

# HEALTH AND WELLBEING BOARD



<b>TO:</b>	Health and Wellbeing Board
<b>FROM:</b>	Sayyed Osman, Director of Adult Services, Neighbourhoods and Community Protection, BwD LA  Roger Parr, Deputy Chief Executive/ Chief Finance Officer
<b>DATE:</b>	21st August 2020

## **SUBJECT: Better Care Fund Quarter 4 2019/20 Update**

### **1. PURPOSE**

The purpose of this report is to:

- Provide Health and Wellbeing Board (HWBB) members with a Better Care Fund (BCF) Q4 2019/20 update and which includes a summary of performance and delivery.
- Provide HWBB members with the BCF and Improved Better Care Fund (iBCF) financial position for Q4 2019/20.
- Update on timescales for future National BCF Planning and Reporting requirements for 2020/21.

### **2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD**

Health and Wellbeing Board members are recommended to:

- Note the Better Care Fund Qtr. 4 2019/20 performance and financial position.
- Note the future planning and reporting requirements for 2020/21.

### **3. BACKGROUND**

As outlined in previous reports, the Health and Wellbeing Board is accountable for the delivery of the Better Care Fund Plan and managing performance against the required metrics and timetables from 2017-2020. The management of the plan is undertaken through Blackburn with Darwen's Joint

Commissioning arrangements and governance structures.

A requirement of the BCF reporting is to complete quarterly template reports which have consistently been successfully submitted as per the national timescales and schedule. The report demonstrates the progress made against each performance metrics, scheme and financial expenditure throughout the year.

To note, the national BCF team revised the Qtr. 4. 2019/20 reporting timescales from April 2020 to September due to the COVID pandemic and impact on the health and social care system. This report provides a summary of the Qtr. 4 2019/20 BCF performance and deliverables for the Health and Wellbeing Board (HWBB) members following the development of the BCF Qtr. 4 national reporting template which was approved by The Chair of the HWBB, Councillor Mohammed Khan, on 9<sup>th</sup> July 2020 and submitted to the National BCF Team and NHS England Regional Lead on 20<sup>th</sup> July 2020.

#### **4. RATIONALE**

The Better Care Fund has been established by Government to provide funds to local areas to support the integration of health and social care. Section 75 of the National Health Service 2006 Act gives powers to local authorities and health bodies to establish and maintain pooled funds out of which payment may be made towards expenditure incurred in the exercise of prescribed local authority functions and prescribed National Health Service (NHS) functions.

The Blackburn with Darwen Better Care Fund Plan 2019/20 will continue to support the local vision for Integrated Care to deliver effective, efficient, high quality and safe integrated care to enable the residents of Blackburn with Darwen to Live Longer and Live Better.

The Better Care Fund has a framework of local quarterly reports which are approved via the HWBB and the national requirement for the 2020/21 reporting has been delayed due to COVID 19 pandemic. The new National BCF Guidance for 2020-21 is due to be released in September 2020 and it is anticipated that the requirements for a new plan will be light touch. A full report on the new requirements will be provided to the Blackburn with Darwen HWBB at the next meeting in December 2020.

#### **5. KEY ISSUES**

This section of the report provides a financial and metrics performance summary of Qtr. 4 2019/20 and highlights the priorities and key work plan for this financial year.

##### **Qtr. 4 2019/20 Finance Update**

##### **5.1 BCF and iBCF Pooled Budget Financial Summary for Qtr. 4 2019/20 & Qtr. 1 2020/21**

##### **5.1a Summary of Quarter 4 2019/20**

The CCG minimum pooled budget requirement for 2019/20 was £11,992,199 which is included in the total BCF budget of £13,869,198 for 2019/20. The final outturn on BCF was £13,231,563 which was an under spend of £637,635, of which £103,300 relates to a planned underspend on the pooled revenue budget and £534,335 variation in spend in respect of Disabled Facilities Grant (DFG).

