

# **Title of report: Better Care Fund (BCF) year end report 2022-2023**

**Meeting: Health and Wellbeing Board**

**Meeting date: Monday 26 June 2023**

**Report by: Integrated Systems Lead, Community Wellbeing**

## **Classification**

Open

## **Decision type**

This is not an executive decision

## **Wards affected**

(All Wards);

## **Purpose**

To review the better care fund (BCF) year-end 2022-2023 report, as per the requirements of the programme.

## **Recommendation(s)**

**That:**

- a) **The Better Care Fund (BCF) 2022-2023 year-end template at appendix 1, as submitted to NHS England, be reviewed and the board determine any further actions necessary to improve future performance.**

## **Alternative options**

1. There are no alternative options. The content of the return has already been approved by the council's Corporate Director for Community Wellbeing and Herefordshire & Worcestershire Integrated Care Board's (HWICB) accountable officer and submitted prior to the meeting of the board, in accordance with national deadlines. However this gives the board an opportunity to review and determine any further actions necessary to improve future performance.

## **Key considerations**

2. A key principle of the BCF is to use a pooled budget approach in order for health and social care to work more closely together. As the population ages, the need for integrated care to improve people's experience of health and social care, the outcomes achieved and the efficient use of

resources has never been greater. Within the overall One Herefordshire approach, the BCF plays a key enabling role in delivering our system-wide vision.

3. The National BCF team determines national reporting requirements on the overall BCF programme, which for 2022-23 was limited to an End of Year (EOY) return only.
4. The EOY template requires confirmation that the BCF national conditions continued to be met throughout the year, confirmation of actual income and expenditure in BCF section 75 agreements for 2022-23 (covering the whole of the BCF plan including the Adult Social Care Discharge Fund monies), details of significant successes and challenges during the year. This year's template also requires all local systems to provide details on actual numbers of packages and actual spend in relation to the Adult Social Care Discharge Fund.
5. The national submission deadline for the year end 2022-2023 performance return has already passed (23 May 2023) and therefore the board is requested to note the completed data, attached at appendix 1, following its submission to NHS England.
6. Herefordshire has reported that all of the national conditions, as listed below, have been met:
  - A plan has been agreed for the Health and Wellbeing Board area that includes all mandatory funding and this is included in a pooled fund governed under section 75 of the NHS Act 2006;
  - Planned contribution to social care from the NHS minimum contribution is agreed in line with the BCF policy;
  - Agreement to invest in NHS commissioned out of hospital services; and
  - Plan for improving outcomes for people being discharged from hospital.
7. The EOY 2022-23 performance data shows that Herefordshire was classed as not on track to meet the target for avoidable admissions to hospitals (unplanned hospitalisation for chronic ambulatory care sensitive conditions). The planned performance at year-end was 1106 against a metric of 605.0
8. A programme of admission avoidance including Virtual Ward and Urgent Care Response programmes will be starting and the development of an approach to integrated long term conditions management is envisaged to improve future performance.
9. The discharge to normal place of residence (percentage of people who are discharged from acute hospital to their normal place of residence) metric of 91.6% was not met, with data showing a year-end total of 90%. Lack of capacity within Herefordshire's reablement and home care market and the ability to discharge patients home from acute beds in a timely manner has seen patients being transferred to Community Hospital beds or Discharge to Assess (D2A) beds, in order to release acute bed capacity.
10. Recruitment to vacancies within Home First, the reablement service provided by Hoople, has increased and at the latter end of 2022-23, system support increased the WVT Hospital @ Home service to help bridge the gap within Home First; seeing a slight increase in the number of individuals supported to return to their own home.
11. Covid, flu and Strep A, along with increased staff absence, over the winter period saw the volume of inpatient escalation beds and bed occupancy over 100% for significant periods of time which led to a stretched workforce with a lower capacity to perform pre-discharge assessments and set up discharge plans.

