



HEALTH AND WELLBEING BOARD: 29 FEBRUARY 2024

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

LEICESTERSHIRE BETTER CARE FUND PLAN AND QUARTER 3 RETURN 2023/25

Purpose of report

1. The purpose of this report is to update the Health and Wellbeing Board on the final Leicestershire Better Care Fund (BCF) Plan for 2023/25 alongside the Quarter 3 Better Care Fund return.

Recommendation

2. It is recommended that:
 - (a) The Leicestershire Better Care Fund (BCF) Plan 2022/23, including the Planning Template and Narrative and Quarter 3 return, be noted;
 - (b) The action taken by the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing Board, to approve the BCF Quarter 3 return for the NHSE submission deadline of 9 February 2024 be noted.

Policy Framework and Previous Decisions

3. The BCF policy framework was introduced by the Government in 2015, 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 Board received a report on work to progress the refresh of the BCF Plan for 2023-25 at its meeting on 25th May 2023 and authorised the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Board, to finalise the Plan prior to the national submission deadline of 30 June 2023.
5. The report considered in May 2023 also confirmed the different funding elements for the BCF in 2023-24, the national conditions that are required to be met, the national metrics and the demand and capacity model required.
6. The Integration Executive, a subgroup of the Health and Wellbeing Board, with day-to-day delivery of the BCF, considered the draft BCF Plan 2023-25 at its meeting on the 6 June 2023. The Executive supported its contents.
7. The Integration Executive also received the quarter 3 BCF return at its meeting of the 6 February 2024, prior to the NHSE requested submission date of 9 February 2024.

Background

8. The BCF programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers. It represents a unique collaboration between:
 - The Department of Health and Social Care
 - Department for Levelling Up, Housing and Communities
 - NHS England and Improvement
 - The Local Government Association
9. The four partners work closely together to help local areas plan and implement integrated health and social care services across England, in line with the vision outlined in the [NHS Long Term Plan](#). Locally, the programme spans both the NHS and local government to join up health and care services, so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.
10. Launched in 2015, the programme established pooled budgets between the NHS and local authorities, aiming to reduce the barriers often created by separate funding streams. The pooled budget is a combination of contributions from the following areas:
 - minimum allocation from NHS clinical commissioning group(s) (CCGs)
 - disabled facilities grant – local authority grant
 - social care funding (improved BCF) – local authority grant
 - winter pressures grant funding £240 million – local authority grant

BCF Plan for 2023-25

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. A copy of this is attached as Appendix A.
12. The BCF Plan consists of the expenditure plan, narrative, outcome metrics, demand and capacity modelling and an expectation that areas will complete an assessment of their maturity against the High Impact Change Model.
13. An excel template is made available for areas to use to record and agree spending in local BCF plans, named the BCF Expenditure Plan. A copy is included as Appendix B. This is intended to support local planning and reporting at year end. It includes targets and current data against the national metrics included in the requirements.

BCF National Conditions

14. **National Condition 1: A jointly agreed plan between local health and social care commissioners, signed off by the HWBB.** For National condition 1 the documentation should outline the approach to integrated, person-centred health, social care and housing services, including:
 - Joint priorities for 2023-25
 - Approaches to joint / collaborative commissioning

- How BCF funded services are supporting our approach to continued integration of health and social care. Briefly describe any changes to the services being commissioned 2023-25 and how they will support further improvement of outcomes for people with care and support needs

- National Condition 2 – Enabling people to stay well, safe and independent at home for longer.** For national condition 2 the documentation needs to show how areas have agreed how the services they are commissioning will support people to remain independent for longer and where possible to support them to remain in their own home.
- National Condition 3 – Provide the right care in the right place at the right time.** Areas should agree how the services they commission will support people to receive the right care in the right place at the right time and BCF Plans should set out how ICB and social care commissioners will continue to do this.
- National Condition 4 – Maintaining NHS’s contribution to Adult Social Care and investment in NHS commissioned out of hospital services.** For both years of the Plan, the minimum expected expenditure will be uplifted by 5.66%.

Strategic Narrative

- The draft narrative sets out Leicestershire’s approach to the integration of health and social care under the national condition headings.

BCF Income

- The BCF Plan for Leicestershire for 2023/24 totals £75.7million. This includes Disabled Facilities Grant funding of £4.4 million which has been passported to District Councils and ICB and LA allocations of the discharge grant. The ICB Discharge Funding template forms part of the BCF return and is attached as Appendix C.
- Contributions are summarised in the table below:

ICB minimum NHS contribution	£48,748,385
Improved BCF grant	£17,690,614
Disabled Facilities Grant	£4,447,228
LA Discharge funding	£2,480,197
ICB Discharge Funding	£2,368,831
Total	£75,735,254

BCF Metrics

- In addition to the national conditions, the BCF Policy Framework sets national metrics that must be included in BCF Plans in 2023-25. The local authority and ICB are required to establish ambitions associated with each metric and set how they will be achieved. The framework retains two Adult Social Care Outcomes Framework metrics from previous years:
 - Effectiveness of reablement (proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation).
 - The number of older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population.

