

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Katherine White, Deputy Director, Adults and Health, Adult Social Care, BwD Local Authority Sam Proffitt, Chief Finance Officer, LSC Integrated Care Board.
DATE:	5th December 2023

SUBJECT: Better Care Fund Plan 2023/25 & Quarter 2 Budget Update 2023/24

1. PURPOSE

The purpose of this report is to:

- Provide assurance to Health and Wellbeing Board (HWBB) members by way of a Better Care Fund update on the local plans submitted for 2023/25
- Provide HWBB members with the Better Care Fund (BCF & iBCF) Pooled budget update for Quarter 2 of 2023/24.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

Health and Wellbeing Board members are recommended to

- Note the Blackburn with Darwen Better Care Fund Plans submitted for 2023/25 in relation to delivery and performance targets
- Note the Better Care Fund (BCF) Quarter 2 2023/24 delivery and financial position.

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 schedule of mandatory reporting. The management of the plan is undertaken through Blackburn with Darwen's joint commissioning arrangements and governance structures.

This report provides an account of the progress made against each of the performance metrics, scheme priorities and financial expenditure throughout the year.

The formal Section 75 agreement, detailing the pooled budget arrangements between the Local Authority and the ICB has been updated for 2023/24. No substantial changes were made to the agreement.

The Better Care Fund Policy Framework and Planning Requirements for 2023/25 have been submitted in accordance with the timeline of 28th June 2023. This being a 2 year plan. The Better Care Fund Plan for Blackburn with Darwen Place was approved by NHS England on 21st September 2023.

In line with Better Care Fund plans across the Integrated Care Board, all BCF schemes will be reviewed during the course of 2023/24. As part of the review process, a workshop was undertaken on 25th May 2023, which was well attended by colleagues from across the partnership. The outputs from the workshop for BwD Place BCF, will support the development of the BCF schemes going forward.

4. RATIONALE

The Better Care Fund was established by Central Government to provide funds to local areas to support the integration of health and social care services and models of delivery. Section 75 of the National Health Service Act (2006) 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. All BCF monitoring and progress reports are required to be reported to the Health and Wellbeing Board on an ongoing basis.

5. KEY ISSUES

5.1 Better Care Fund Plan 2023/24

The Better Care Fund (BCF) Policy Framework sets out the Government's priorities for 2023/25, including improving discharge, reducing the pressures on Urgent and Emergency Care and social care, supporting intermediate care, unpaid carers and housing adaptations.

The National BCF template outlines the reporting requirements and has sections relating to data and narrative which provide a summary of performance against metric targets, finances, and schemes. It is important to note that for some of the nationally set targets, data was not available due to the main provider across the BwD areas (East Lancashire Hospital NHS Trust) implementing a new Electronic Patient Record (EPR) system which has meant there have been some issue with data submission that impacts the reporting of Q1 and Q2 periods. Data is expected to be available for the full reporting period by the end of quarter 3, December 2023.

The development and commissioning of the Better Care Fund schemes focuses around a collaborative approach to delivering integrated, person-centred services across health, care, housing, and wider public services, with strong governance processes in place. The overarching aim is to support people to remain living well and independently at home, to improve outcomes for people in our neighbourhoods, including those discharged from hospital, and to reduce health inequalities.

The five national metric targets (below) were set for 2023/24 and the performance against the targets monitored throughout the year via regular BCF governance and finance meetings and quarterly reports to the HWBB. A summary of the metric targets submitted in the Quarter 2 reporting are provided in the table below:

Table 5.1a Metric targets

National BCF Targets	Performance & narrative
<p>Metric 1: Avoidable Admissions - Unplanned hospitalisation for chronic ambulatory care sensitive conditions</p> <p>Target Q2 is 282.22 per 100,000 population</p>	<p>Data not available to assess progress: Secondary Uses Service (SUS) activity data within the national system for healthcare data is not complete due to the main provider across the BWD area (East Lancashire Hospital NHS Trust) implementing a new Electronic Patient Record (EPR) system which has meant there have been some issues with data submissions affecting both Q1 and Q2 reporting periods. Data is expected to be available for all reporting periods at the end of Qtr 3.</p>

<p>Metric 2: Discharge to normal place of residence – percentage of people who are discharged from acute hospital to their normal place of residence</p> <p>Target Q2 is 90.0%</p>	<p>On Track: Actual is 90.2%</p> <p>It should be noted that there is a risk that this is an incomplete data set due to the difficulties described above with respect to the implementation of a new Electronic Patient Record system within East Lancashire Hospital Trust.</p>
<p>Metric 3: Falls – Emergency hospital admissions due to a fall in people aged 65 and over, directly standardised rate per 100,000</p> <p>Target equates to 449 admissions for falls.</p>	<p>Data not available to assess progress:</p> <p>Secondary Uses Service (SUS) activity data within the national system is not complete due to the main provider across the BWD area (East Lancashire Hospital NHS Trust) implementing a new Electronic Patient Record (EPR) system which has meant there have been some issues with data submissions affecting both Q1 and Q2 reporting periods. Data is expected to be available for all reporting periods at the end of Qtr 3.</p>
<p>Metric 4: Residential Admissions – Rate of permanent admissions to residential care per 100,000 population (65+)</p>	<p>Not On Track: This target equates to 150 admissions for 23/24. At the 6 month point we have recorded 85 admissions. An increase in Discharge to Assess placements from hospital discharge and an increase in the use of short term care placements have contributed to this increase. This reflects an increased complexity of need within our population and at the point of discharge from hospital. We continue to closely monitor this metric as we work towards improving our position and reducing the number of people being admitted into long term residential care.</p>
<p>Metric 5: Reablement - Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services</p> <p>The target is 82%</p>	<p>On Track: Actual is 86%</p> <p>There are a range of alternatives services available in Blackburn with Darwen which support rehabilitation goals, enabling individuals to return home safely. This target has been achieved consistently each quarter despite an increase in the level of complexity of need experienced by residents.</p>