12. The EOY 2022-2023 performance report shows that Herefordshire was classed as on track to meet the target for admissions to residential and care homes. Older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population target for 2022-23 was 493; data shows this target was met showing a year-end total of 517.6 (265 admissions).
13. Whilst there has been an increase this financial year there has not been any significant change from 2021-22. There was a reduction in admissions during Covid and the current rate is still below pre-pandemic levels (for example 2019-20 it was 587.42). This is a positive figure though, given the demand for residential and nursing care beds through discharge pathways.
14. Whilst we are meeting the target, we remain mindful of the limited capacity in the care market for complex cases, such as people with more challenging behaviours and system partners continue to work together, including service providers, to address these gaps. The introduction of the new D2A CAAST team (Care Act Assessment Team) has been instrumental in assessing people into the right services following discharge.
15. The effectiveness of reablement (proportion of older people still at home 91 days after discharge from hospital into reablement or rehabilitation) metric shows Herefordshire did not meet the target, showing a figure of 70.8% against a target of 80.0%.
16. The CQC Registered reablement service was transferred from Herefordshire Council to Hoople Ltd in June 2022. Some reporting issues were experienced due to staff changes, which has now been addressed. Recording improved from Q2 of 2022/23. From Q2 onwards the percentage of individuals who remain at home 91 days after leaving the service has averaged around 78% but the issues in recording in Q1 has impacted on the overall year percentage. There are some nuances with regards to obtaining accurate data out of 91 day or reablement reports as the complexity and acuity of patients being taken on by Home first has changed.
17. During 20223-23, the Improved Better Care Fund (iBCF) has been invested in a number of services to help improve the health and wellbeing of people in Herefordshire, by enabling people to take greater control over their own health and the health of their families, and helping them to remain independent within their own homes and communities.
18. Talk Community continues as one of the council's primary approaches to demand management and admission prevention.
  - The Talk Community Directory provides information, advice and signposting and contains over 800 organisations and over 390 events listed each month. Website hits have increased from 69k to 107k this last year, with 250k page views and an average of over 6k users each month.
  - 73 Talk Community Hubs are located across Herefordshire providing a safe place where local people can access information, services, groups and activities to support their wellbeing and independence.
  - Monthly Community Network meetings are held in each of Herefordshire's PCN areas, bringing together community, third sector and statutory services to connect with peers and share ideas and experiences and identify local issues.
  - Co-ordination of bi-monthly cost of living summits, to review and scope the system response to the crisis, working jointly to consider what we can do to protect people against higher costs, targeting help at those facing the most complex challenges. Strong link with our cost of living response alliance, meeting monthly with food banks, community debt centres and third party organisations to ensure help is provided to those who need it most

19. The DFG is a capital grant pooled into the BCF to promote joined-up approaches to meeting people's needs to help support more people of all ages to live in suitable housing so they can stay independent for longer.
20. Herefordshire Council's allocation for 2022/23 was £2,268m and the overall budget £3.469m after £0.54m was reprofiled to 2023/24. There was a significant underspend of £1.223m on Disabled Facilities Grants (DFG) during 2022/23, mainly due to £1.289m being carried forward from 2021/22. So the starting budget for 2023/24 is £4.031m, which includes the new allocation of £2.268m for 2023/24, plus the £1.223m carry forward and the £0.54m reprofiled from 2022/23.
21. The target set was to complete 200 mandatory DFG grants and 20 discretionary DFG or assistance grants in the financial year; a year-end total of 165 DFG/RRO grants were completed. In addition there are 51 DFGs/RROs in progress as at 31 March 2023 (active building work underway/a design and grant agreed and a contractor appointed). There are also 225 DDGs/RROs actively under consideration (adaptation being designed with OT and surveyor: discussed/ agreed with the applicant, financial assessment underway to identify size of grant/client contribution etc.).
22. The overall delivery of the BCF in Herefordshire for 2022/23 has had a positive impact on integration. Through the BCF pooled funds, the NHS funded an increase in community based resource to support the council's reablement team. The teams work together to provide a joint approach with the outcome being improved flow within the reablement team, which in turn supports better outcomes, by maximising reablement capacity.
23. The local system continues to have a number of joint roles that work across health and social care, particularly in community services/hospital discharge.
24. There continues to be challenges across the health and social care system in Herefordshire. Capacity remains an issue for the care market particularly around home care in specific geographical areas and recruitment into care roles continues to impact the local system.
25. The Adult Social Care Discharge Fund provides funding to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care and reducing the number of bed days lost to delayed discharges. The focus is on (but not limited to) a 'home first' approach and discharge to assess (D2A). This additional funding will be distributed to both local authorities and integrated care boards (ICBs) to pool into the local Better Care Fund (BCF).
26. The Department of Health and Social Care provided this funding to enable more people to be discharged to an appropriate setting, including from mental health inpatient settings, with adequate and timely social care support as required; prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing bed days lost within the funding available; and boost general adult social care workforce capacity through recruitment and retention, where that will help to reduce delayed discharges. This could include, but is not limited to, measures which: increase hours worked by existing workforce; improve retention of existing workforce; provide additional or redeployed capacity from current care workers; or support local recruitment initiatives

## **Community impact**

27. The BCF plan is set within the context of the national programme of transformation and integration of health and social care. The council and HWICB continue to work together to deliver on the key priorities within the plan to achieve savings and improve the delivery of services in order to achieve the priorities of the health and wellbeing strategy in the most cost effective way.

## Environmental Impact

28. Herefordshire Council provides and purchases a wide range of services for the people of Herefordshire. Together with partner organisations in the private, public and voluntary sectors we share a strong commitment to improving our environmental sustainability, achieving carbon neutrality and to protect and enhance Herefordshire's outstanding natural environment.
29. Whilst this is a report regarding programme delivery and will have minimal environmental impacts, consideration has been made to minimise waste and resource use in line with the Council's Environmental Policy.