The underspend has been carried forward to be spent in 2020/21 under the pooled budget arrangements which allows planned carry-over of resources from one year to the next to facilitate maximisation of service needs and requirements. Spend on DFG is demand led and take up rate can fluctuate impacting on timing of completion of works and discharge of expenditure. In addition normal activity on DFG was suspended in the latter part of the year due to the Covid-19 pandemic, leading to an increase in committed expenditure not yet defrayed. The amount is committed and will be fully discharged in the new financial year. The capital programme of the Authority allows for carry forward of resources from one year to next.

In 2019/20 the iBCF allocation and Winter Pressures Grant has been fully utilised.

The final 2019/20 budget for the BCF and iBCF pool including Winters Pressures Grant was £21,972,793 and the final outturn was £21,335,158, an underspend of £637,635 which is detailed above and was reported in the Better Care Fund Q4 template submitted on behalf of the Health and Wellbeing Board on 20th July 2020.

### **5.1b Qtr. 1 2020/21**

The below financial summary highlights the plans for the BCF financial budget for Quarter 1 2020/21. These plans have not been ratified locally as further national guidance on local plans is anticipated in September 2020. There is a continuation of the schemes and services funded through the Better Care Fund for 2020/21 with some minor adjustments made which have been reported and approved via the Joint Commissioning Group as part of the joint commissioning governance structures and meetings in Blackburn with Darwen.

- The CCG minimum BCF pooled budget requirement for 2020/21 is £12,635,175.
- The DFG capital allocation for 2020/21 is £1,876,999.
- The iBCF allocation for 2020/21 is £8,103,595
- 2020/21 budget for the BCF and iBCF pool is £23,253,404 including carry forwards.

The 2020/21 BCF allocations as above plus carry forward amounts from 2019/20 are analysed as:

- Spend on Social Care - £7,038,732 (46%)
- Spend on Health Care - £4,678,104 (31%)
- Spend on Integration - £2,291,842 (15%)
- Contingency - £1,141,131 (8%)

The contingency is fully committed to the planned services already established.

#### Qtr. 4 2020/21 Performance Update

The table below provides a summary of performance against metrics BCF targets up to Quarter 4 2019/20 with a narrative summary:

BCF Metric No	BCF Metrics Measures	Performance measure	Plan/Target	Actual performance for Qtr. 4
1	Reduction in non-elective admissions	On track to meet target	22,773	21,762
2	Rate of permanent admissions to residential care	On track to meet target	192 annual numerator	157
3	Reablement – proportion of over 65 still at home after 91 days from hospital discharge	Not achieved	90.5 %	88.5%
4	Delayed Transfers of Care	Not achieved	Total delayed days - 3444	Total delayed days - 4043

**1) Non-Elective Admissions** - The Blackburn with Darwen numerical NEA target for 2019/20 is 22,773 and the Qtr 4 position is 21,762. This is a very positive position for Blackburn with Darwen and shows that there continues to be successful services and schemes to help sustain people in their homes and community services. There have been pathway changes within urgent care and to increase patient response times so there is an increase in patients who are seen and treated in less than a day (zero day admission). These pathways will continue to be monitored to ensure they are as effective as possible for our residents. During the last quarter of the year, particularly March there has been a significant impact of a reduced amount of people attending urgent care services and it is anticipated that this pattern will be reflected in the first quarter of 2020/21. This will be carefully monitored to ensure that our residents are able to access other health services in a virtual, home or community setting to ensure that their short or long term health and wellbeing needs continue to be met as patients may choose to avoid acute care.

