



## **HEALTH AND WELLBEING BOARD: 23 MAY 2024**

### **REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES**

#### **LEICESTERSHIRE BETTER CARE FUND PLAN 2024-25**

##### **Purpose of report**

1. The purpose of this report is for information for the Health and Wellbeing Board regarding the draft Leicestershire Better Care Fund (BCF) Plan for 2024/25

##### **Recommendation**

2. It is recommended that the Health and Wellbeing Board notes the Leicestershire BCF Plan 2024/25 Planning Template.
3. Note the action that will be taken by the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing Board (HWBB), to approve the BCF Year 24-25 report and use of powers of delegation to approve this for the NHSE submission deadline of 10<sup>th</sup> June, 2024.

##### **Policy Framework and Previous Decisions**

4. 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.
5. The Board received a report on the BCF Plan for 2023-25 at its meeting on 29<sup>th</sup> February 2024.
6. The report also confirmed the different funding elements for the BCF in 2024-25, the national conditions that are required to be met, the national metrics and the demand and capacity model required.
7. NHSE published the template for any revision to BCF plans for 24-25 on the 6<sup>th</sup> April, 2024.
8. The Integration Executive, a subgroup of the Health and Wellbeing Board with responsibility for the day to day delivery of the BCF, considered the draft BCF Plan 2024-25 at its meeting on the 23 April 2024. The Executive supported its proposed contents.

## **Timetable for Decisions**

9. The Better Care Fund plan 2023-25 was submitted to NHSE on 27 June 2023 prior to the submission deadline of 28 June 2023.
10. The 24-25 plan template will be submitted to NHSE for the submission deadline of 10<sup>th</sup> June 2024.

## **Background**

11. 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
12. 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.
13. 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 2024-25**

14. 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.
15. The BCF Plan template is attached as Appendix A to this report and consists of tabs on the following:
  - Capacity and Demand
  - Income

- Expenditure
- Narrative updates
- Metrics
- Planning requirements

### **BCF National Conditions**

16. **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.
17. **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.
18. **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 Integrated Care Board (ICB) and social care commissioners will continue to do this.
19. **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**

20. The template requires updates to the narrative that was submitted with the 23-25 plans and can be seen in the narrative updates tab on the attached appendix.

### **BCF Income**

21. The BCF Plan for Leicestershire for 2024/25 totals £82.5 million. This includes Disabled Facilities Grant funding of £4.8 million which has been passported to District Councils and ICB and Local Authority (LA) allocations of the discharge grant. The ICB Discharge Funding template forms part of the BCF return and is attached as Appendix C.
22. Contributions are summarised in the table below:

ICB minimum NHS contribution	£51,507,543
Improved BCF grant	£17,690,614
Disabled Facilities Grant	£4,850,818
LA Discharge funding	£4,133,661
ICB Discharge Funding	£4,355,513
<b>Total</b>	<b>£82,538,149</b>

### **BCF Metrics**

23. In addition to the national conditions, the BCF Policy Framework sets national metrics that must be included in BCF Plans in 2024-25. The local authority and ICB are required to establish ambitions associated with each metric and set how they will be achieved. The framework retains one Adult Social Care Outcomes Framework metrics from previous years:
- The number of older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population
24. 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.
25. The below table shows the BCF metrics for this financial year, along with targets set:

<b>Metric</b>	<b>Target</b>
Indirectly standardised rate (ISR) of admissions per 100,000 population	162.65
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence	93%
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	1756.9
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	494.5

### **Demand and Capacity model**

26. 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.
27. For 2024-25, it was requested that demand and capacity models be refreshed to ensure that this is being measured correctly against outturns in 2023-24. Data on community therapy is yet to be received. This will be updated in time for the submission deadline.

### **Updated spend and activity**

28. This section allows for any updates to both spend and activity rates of delivery against the schemes in the BCF submission for 2023-25.
29. Data from assured BCF plans has been pre-populated in the remaining columns shaded blue.
30. At time of report publication, updated spend on iBCF, DFG, Discharge Grant and ICB scheme spend has yet to be confirmed. This will be updated to the board at the meeting.

### **Background papers**

Better Care Fund Policy Framework and Planning Guidance Addendum 2024-25  
<https://www.gov.uk/government/publications/better-care-fund-policy-framework-2023-to-2025/addendum-to-the-2023-to-2025-better-care-fund-policy-framework-and-planning-requirements>

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>

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

31. None

### **Officer to Contact**

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### **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

32. 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.
33. 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.
34. A review of the assessment was undertaken in March 2017.

#### Partnership Working and associated issues

35. 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.
36. Day to day oversight of delivery is via the Integration Executive, a subgroup of the Health and Wellbeing Board.

#### Partnership Working and associated issues

37. 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.