out how the spend has been allocated, rather than seeking national approval as has previously been the case. Areas must agree the use of the mandatory minimum funding streams locally and place these into a pooling arrangement governed by an agreement under Section 75 of the NHS Act 2006.

13. Local areas are advised to keep records of spending against schemes funded through the BCF. Areas will be asked to report actual income and expenditure as normal in year-end reporting as well as details of spending on maintaining social care spending from the CCG minimum contribution and out of hospital services, in line with the national conditions.

### **Strategic Narrative**

14. The narrative section (available at Appendix A) sets out Leicestershire's approach to the integration of health and social care, using the following headings:
- Joined up care around the person;
  - Joint commissioning and delivery of health and social care at Health and Wellbeing Board level;
  - How the BCF plan and relevant elements of the Sustainability and Transformation Partnerships/Integrated Care Systems plan aligns, including any jointly owned outcomes.

### **Proposals/Options**

#### **BCF Income**

15. The BCF Plan for Leicestershire currently totals £62.9million. An additional Disabled Facilities Grant of £527,769 has been received as part of the £68m national increase, recently announced. Contributions are summarised in the table following:

	<b>£000</b>
ELRCCG minimum contribution	17,725
WLCCG minimum contribution	23,625
Improved BCF grant (autumn 2015)	11,353
Improved BCF grant (spring 2017)	3,403
Winter Pressure Grant	2,414
Disabled Facilities Grant	4,448
<b>Total</b>	<b>£62,967</b>

16. In terms of the CCG minimum contributions for 20/21; East increased by 5.3% and West by 5.7%.
17. No further additional support has been announced beyond the above increase in the Disabled Facilities Grant.

#### **BCF Expenditure Plan**

18. Despite there not being a requirement to submit the 2020/21 BCF Plan for NHS approval, areas must continue to agree the use of the mandatory minimum funding streams locally and place these into a pooling arrangement governed by an agreement under section 75 of the NHS Act 2006.

19. The BCF Expenditure Plan for 20/21 as supported by the Board in April can be seen in Appendix B.
20. The Section 75 Agreement required for the end of year submission is being presented to the Board as a separate item on the agenda.

### **High Impact Change Model for Managing Transfers of Care**

21. National condition four of the BCF requires health and social care partners to work together to agree a clear plan for managing transfers of care and improved integrated services at the interface of health and social care to reduce delays.
22. Appendix C provides details on our priorities for embedding elements of the High Impact Change Model (HICM) for 20/21.

### **BCF Metrics**

23. The BCF statement does not set national metrics for 2020-21 and systems are not required to agree trajectories. Systems should continue to focus their joint work on supporting people to live independently at home and, where they do require inpatient care in hospital, to support them to return to their normal place of residence.

### **Conclusion**

24. This final spending plan will be submitted at the year-end and no further changes are envisaged. However, in the unlikely event of any such changes, for example as a result of additional funding being allocated due to Covid-19, agreement is being sought from the Board for the Chief Executive, following consultation with the Chairman of the Health and Wellbeing Board, to approve the final submission.

### **Background papers**

Better Care Fund: Policy Statement 2020 to 2021

<https://www.gov.uk/government/publications/better-care-fund-policy-statement-2020-to-2021/better-care-fund-policy-statement-2020-to-2021>

Leicestershire BCF Plan 2019/20

[http://politics.leics.gov.uk/documents/s144896/BCF%20Report%20-%20Appendix%20A%20-%20BCF%20Plan%202019\\_20%20Summary.pdf](http://politics.leics.gov.uk/documents/s144896/BCF%20Report%20-%20Appendix%20A%20-%20BCF%20Plan%202019_20%20Summary.pdf)

### **Circulation under the Local Issues Alert Procedure**

None.

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### **List of Appendices**

Appendix A – BCF Plan – Strategic Narrative

Appendix B – BCF Expenditure Plan

Appendix C – High Impact Change Model for Managing Transfers of Care

### **Relevant Impact Assessments**

#### **Equality and Human Rights Implications**

25. The BCF aims to improve outcomes and wellbeing for the people of Leicestershire, with effective protection of social care and integrated activity to reduce emergency and urgent health demand.
26. An equalities and human rights impact assessment (EHRIA) has been undertaken and found that the BCF will have a neutral impact on equalities and human rights. The EHRIA can be accessed via the following link:  
<http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>.
27. A review of the EHRIA was undertaken in March 2017.

#### **Partnership Working and associated issues**

28. The delivery of the BCF plan and the governance of the associated pooled budget is managed in partnership through the collaboration of commissioners and providers in Leicestershire.
29. Day to day oversight of delivery is via the Integration Executive through the scheme of delegation agreed via the Integration Executive's terms of reference which have been approved by the Health and Wellbeing Board.
30. The delivery of the Leicestershire BCF ensures that a number of key integrated services are in place and contributing to the system wide changes being implemented through the five-year plan to transform health and care in Leicestershire, known as the Sustainability and Transformation Partnerships  
<http://www.bettercareleicester.nhs.uk/>

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