**2) Residential Admissions** – March 2020 figures show that the 2019/20 target has been met as Blackburn with Darwen are below the required performance level of 157 admissions into long term residential/nursing care for people aged 65+. The below table shows a summary of the number of residents admitted to long term residential/nursing care per quarter:

Qtr. 1 - 49 admissions	Qtr. 3 - 29 admissions
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Qtr. 2 - 40 admissions

Qtr. 4 - 39 admissions

This year's admission activity has followed the seasonal pattern observed in 2019/20, with an overspill of slightly increased admissions from the Qtr. 1 'winter period' which is reflective of the higher admission rates in the first quarter. The number of admissions in the preceding quarters continued to reduce during 2020/21 with a total of 157 people aged 65+ going into long term residential care which is well below the target of 192. This provides another healthy reflection of the positive impact of the plethora of community and home based services/schemes and patient pathways in place for our residents which supports them to remain and stay health in their own homes.

### 3) Reablement –

	At home	Admissions	Performance
<b>Target</b>	<b>457</b>	<b>505</b>	<b>90.5%</b>
<b>Actual</b>	<b>549</b>	<b>620</b>	<b>88.5%</b>

The Reablement target is based on the proportion of older people (65 years plus) who are still at home 91 days after discharge from hospital into Reablement/rehabilitation services. This year has been a challenge to the discharge services and schemes in place due to a substantial increase in the level of demand and complexity health and social care need of our residents in Blackburn with Darwen. It is important to note that the service users who would have ordinarily gone into a care home from hospital and possibly stayed there long term, are now being discharged to home and are being supported via three key services (Reablement, Home First or Rehab Services). The three services work together seamlessly with families and carers to support people to remain in their normal environment which is a very positive outcome for our communities. There are a range of interventions and dedicated packages of care which are available and may include overnight support, multiple visits per day to enable the best care and support to ensure that residents are getting their needs met by a number of health and social care trained professionals and teams.

Additionally it is important to note that the new COVID 19 Hospital Discharge Guidance has impacted on the level of complexity of need of service users discharged into Reablement and Home First services. Further work to review the pathways and complexity of service users will be completed in order to learn lessons from this year and build upon the positive work already achieved during Qtr. 1 of 2020/21.

### 4) *Delayed Transfers of Care (DTCO) –*

The Blackburn with Darwen Annual Delayed Transfers of Care (DTCO) target relates to when a patient is ready to leave a hospital or similar care provider but is still occupying a bed. Delays can occur when patients are being discharged home or to a supported care facility, such as a residential or nursing home, or are awaiting transfer to a community hospital or hospice. The DTCO target for 2019/20 was 3444 total delayed days with an average 287 delayed

days per month.

The actual activity performance up to February 2020 shows that the total delayed days is 4043 with average monthly total delayed days of 367. The impact of the COVID pandemic during quarter 4 has enabled a slower rate of DTOC and some recovery of the DTOC position. To note, the national recording of DTOC data performance paused in February 2020 across the whole of England due to COVID and further information regarding the final position is anticipated. It is estimated that performance in March 2020 is likely to be significantly affected by the impact of Covid and we anticipate a low DTOC level in March.

***It is important to note that there has been significant learning and change during Qtr. 4 2019/20 and Qtr. 1 2020/21 periods with the COVID pandemic having a significant impact on how services have had to change and flex their approach to deliver a virtual service and continue to meet the needs of our residents. The positive joint working and leaderships skills across teams in the health, social care and VCFSE sector organisations have worked collaboratively to review national guidance and response to look needs to ensure that we are able to continue to meet the population needs a this difficult time. The restoration of services and pathways to support the health and wellbeing needs of our residents will be reviewed as part of the recovery and restoration process which is underway. The learning and reshaping of our services, schemes and pathways will feed into the positive work and innovative changes already achieved and will continue to be implemented and support the performance and delivery of the BCF metrics during 2020/21.***

#### ***End of year summary and Positive News:***

Integrated workforce remains one of our greatest focus and achievements due to our collaborative, open and supportive partnership approach which has been delivered via the newly embedded Primary Care Neighbourhood and integrated care structures. We continue to encourage, and promote the 'One Team' approach across multiple organisations to provide holistic and joined up team approaches to an integrated workforce. This includes the delivery of training and upskilling of clinical and non-clinicians side by side to deliver the best health and social care services in Blackburn with Darwen. The 'One Team' approach has enabled us to develop a greater understanding of the role and responsibilities of different organisations and teams and exploration of further innovative opportunities. This has led to multiple pilot projects, co-location of teams, joint Multi-disciplinary team meetings and joint training opportunities between professionals from across a range of sectors but mostly health, social care and the VCFSE sector.

