

HEALTH AND WELLBEING BOARD: 24 FEBRUARY 2022

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

BETTER CARE FUND PLAN UPDATE

Purpose of report

1. The purpose of this report is to provide the Health and Wellbeing Board with an overview of the progress against delivery of the 2021/22 Better Care Fund (BCF) Plan.

Recommendation

2. It is recommended that the progress against the delivery of the 2021/22 Better Care Fund Plan be noted.

Policy Framework and Previous Decisions

3. Nationally, the BCF plan for 2021/22 for Leicestershire was officially approved by NHSE in January 2022.
4. The national BCF team has confirmed that as BCF policy guidance and framework was not published until October, 2021, there would not be the usual quarterly returns required until after approval.
5. National reviews and consultation on the BCF planning and assurance processes are beginning in early February 2022, with a series of engagement events and workshops across regions. These sessions will look back on the previous planning rounds and consider lessons for 2022-23. They will also aim to understand the types of system level governance changes already underway. E.g. ICS development.
6. In the meantime, government have given an indication that the BCF policy is likely to continue for a further two years through to 2023/24, although the content of the policy framework over this period is not yet determined.
7. The Health and Wellbeing Board approved the BCF Plan for 2021/22 at its meeting on 25th November 2021.

Current Position

8. Work commenced locally in January 2022 to refresh the BCF expenditure plan for 2022/23 in line with the annual planning arrangements for the CCGs and local authority
9. The focus of the refresh has been to ensure that each scheme funded in the BCF is meeting a series of key lines of enquiry (KLOE's) to meet value for money and desired integration outcomes.

10. The expenditure plan, is also under review, ensuring it keeps pace with commissioning intentions of partners in relation to the next phase of the transformation of health and care, for example changes to community response service or the introduction of care coordination as part of neighbourhood teams.
11. A working session with County Council and CCG partners to review and make recommendations against the expenditure plan, the scheme reviews taken place so far and to consider options and priorities for the unallocated spend arising from the annual uplift to the allocations as set out by government (see BCF income section below), will take place during early March.
12. The Integration Finance and Performance Group, which includes Finance and Strategy Leads from the County Council and the CCGs, reviewed the current forecast underspend at its meeting of the 19th January, 2022 and considered and proposed options and priorities for the unallocated spend. This will be presented to the March working session.
13. It is anticipated that later in 2022/23, NHS England will request a formal submission of the BCF plan. In previous years this has entailed the expenditure plan, supporting narrative, an overview of the BCF metrics. These elements will be brought to the Board for consideration in line with the national timescale, once known.

Update against national conditions for the 2021/22 Plan

National condition 2 – Social Care Maintenance

14. National condition 2 (1 being a joined up BCF submission) focuses on Social Care Maintenance and ensuring that CCG contributions to social care spend continue to match or exceed the minimum required.
15. Finance leads between organisations regularly review social care costs and have worked with CCG colleagues to secure additional in year funding to support increased demand for social care services.
16. In addition, system headroom funding bids have been submitted to support social care expenditure on community services e.g. brokerage and review teams.

National condition 3 – NHS Commissioned out of hospital services

17. During the re-emergence of the pandemic, we have continued to commission care and services with our health partners in the community.
18. Key activity commissioned in the last six months includes:
 - Discharge to recover therapy-led beds
 - Care co-ordination
 - Interim bed contracted framework
 - Complex patient case-management function
 - Support to provider market over winter pressures to expand staffing availability

National condition 4 – Plan for improving outcomes for people being discharged from hospital

19. The BCF plan submitted in November 2021, included robust plans to enable safe and timely discharge for patients across Leicestershire.
20. The regional team have requested an update for NHSE to briefly describe in bullet points, some of the actions that have taken place over the winter period in each HWBB area.
21. Below is the Leicestershire update:
 - The discharge hub has developed further and includes all staff utilising Systm1. This includes real-time information on out of county and community hospital patients and enables the system to better understand our system performance against key metrics.
 - Community Response Service is now up to 50% recruited to (20 out of 40) for home care assistants. The case management function that compliments this is being developed as part of the ASC restructure and due to come on-line from 1st April. This includes Community hospital and out of county hospital link-workers.
 - Partners have re-commissioned therapy-led beds and interim beds (15 and 25 respectively) to ensure that safe and timely discharges remained. Around 50% of patients that are discharged to therapy beds have a reduced package of care and around 90% patients return home with either improved mobility prior to hospital or the same level of mobility.
 - UHL and LPT Multi-agency discharge events (MADE) which include focused daily discharge meetings across health and social care to jointly discuss and agree all elements of a persons' discharge plan.
 - The commissioning of home care provision has now been completed within the county. The framework has now been re-opened to further increase the amount of capacity available.
 - ASC staff work with non-covid wards to co-triage patients with health staff to identify appropriate requirements for discharge. This includes a care co-ordinator and an Assistive Technology officer in support to maximise the use of community and equipment to increase the number of patients that are discharged with no further care requirements.
 - Case management for complex nursing patients has been commissioned with Mids and Lancs. This includes a specialist nurse that works with wards on the complex case management and decision making.
 - A review of commissioning for D2A residential placements is taking place in February across City and County.