Discharge funding for both the ICB and LA is now included within the Better Care Fund pool for 23/25. Funding of £1,524,415 is allocated across a variety of schemes which support discharges from hospital and support patient/service user flow across the system. Discharge funding also supports our integrated place based winter planning, which is ongoing. Winter pressures are highly likely to be further exacerbated by the cost-of-living increases which will impact on staff and people living in borough. The Discharge funds within the BCF are utilised to build capacity into some of the critical short term intervention services such as crisis/domiciliary support, bolstering the care market, as well as Home First and Re-ablement.

Capacity and Demand data and discharge spending plans are submitted on a fortnightly and monthly basis in accordance with the Better Care Fund reporting requirements.

5.2 Disabled Facilities Grant

The Disabled Facilities Grant (DFG) is used specifically to support those who are most in need; including older people and people with disabilities who require adaptations and support to remain in their own home. The DFG budget for 23/24 has been fully allocated, however, an overall underspend remains. This is due to currently un-utilised carry forward from 22/23 following the impact of Covid restrictions since 2020. The overall budget will be utilised by the main programme activity which is DFG applications for major adaptations as well as the continuation and expansion of discretionary funding. It will also be used to financially support the national switchover from analogue to a digital telecoms infrastructure.

Forthcoming priorities include further development of the application of the discretionary funding arrangements in place with a third sector partner and looking at further creative opportunities to support people who have eligible needs.

5.3 Quarter 2 Finance Update 2023/2024

The below financial summary highlights the plans for the BCF financial budget for Quarter 2 2023/24. There is a continuation of the schemes and services funded through the Better Care Fund for 2023/24 with estimated inflation uplifts and 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 planned carry forward of £1,139,100 for the ordinary BCF into 2023-24 is included in the figures.

- The CCG minimum BCF pooled budget requirement for 2023/24 is £14,871,290 (the CCG Minimum BCF includes a 5.66% inflation uplift).
- The total DFG capital allocation for 2023/24 is £2,315,584 (i.e. £2,129,743 original allocation at same value as 2022/23 plus additional DFG funding announced on 7th September 2023 of £185,841).
- The iBCF allocation for 2023/24 is £8,349,082 (same value as 2022/23).
- The Discharge Fund allocation for 2023/24 is £1,524,415 (increase of £572,560 from 2022/23).
- 2023/24 budget for the BCF and iBCF pool including Discharge Fund is £29,959,072 including carry forwards from 2022/23 and additional ICB contingency contribution in line with risk share agreement in 2023/24 of £300,000 from the ICB.

The 2023/24 BCF allocations as above plus carry forward amounts and contingency adjustment from 2022/23 are analysed as:

- Spend on Social Care - £4,705,568 (28.8%)
- Spend on Health Care - £5,237,848 (32.1%)
- Spend on Integration - £5,727,874 (35.1%)
- Contingency - £500,000 (3.1%)
- Resources still to be allocated - £139,100 (0.9%)

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.

7. FINANCIAL IMPLICATIONS

7.1 BCF Pooled Budget Position 2023-24

The 2023/24 budget for BCF and iBCF financial plans were approved at JCRG and HWBB at the start of the financial year. A new financial budget within the total allocation of £29,959,072 was agreed and will continue to be developed further, and ratified through the joint commissioning governance as we progress through the year.

8. LEGAL IMPLICATIONS

Legal implications associated with the Better Care Fund governance and delivery have been presented to Health and Wellbeing Board members in previous reports. Section 75 of the National Health Service Act 2006 contains powers enabling NHS bodies and local authorities to pool funding into a pooled fund. The Section 75 Agreement, reviewed and updated for 23/24, provides arrangements, risk sharing arrangements and other funding streams aligned to integrated delivery, which enables the management of BCF schemes in accordance with the national conditions.

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.

10. EQUALITY AND HEALTH IMPLICATIONS

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 was completed as part of the new national planning requirements for 2023/24.

11. CONSULTATIONS

The details of engagement with service providers, patients, service users and the public have been reported to Health and Wellbeing Board members throughout development of the local BCF 2023/24 plan and will continue in the review and planning process for 2024/25.

VERSION:	0.1
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DATE:	14 th November 2023
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BACKGROUND PAPER:	
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