We are particularly proud of the co-location of our locality Integrated Neighbourhood Teams which has produced successful and positive outcomes for our resident captured through INT data/performance reports. We are proud to demonstrate this innovative work in a case study (see appendix 1). The example case study shows the innovative work for patients in Darwen who are on an End of Life pathway and demonstrates how services across a number of organisations have worked together to provide excellent practical, emotional, health and wellbeing support to our most valued patients.

## **6. POLICY IMPLICATIONS**

The key policy drivers are outlined within the main body of this report and within previous BCF papers presented to HWBB members. Local areas are expected to fulfil these requirements. New planning guidance is due to be published in September 2020 and impact and implications will be reported at the December Health and Wellbeing Board meeting.

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## **7. FINANCIAL IMPLICATIONS**

### **7.1 BCF Pooled Budget Qtr. 4 Position**

The final 2019/20 budget for the BCF and iBCF pool including Winter Pressures Grant was £21,972,793 and the final outturn as at 31 March 2020 was £21,335,158, an underspend of £637,635 of which the carry forward in respect of BCF revenue pool was £103,300 and slippage of DFG capital schemes amounted to £534,335. The final outturn position has been reported in the Better Care Fund Q4 template submitted on behalf of the Health and Wellbeing Board on 20<sup>th</sup> July 2020.

### **7.2 BCF Pooled Budget Qtr.1 Position**

The Qtr. 1 2020/21 budget for BCF and iBCF financial plans have not been ratified locally as further national guidance on local plans is anticipated in September 2020. A new financial budget will be developed and ratified through the joint commissioning governance arrangements following receipt of national guidance and financial allocations in September 2020.

## **8. LEGAL IMPLICATIONS**

Legal implications associated with the Better Care Fund governance and delivery has been presented to Health and Wellbeing Board members in previous reports. An updated Section 75 agreement has been developed for 2019/20 and will require review and approval between the Local Authority and CCG in December 2020. The Section 75 Agreement outlines risk sharing arrangements associated with the Better Care Fund and other funding streams aligned to integrated delivery locally. The general changes to Section 75 are:

- Legal Considerations – The Parties agree that the Framework Partnership Agreement is amended to incorporate the changes which came into effect as a result of the GDPR - General Data Protection Regulation (Regulation (EU) 2016/679);
- Finance contributions – The revised budget and financial plan to incorporate the increase to the new nationally BCF stipulated requirement of 5.3%.

## **9. RESOURCE IMPLICATIONS**

Resource implications relating to the Better Care Fund plan have been considered and reported to Health and Wellbeing Board members within the main body of this report and have been outlined in the updated Section 75 approved by the Health and Wellbeing Board on 4th December 2019.

## **10. EQUALITY AND HEALTH IMPLICATIONS**

Equality and health implications relating to the Better Care Fund plan were considered and reported to Health and Wellbeing Board members prior to

submission of the plan.

Equality Impact Assessments are ongoing as part of the development of all BCF and integrated care schemes, including new business cases, and are integral to service transformation plans. An updated EIA will be completed as part of the new national planning requirements due to be released in September 2020.

## 11. CONSULTATIONS

The details of engagement and consultation with service providers, patients, service users and the public have been reported to Health and Wellbeing Board members throughout development of the local BCF 2019/20 plan.

<b>VERSION:</b>	<b>1</b>
<b>CONTACT OFFICER:</b>	Samantha Wallace-Jones
<b>DATE:</b>	27.8.20
<b>BACKGROUND PAPER:</b>	

