

# HEALTH AND WELLBEING BOARD



<b>TO:</b>	Health and Wellbeing Board
<b>FROM:</b>	Katherine White
<b>DATE:</b>	Wednesday, 19 June 2024

## **SUBJECT: Better Care Fund Update**

### **1. PURPOSE**

The purpose of this report is to:

- Provide Health and Wellbeing Board (HWBB) members with a Better Care Fund update on the end of year position for 2023/24
- Provide HWBB members with the Better Care Fund (BCF and iBCF) pooled budget update for 2024/25

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

Health and Wellbeing Board members are recommended to:

- Note the Blackburn with Darwen Better Care Fund (BCF) 2023/24 end of year position in relation to delivery and performance against targets.
- Note the BCF Quarter 1 2024/25 delivery plan and financial position.

### **3. BACKGROUND**

The Health and Wellbeing Board is accountable for the delivery of the Better Care Fund Plan and associated BCF activity, including the management of performance against the required metrics and the schedule of mandatory reporting. The management of the BCF 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.

All of the statutory planning and reporting requirements have been met throughout 2023/24.

The formal Section 75 agreement, detailing the pooled budget arrangements between the Local Authority and the Integrated Care Board (ICB) was updated for 2023/24. No substantial changes were made to the agreement.

A 2-year BCF plan was submitted last year which covers the period 2023/25. The Government and NHS England have recently published an addendum to the BCF Policy Framework and Planning Requirements for 2023-25 that sets out guidance for completing updates to BCF plans for 2024/25 with a submission deadline of 10<sup>th</sup> June 2024. The national conditions and planning requirements set in the original 2-year requirements remain. Local areas are expected to update discharge

plans, set metrics and capacity and demand estimates for 2024-25, and to confirm plans for BCF spending based on final allocations.

#### **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 Planning Requirements and Performance position for Quarter 4 2023/24**

The national BCF reporting requirements for 2024/25 were released in April 2024. The set template has sections relating to data and narrative which provide a summary of performance against metric targets, finances, and schemes. The deadline for submission of the BCF plan for 24/25 is 10<sup>th</sup> June 2024. Additionally, the BCF End of Year 2023/24 template was published in April 2024 with a return deadline of 23<sup>rd</sup> May 2024. The return of both these submissions is to be signed off by via the Council's Executive Member for Adult Health and Social Care, on behalf of the HWBB, in the absence of a timely HWBB meeting.

The development and commissioning of the BCF schemes focuses on 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) have been in place for 2023/24 and the performance against the targets has been monitored throughout the year via regular BCF governance and finance meetings and quarterly reports to the HWBB. It is important to note that for some of the nationally set targets, data has not been available due to the main provider across the BwD area, East Lancashire Hospitals Trust (ELHT) implementing a new Electronic Patient Record (EPR) system which has meant there have been some issues with data submission that have impacted on reporting. It was envisaged that data would be available for the full reporting period by the end of December 2023, however, ELHT have been undertaking ongoing data quality checks with their submissions. This has resulted in a delay to clinical coding which has impacted on outputs, alongside the usual time lag in the use of submitted data to the national BCF datasets. ELHT are informing that they expect data to be fully coded for 2023/24 by early June 2024.

Implementation of the ELHT new EPR system has specifically impacted on reporting for metrics 1 and 3 as outlined below. This issue has been escalated with ELHT Executives with a request for an urgent resolution as this data is required as part of national reporting and to support BCF planning for 2024/25.

A summary of the metric targets and the end of year position is provided in the table below:

**Table 5.1a Metric targets**

National BCF Targets	Performance & narrative
<p><b>Metric 1: Avoidable Admissions -</b> Unplanned hospitalisation for chronic ambulatory care sensitive conditions</p> <p>Target for Q4 is 268.2 per 100,000 population</p>	<p><b>Data not available to assess progress:</b></p> <p>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 (ELHT) implementing a new EPR system which has resulted in issues with data submissions affecting reporting this year. Data was expected to be available for all reporting periods at the end of Qtr 3, however there are ongoing issues due to ELHT undertaking data quality checks and a time lag with data filtering through to national datasets. This has been escalated to ELHT Executives with a request for an urgent resolution.</p> <p>Additionally, ELHT is submitting Same Day Emergency Care (SDEC) activity which may also be leading to a reduction in activity against this metric, as ambulatory care sensitive conditions are more likely to be the type of condition that become SDEC. This has been raised with the BCF national team with a request for clarification on how this shift in activity recording will be managed.</p>
<p><b>Metric 2: Discharge to normal place of residence -</b> percentage of people who are discharged from acute hospital to their normal place of residence.</p> <p>Q4 target is 90.8%</p>	<p><b>Achieved: Actual is 92.42%</b></p> <p>It should be noted that this is a provisional position for Qtr 4. There is a risk that this is an incomplete data set due to the challenges described above regarding the implementation of a new EPR system within ELHT.</p>
<p><b>Metric 3: Falls -</b> Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.</p> <p>Target equates to 449 admissions for falls.</p>	<p><b>Data not available to assess progress:</b></p> <p>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 (ELHT) implementing a new EPR system which has resulted in issues with data submissions affecting reporting this year. Data was expected to be available for all reporting periods at the end of Qtr 3, however there are ongoing issues due to ELHT undertaking data quality checks and a time lag with data filtering through to national datasets. This has been escalated to ELHT Executives with a request for an urgent resolution.</p>
<p><b>Metric 4: Residential Admissions -</b> Rate of permanent admissions to residential care per 100,000 population (65 and over)</p> <p>Target equates to 150 admissions for</p>	<p><b>Not achieved:</b></p> <p>At the end of Qtr 4 we have recorded 175 admissions. An increase in Discharge to Assess placements from hospital discharge and an increase in the use of short term placements have contributed to this increase. This reflects an</p>

23/24	increased complexity of need within our population and at the point of discharge from hospital. We continue to work closely with this metric as we work towards improving our position and reducing the number of people being admitted into long term residential care.
<p><b>Metric 5: Reablement</b> – 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><b>Achieved: Actual at the end of Qtr 4 is 88%</b></p> <p>There are a range of services 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>

In addition to the above, a significant amount of work has taken place to review and develop neighbourhoods in Blackburn with Darwen. In 2023, the Local Government Association completed a peer review of the Blackburn with Darwen Neighbourhood model. This was complemented by a local review of Integrated Neighbourhood Teams. Insight from the review was presented to partners and dedicated sessions have taken place with stakeholders to support the development of a Neighbourhood Plan as we *Refresh, Refocus, Reconnect* and *Re-energise* our collective vision and approach to neighbourhoods.

A set of overarching principles have been used to inform the development of the neighbourhood delivery action plan which includes supporting patients to manage their long-term conditions in the community, maximising the use of digital solutions to keep patients well at home and reduce admissions to hospital and residential settings.

## 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.

Forthcoming priorities include further development of the application of the discretionary funding arrangements and looking at further creative opportunities to support people who have eligible needs.

The remainder of this section of the report provides a financial summary at Q4 2023/24 and an overview of the budgets for 2024/25.

## Q4 2023/24 Finance Update

The ICB minimum pooled budget requirement for 2023/24 was £14,871,290 which is included in the total BCF budget of £17,001,033 for 2023/24. The outturn spend on BCF was £17,839,108 and after adjusting for resources carried forward from previous financial year as well as the Disabled Facilities Grant (DFG) in-year increase, there was an overall under spend for the year of £2,246,468. Of which, £1,078,714 relates to a planned carry over for the ordinary BCF for full utilisation in 2024-25. The remaining balance of £1,167,754 is in respect of Disabled Facilities Grant (DFG) which will be fully utilised in 2024-25. The end of year position for 2023/24 includes an adjustment for transfer of £1.538m to the ICB under the S75 risk sharing arrangements. This amount less £100k for ICB share of 50:50 contingency between the Council and the ICB equating to £1.438m will be returned by the ICB into the pooled budget in 2024/25 for ongoing costs of

intermediate care at Albion Mill.

Closure of the Local Authority accounts, as host of the pooled budget, is based on currently anticipated aforementioned BCF year-end position and is subject to approval at the Council's Executive Board.

The underspend has been carried forward to be spent in 2024/25 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. Activity on DFG has increased significantly during the financial year and this has had a positive financial impact on utilisation of increased funds post covid within the DFG. The capital programme of the Authority allows for carry forward of resources from one year to next and plans are being developed to ensure DFG funds are fully utilised in 2024/25. £1.17m is carried forward into 2024/25 for planned utilisation of works.