22. In addition, local systems should also agree targets associated with three further metrics to improve outcomes across the HWBB area for the following measures:
- Improving the proportion of people discharged home using data on discharge to their usual place of residence.
 - Reducing unplanned admissions for chronic, ambulatory, care-sensitive conditions. Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.
 - Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.

Demand and Capacity model

23. All systems must submit a high-level overview of expected demand for intermediate care and planned capacity to meet this demand alongside their BCF plans. The content of capacity and demand plans now forms part of the assurance and approval process.
24. For Quarter 2 2023-24, it was requested that demand and capacity models be refreshed in line with mid-year figures. The refresh was reported and approved by the Board at its 31 October 2023 meeting.

Quarter 3 return

25. In December 2023, the national BCF team published the Quarter 3 template for reporting the position, which requires approval by the Health and Wellbeing Board.
26. The aim of the report and template is to inform on progress against BCF delivery. BCF quarterly reporting can be used by local areas, alongside any other information to help inform HWBs on progress on integration and the BCF. It is also intended to inform BCF national partners as well as those responsible for delivering the BCF plans at a local level (including integrated care boards, local authorities and service providers).
27. The completed Quarter 3 template is attached to this report as Appendix D. The NHSE submission deadline was 9th February 2024.
28. The template consists of tabs that update progress against the following:
- Whether the four national conditions detailed in the Better Care Fund planning requirements for 2023-24 continue to be met through the delivery of the plan.
 - A confidence assessment on achieving the metric targets for each of the BCF metrics which includes a brief commentary outlining the challenges faced in achieving the target along with any support needs and successes that have been achieved.
 - An update against spend and activity

BCF Metrics

29. The below table shows the BCF metrics for this financial year, targets and outturns for Quarter 2 where available:

Metric	Target Q2	Actual Q2	Commentary
Indirectly standardised rate (ISR) of admissions per 100,000 population	163.5	189	This metric is currently off target. Intermediate care initiatives, particularly for pathway 1 improvements are moving to step-up modelling to increase avoided admissions.
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence	92.6%	92.2%	The target was almost met during Q2. A difference of 0.4% is noted.
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	1628.1.	471.5	Currently his metric is 10% off track to meet target. The falls sub-group are looking at proactive models of support in the community for falls reduction pathways.
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	515	ASCOF 22/23 552.8	Forecast for the full year, based on the position at the end of Q3 is 522.7 admissions per 100,000 population. The new integrated model of locality support between therapy and reablement teams has helped to ensure people remain in their own home.
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	90%	ASCOF 22/23 89.2%	Data in the metric isn't cumulative but represents a different three months of discharges (final year figures being discharges Oct-Dec). Latest performance is 87% but has been >90% at point through 2023/24 to date.

Updated spend and activity

30. This section updates both spend and activity rates of delivery against the schemes in the BCF

31. This section is split into 4 separate columns of information:
- Actual expenditure to date against each scheme.
 - Outputs delivered to date against each scheme.
 - Commentary against any known implementation issues.
 - Commentary against any actions taken to resolve any issues.
32. Data from assured BCF plans has been pre-populated in the remaining columns shaded blue.

Background papers

Better Care Fund Planning Requirements 2023/24: <https://www.england.nhs.uk/wp-content/uploads/2023/04/PRN00315-better-care-fund-planning-requirements-2023-25.pdf>

Better Care Fund Policy Framework 2023-25:
<https://www.gov.uk/government/publications/better-care-fund-policy-framework-2023-to-2025/2023-to-2025-better-care-fund-policy-framework>

[Report to the Health and Wellbeing Board on 25 May 2023 – Better Care Fund Plan 2023-25 - https://democracy.leics.gov.uk/ieListDocuments.aspx?CId=1038&MId=7290&Ver=4](https://democracy.leics.gov.uk/ieListDocuments.aspx?CId=1038&MId=7290&Ver=4)

Circulation under the Local Issues Alert Procedure

33. None

Officer to Contact

Jon Wilson Director of Adults and Communities

Telephone: 0116 3057454

Email: jon.wilson@leics.gov.uk

Lisa Carter Health and Social Care Integration Service Manager

Telephone: 0116 3050786

Email: lisa.carter@leics.gov.uk

List of Appendices

Appendix A – BCF Plan – Strategic Narrative

Appendix B – BCF Expenditure Plan

Appendix C – ICB Discharge Funding Template

Appendix D – BCF Quarter 3 Return

Relevant Impact Assessments

Equality and Human Rights Implications

34. 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.
35. An equalities and human rights impact assessment has been undertaken when the BCF was established and is provided at <http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>. This identified that the BCF will have a neutral impact on equalities and human rights.
36. A review of the assessment was undertaken in March 2017.

Partnership Working and associated issues

37. 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.
38. Day to day oversight of delivery is via the Integration Executive, a subgroup of the Health and Wellbeing Board.

Partnership Working and associated issues

39. 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 NHS Long-term plan.

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