BCF Income and expenditure

22. The increases for the WLCCG and ELRCCG minimum contributions for 2021/22 were 5.8% and 5.4% respectively. The BCF Plan for 2021/22 was submitted to

NHSE/I in November and totalled £65.3m. The funding breakdown is shown in the table below:

<u>BCF Approved Budget</u>	<u>WLCCG</u>	<u>ELRCCG</u>	<u>LCC/DC</u>	<u>Total</u>
CCG Minimum Contributions	24,985	18,681		43,666
Disabled Facilities Grants (DFG)			4,447	4,447
Improved BCF Autumn 2015			11,353	11,353
Improved BCF Spring 2017			3,403	3,403
Winter Pressures			2,414	2,414
Total Funding	24,985	18,681	21,617	65,283

2021/22 Forecast Outturn – Quarter 3

23. The overall forecast outturn for the financial year is £65.1m, representing a small underspend of circa £174,000.

	<u>Overall Financial Position</u>			<u>Forecast Position by Organisation</u>		
	<u>Allocation n £'000</u>	<u>Forecast £'000</u>	<u>Variance £'000</u>	<u>WLCCG £'000</u>	<u>ELRCCG £'000</u>	<u>LCC / DC £'000</u>
BCF WLCCG	10,236	10,236	0	10,236		
BCF ELRCCG	7,348	7,348	0		7,348	
BCF LCC	26,082	25,908	174			25,908
Total BCF	43,666	43,492	174	10,236	7,348	25,908
DFG	4,447	4,447	0			4,447
IBCF	17,170	17,170	0			17,170
Total BCF Plan	65,283	65,109	174	10,236	7,348	47,525

24. The above financial position was reported to the Integrated Finance and Performance Group and Joint Commissioning Group (subgroups of the Integration Executive) at its meeting of the 19 January, 2022.
25. It was agreed, as previously stated, the underspend would be offset against the current overspend within the Community Response Service (120,000) and that the remainder would be set aside to further support the expansion and increased staffing of Home Care Assistants to support this service.

IBCF

26. The Improved Better Care Fund (IBCF) allocation for 2021/22 consists of funding announced in the 2015 Autumn Statement which amounts to £11.4m for

Leicestershire, in addition to funding announced in the Spring 2017 Budget of £3.4m and Winter Pressures funding of £2.4m.

27. The £11.4m from the Autumn 2015 announcement is recurrent and has been used to offset growth pressures experienced in demand led commissioned services due to demographic changes.
28. The £3.4m is non-recurrent and has been used to fund a range of transformational work and short-term schemes. Winter Pressures Funding of £2.4m is also non-recurrent and will be used to fund schemes which focus on specific winter pressures, and support new ways of working

BCF Metrics

29. The below table shows the BCF metrics for this financial year and the targets that we committed to as part of the submitted BCF plan:

Metric	Target
Unplanned admissions for chronic ambulatory care-sensitive conditions.	7% reduction on 2019/20 (831.5 to 775)
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	85% an increase of 0.3% on 2020/21 data of 84.7%
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence (excluding RIP)	93.10%. This represents an increase of 1.5% on 2020/21 data and an increase of 1% on 19/20 data
Percentage of in patients, resident in the HWB, who have been an inpatient in an acute hospital for: i) 14 days or more ii) 21 days or more	Weighted data = 14+ days = 10% 21+ days = 4.6% Maintaining current figures to meet national targets
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Planned rate of 519 = 3% reduction from 19/20 rate of 536

30. Attached to this report as Appendix A, is an updated dashboard summary of performance against the BCF metrics. Refreshed data for December 2021 is not yet available.
31. This dashboard is reported monthly to the Integration Delivery Group and bi-monthly to the Joint Commissioning Group.

Next Steps

32. The BCF schemes and associated funding will be reviewed by a working group of the County Council and CCG colleagues for 2022/23 expenditure.
33. An updated BCF expenditure plan will be produced in draft for April 2022. This will await the minimum contribution and allocation national guidance.
34. Any further policy and planning template timelines will be adhered to once they are known for the next financial year.

Circulation under the Local Issues Alert Procedure

None

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Appendix

BCF Metric Performance Dashboard

Background Papers

BCF Policy Framework 2021/22

<https://www.gov.uk/government/publications/better-care-fund-policy-framework-2021-to-2022/2021-to-2022-better-care-fund-policy-framework#:~:text=The%202021%20to%202022%20Better,system%20recovery%20from%20the%20pandemic.>

BCF Planning Requirements 2021/22

<https://www.england.nhs.uk/wp-content/uploads/2021/09/B0898-300921-Better-Care-Fund-Planning-Requirements.pdf>

BCF Report to the Board – 25th November 2021

[Agenda for Health and Wellbeing Board on Thursday, 25 November 2021, 2.00 pm - Leicestershire County Council \(leics.gov.uk\)](#)

Relevant Impact Assessments**Equality and Human Rights Implications**

35. 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.
36. An equalities and human rights impact assessment has been undertaken which is provided at <http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>. This finds that the BCF will have a neutral impact on equalities and human rights.
37. A review of the assessment was undertaken as part of the BCF submission for 2021.

Partnership Working and associated issues

38. 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.
39. 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.

40. The delivery of the Leicestershire BCF ensures that several 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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