

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Sayed Osman, Director of Adult Services, Neighbourhoods and Community Protection, BwD LA Roger Parr, Deputy Chief Executive/ Chief Finance Officer
DATE:	11 th March 2020

SUBJECT: Better Care Fund Update – Quarter 3

1. PURPOSE

The purpose of this report is to:

- Provide Health and Wellbeing Board (HWBB) members with a Better Care Fund (BCF) Q3 2019/20 summary of performance and delivery.
- Provide HWBB members with the BCF and Improved Better Care Fund, iBCF, finance position at the end of Q2 2019/20.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

Health and Wellbeing Board members are recommended to:

- Note the Better Care Fund Qtr. 3 2019/20 performance 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 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 deadline and schedule. The report demonstrates the progress made against each performance metrics, scheme and financial expenditure throughout the year.

BCF Plan national and regional approval

The new Blackburn with Darwen Better Care Fund Plan for 2019/2020 was approved by the Health and Wellbeing Board on 4th December 2019. The Blackburn with Darwen BCF Plan was submitted to the regional and national assurance process and was ratified on 8th January 2020 and classified as '**Approved**'. The Blackburn with Darwen Integrated Care Team will work with all Partners and Stakeholders to deliver the milestones and outcomes outlined in the Blackburn with Darwen BCF Plan 2019/20 and begin to plan for 20/21 national requirements.

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 for 2019-20 builds on the development and delivery of integration across neighbourhoods, districts and the wider Pennine Lancashire Health and Care economy, as set out in the plan approved by the Chair of the Health and Wellbeing Board on 4th December 2019.

In April 2019 the Department of Health and Social Care and the Ministry of Housing, Communities and Local Government produced a Better Care Fund Policy Framework document for 2019-20 which sets out the way in which the BCF will be implemented in financial year 2019 to 2020. The Framework includes local guidance on finance, performance metrics, assurance and approval processes.

In addition, a BCF Planning Guidance 2019/20 document was published in July 2019 and provides a framework detailing requirements for local health and social care organisations on reviewing and implementing new BCF plans for 2019-20 as outlined in section 3 above.

The BCF 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 BCF vision contributes and builds on a whole health and care system which supports the Health and Wellbeing Board's Strategy.

In February 2020, NHS England is due to publish a 1 year Policy Framework which will set out the future expectations and plans for 20/21. The Policy Framework 2020/21 will be reviewed and approval for a local plan will be sought from the Health and Wellbeing Board in June 2020.

5. KEY ISSUES

This section of the report provides a financial and metrics performance summary of Qtr. 3 2019/20 and highlights the priorities and key work plan for this financial year.

Qtr. 3 2019/20 Finance Update

5.1 BCF and iBCF Pooled Budget Financial Summary for Qtr 3 2019/20

- The Clinical Commissioning Group ('CCG') minimum BCF pooled budget requirement for 2019/20 is £11,992,199.
- The Disabled Facilities Grant (DFG) capital allocation for 2019/20 is £1,876,999.
- The 2019/20 budget for the BCF and iBCF pool is £22,621,152 including carry forwards and the winter pressures grant.

The 2019/20 allocations as above plus carry forward amounts from 2018/19 are analysed as:

- Spend on Social Care - £7,003,391 (48%)
- Spend on Health Care - £4,690,426 (32%)
- Spend on Integration - £2,279,876 (16%)
- Contingency - £543,864 (4%)

The BCF budget for 2019/20 was set following joint planning across LA, CCG finance and Social Care Leads and includes inflationary uplifts. Joint review and monitoring of the budget is undertaken every month as we progress through the year and any further pressures or savings identified in year will be shared between the LA and CCG in accordance with the S75 agreement.

5.2 BCF and iBCF Allocations for 2020/21

The minimum allocations for the BCF from CCGs in 2020-21 have now been published ahead of the BCF

Planning Requirements 2020-21. The amount for Blackburn with Darwen CCG is set at £12.635 million. The NHS Operational Planning and Contracting guidance confirms the CCG minimum contribution to the BCF will increase by 5.3% across England, as will the contribution to social care from this funding. Work is underway to set the BCF budget for 2020/21 including inflationary uplifts and this will require joint planning across LA, CCG finance and Social Care Leads.

The provisional allocations for the iBCF for 2020/21 are also now available to enable local areas key information to support consideration of the BCF alongside the main NHS operational planning round and local authority budget setting. The amount of iBCF funding for Blackburn with Darwen BC is notified at £8.1 million for the new year, which is a combination of existing allocations for this year for the iBCF and the Winter Pressures Funding.