## Equality duty

30. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:  
A public authority must, in the exercise of its functions, have due regard to the need to –
  - a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
31. It is not envisaged that the recommendations in this report will negatively disadvantage the following nine groups with protected characteristics: age, disability, gender, reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
32. The BCF programme aims to deliver better outcomes for older and disabled people and supports the council in proactively delivering its equality duty under the act. This is through improving the health and wellbeing of people in Herefordshire by enabling them to take greater control over their own homes and communities. There are no negative impacts for looked after children or with respect to the council's corporate parenting role.
33. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. The Sustainability and Transformation Partnership (STP) is developing a more joined up approach to its equality duties, and has an STP equality work stream which is developing a robust and uniform approach to equality impact assessment across Herefordshire and Worcestershire which the BCF will be included.
34. Where appropriate, an Equality Impact Assessment (EIA) is undertaken for separate schemes and services that are within the BCF. Where large changes are planned via the BCF an EIA will be completed.

## Resource implications

35. The table below shows the summary of the Final out-turn expenditure variances to plan resolved as set out in schedule 4 (Risk Share) of the s75 agreement. A more detailed forecast for each pool within the section 75 agreement is available upon request.
36. Pool 2- Intentionally blank- formally 'Additional Voluntary Contributions to BCF' currently no additional contributions.
37. Pool 4- Intentionally blank- formally 'Winter Pressures Grant' realigned into iBCF at a national level.
38. Pool 5 (Children's Services and Pool 6 (ICES) are part of the s.75 agreement but not part of the BCF plan reporting.

Section 75 Agreement- Summary of Pool Balances	Annual Plan	Actual Out-turn	Final Over / (Under) Spend	% Over / (Under) Spend	Risk Share Adjustment	Revised Out-turn after Risk Share Adjustment	Revised Over / (Under) Spend	Revised % Over / (Under) Spend
	£,000	£,000	£,000		£	£	£	
Total Pool One- Mandated Revenue & Capital Contributions	17,400,612	17,841,235	440,624	2.5%	(440,623)	17,400,612	0	(0.0%)
Total Pool Three- Improved Better Care Fund	6,782,552	7,032,376	249,824	3.7%	(249,824)	6,782,552	0	0.0%
Total Pool Five- Children's Services	5,560,894	5,921,563	360,669	6.5%	(360,669)	5,560,894	0	0.0%
Total Pool Six- Integrated Community Equipment Store (ICES)	1,854,219	1,695,372	(158,846)	(8.6%)	158,846	1,854,219	0	0.0%
Total Pool Seven- Adult Social Care Discharge Fund	1,291,812	1,291,812	0	0.0%	0	1,291,812	0	0.0%
<b>Total Section 75 Agreement Funding</b>	<b>31,598,277</b>	<b>32,490,547</b>	<b>892,270</b>	<b>2.8%</b>	<b>(892,270)</b>	<b>31,598,277</b>	<b>0</b>	<b>(0.0%)</b>

## Legal implications

39. The Care Act 2014 amended the NHS Act 2006 to provide the legislative basis for the BCF. It allows for the Mandate to NHS England to include specific requirements to instruct NHS England over the BCF, and NHS England to direct Integrated Care Boards to pool the necessary funding. The council is legally obliged to comply with grant conditions, which have been complied with.
40. Health and wellbeing boards are responsible for encouraging integrated working between health and social care commissioners, including partnership arrangements such as pooled budgets, lead commissioning and integrated provision.
41. Their purpose is to establish collaborative decision making, planning and commissioning across councils and the NHS, informed by the views of patients, people who use services and other partners.
42. Overseeing the deployment of BCF resources locally is a key part of their remit. BCF plans have to be signed off by the health and wellbeing board as well as the HWICB, which represents the NHS side of the equation.

## Risk management

43. The board is invited to review the content of the performance template, which is based on statistical and financial information and therefore the risk is minimal.
44. Monitoring the delivery of the Herefordshire BCF Plan is undertaken by the council and HWICB. The Integrated Systems Lead monitors a risk register and escalates to the directorate risk register where necessary. Higher risks will also be escalated to the council's corporate risk register in accordance with the council Risk Management Plan.

Risk / opportunity	Mitigation
Targets not being met	Partners will continue to work together to address demands and continue with a programme of improvements and regular monitoring

## Consultees

45. The year-end report received input from financial, operational and strategic stakeholders from the council and HWICB.

## Appendices

Appendix 1 – Better Care Fund 2022-2023 year end national performance template.

## Background papers

None

## Report Reviewers Used for appraising this report:

**Please note this section must be completed before the report can be published**

Governance	Sarah Buffrey	Date 13/06/2023
Finance	Karen Morris/Judith Tranmer	Date 07/06/2023
Legal	Sam Evans	Date 07/06/2023
Communications	Luenne Featherstone	Date 05/06/2023
Equality Duty	Harriet Yellin	Date 13/06/2023
Procurement	Lee Robertson	Date 09/06/2023
Risk	Jo Needs	Date 05/06/2023

Approved by [Click or tap here to enter text.](#) Date [Click or tap to enter a date.](#)

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

Acronym	Description
BCF	Better Care Fund
iBCF	Improved Better Care Fund
HWICB	Herefordshire & Worcestershire Integrated Commissioning Board
EIA	Equality Impact Assessment
EOY	End of Year
D2A	Discharge to Assess
DHSC	The Department of Health and Social Care
DFG	Disabled Facilities Grant