In 2023/24 the Improved Better Care Fund (iBCF) allocation of £8,349,082 and Discharge Fund award of £1,524,415 has been fully utilised.

The final 2023/24 budget for the BCF and iBCF pool was £29,959,073 (including carry forwards from previous year) and the final outturn was £27,712,605 an underspend of £2,246,468 which is detailed above and was reported in the Better Care Fund Q4 template submitted on behalf of the Health and Wellbeing Board on 23rd May 2024.

## **Q1 2024/25 Finance Update**

The below financial summary highlights the plans for the BCF financial budget for Quarter 1 2024/25. There is a continuation of the schemes and services funded through the Better Care Fund for 2024/25 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 aforementioned planned carry forward of £1,078,714 for the ordinary BCF into 2024-25 is included in the figures.

- The ICB minimum BCF pooled budget requirement for 2024/25 is £15,713,006 (the ICB Minimum BCF includes a 5.66% inflation uplift).
- The DFG capital allocation for 2024/25 is £2,323,019 (an increase of £193,276 from 2023/24).
- The iBCF allocation for 2024/25 is £8,349,082 (same value as 2023/24).
- The Local Authority Discharge Fund allocation for 2024/25 is £1,950,881 (an increase of £780,353 from 2023/24). The ICB Discharge Fund allocation for 2024/25 is £1,153,343 (an increase of £799,456 from 2023/24).
- 2024/25 budget for the BCF and iBCF pool including Discharge Fund totals £33,173,799 including carry forwards from 2023/24.

The 2024/25 BCF allocations as above plus carry forward amounts from 2023/24 are analysed as:

- Spend on Social Care - £4,800,299 (26%)
- Spend on Health Care - £5,326,076 (29%)
- Spend on Integration - £5,265,297 (29%)
- Contingency - £200,000 (1%)
- Resources still to be allocated - £2,638,048 (15%)

All BCF schemes across the Lancashire and South Cumbria ICB footprint are subject to a full review during the course of 2024/25. Further updates will be provided to HWBB as the review progresses.

## **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. The impact and implications of any newly published policy and guidance will be reported at Health and Wellbeing Board at the earliest opportunity.

## **7. FINANCIAL IMPLICATIONS**

### **7.1 BCF Pooled Budget Qtr. 4 Position 2023-24**

The final 2023/24 budget for the BCF and iBCF pool was £29,959,073 (including carry forwards from previous year) and the final outturn was £27,712,605 an underspend of £2,246,468 which is detailed above and was reported in the Better Care Fund Q4 template submitted on behalf of the Health and Wellbeing Board on 23rd May 2024.

The overall under spend for 2023/24 carried forward into 2024/25 includes £1,078,714 relating to BCF revenue pool and £1,167,754 in respect of DFG capital funds.

### **7.2 BCF Pooled Budget Qtr.1 Position 2024-25**

The Qtr. 1 2024/25 budget for BCF and iBCF financial plans have been approved by the Health and Wellbeing Board. A new financial budget within the total allocation of £33,173,799 has been agreed and will continue to be developed further, and ratified through the joint commissioning governance as we progress through the year.

## **8. LEGAL IMPLICATIONS**

To receive Better Care Funding from central government, local authorities and health bodies must comply with national conditions (agree a joint plan to deliver health and social care services which support improved outcomes against the fund's policy objectives and maintain NHS contribution to Adult Social Care) and with other conditions set out in the grant determination. This plan, agreed between local Health and Social Care commissioners, must be signed off by the Health and Wellbeing Board and governed by an agreement between the parties under Section 75 of the National Health Service Act 2006, which empowers NHS bodies and local authorities to have a pooled fund, and agreed commissioning and risk sharing arrangements. The Section 75 Agreement provides the necessary framework and arrangements to bring together the BCF budget and other funding streams aligned to integrated delivery locally 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 Agreement.

## 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.

## 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 2023/25 plan and will continue in the review and planning process for 2024/25.

<b>VERSION:</b>	<b>0.1</b>
-----------------	------------

<b>CONTACT OFFICER:</b>	Mariam Motala, Samantha Riley, Katherine White, mariam.motala@blackburn.gov.uk, samantha.riley@blackburn.gov.uk, katherine.white@blackburn.gov.uk,
<b>DATE:</b>	
<b>BACKGROUND PAPER:</b>	