The Disabled Facilities Grant allocations for 2020/21 are still awaited.

Qtr. 3 2019/20 Performance Update

The table below provides a summary of performance against metrics BCF targets up to Quarter 3 2019/20 with a narrative summary:

BCF Metric No	BCF Metrics Measures	Performance measure	Plan/Target	Actual performance up to November 2019
1	Reduction in non-elective admissions	On track to meet target	22,773	14,525
2	Rate of permanent admissions to residential care	On track to meet target	192 annual numerator	112
3	Reablement – proportion of over 65 still at home after 91 days from hospital discharge	On track to meet target	90.5 %	88%
4	Delayed Transfers of Care	Not on track	Total delayed days - 3440	Total delayed days - 3292

Metric 1 Reduction in non-elective admission -

The non-elective admissions data shows a consistent improvement against the national BCF target for 2019/20 with activity levels in quarter 3 being below BCF target planned levels. It should be noted that the zero length of stay activity continues to build with an increase in activity due to the introduction of the Respiratory Assessment Unit (RAU), the Ambulatory Emergency Care Unit (AECU) together with further increases through the Older Persons Rapid Assessment Unit within secondary care. This is a result of planned changes to the urgent care pathways. This activity will continue to be closely monitored by the Urgent Care Team at the CCG.

Metric 2 The rate of nursing and residential care home admissions (over 65 years)

Quarter 3 represents a significant reduction of 23% long term residential/nursing care for people aged 65 years plus. Our changes in demographics are reflected in the activity plans for 19/20. Services such as the

Independent Living Service, Reablement (including planned nights), Home first and access to therapy services maximise the opportunity for individuals to receive care in their own home or in extra care schemes. Given Blackburn with Darwen's age demographics, this target will require continual review as the population ages. It is anticipated that should the level of performance continue into Quarter 4 we will achieve this target.

Metric 3 Proportion of older people who are still at home 90 days after discharge from hospital into reablement and rehab services

Progress against the target is positive and in line with planned levels and the local Integrated Care Vision is moving forwards to progress an agreed step up pathway for complex frail older adults to avoid hospital admissions, as well as Step down assessment, rehabilitation and recovery services. The BCF plan and local approach has been to increase the numbers of people who access a period of reablement to enhance personal independence and support people to live at home for as long as they wish and are able. Blackburn with Darwen planned for 457 people in the full year to be independent at 91 days, which would be 90.5% of all discharges in the full year. At the end of Quarter 3, we are currently achieving just below this at 87.6% which reflects the increasing challenge presented by managing multiple complex health needs. However due to steady increase of approximately 3% each quarter it is likely that we will achieve this target.

Metric 4 Delayed Transfers of Care

The BCF Plan and the schemes that have been progressed and commissioned via BCF through joint planning and implementation have contributed to supporting the delivery against DToc, however due to the continued increase in demand and growing complexity of patients it has been challenging. Overall Delayed Transfers of Care (DToc) performance for the Acute Trust, which has a separate measure of no more than 3.5% delayed days, continues to broadly achieve nationally set targets in this quarter. Dedicated collaboration via a new forum between organisations/teams (Integrated Discharge Service/Complex Case Team) has supported a more joined up and better approach to tackling some longer term impacts and enables a more positive recovering position against target towards the end of this financial year.

The BCF Plan 2019/20 continues to focus on delivery at all levels including people and place based within neighbourhood's (PCN's), Integrated Care Partnership (ICP) and Integrated Care System (ICS) reflecting the future role and evolution across the wider Pennine Lancashire and Lancashire/South Cumbria footprint to ensure linkages to future system growth.

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 February 2020 and impact and implications will be reported at the June Health and Wellbeing Board meeting.

7. FINANCIAL IMPLICATIONS

No further financial implications have been identified for quarter 3. This report outlines the budget position at month 9.

For 2020/21 financial year, the CCG minimum contribution for the BCF is announced at £12.635M and the provisional allocation for the iBCF is set at £8.1M.

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 between the Local Authority and CCG which 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%.

The agreement has been approved at the BCF Joint Commissioning Recommendations Group and Executive Joint Commissioning Group in November 2019 with signatures from BwD Borough Council's Director of Adults and Prevention and BwD Clinical Commissioning Group's Deputy Chief Officer/Chief Finance Officer.

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 in 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 has been completed as part of the refresh of the local BCF 2019/20 Plan.

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.

VERSION:	2
CONTACT OFFICER:	Samantha Wallace-Jones
DATE:	10.2.20
BACKGROUND PAPER:	

