

Health & Wellbeing Board Buckinghamshire

Better Care Fund 2021-22 Plan

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Introduction

- The Better Care Fund (BCF) is a national vehicle for driving health and social care integration
- It requires a jointly agreed plan to be set and owned by each HWB, using a pooled budget
- Now want to build on progress made during the pandemic
- Aim to strengthen integration, delivery of person-centred services and enable system recovery
- There will be continued focus on improving how and when people are discharged from hospital

2021-22 Overview



BCF 2021-22
(£42,494,480)

- Policy guidance published 19th August
- Allocations published 30th September
- The total allocation for 2021-22 is **£42,494,480**. This includes:
 1. Minimum CCG contribution
 2. Improved Better Care Fund (iBCF)
 3. Disabled Facilities Grant (DFG)
- Due to ongoing system pressures this will be a 1-year plan with minimal changes

Funding overview

1. Minimum CCG Contribution

- Total allocation is £33,535,839
- At least £11,236,611 is mandated for Adult Social Care and allocated against a variety of schemes
- This is a **5.52% increase** on the 2020-21 allocation
- At least £9,536,590 is mandated for NHS Commissioned out of hospital spend
- Continues to include funding to support:
 - Implementation of the Care Act 2014
 - Reablement
 - Provision of carers breaks
- Can pool additional funding if desired



CCG Minimum
Contribution
(£33,535,839)

Funding overview

2. Improved Better Care Fund (iBCF)

- Confirmed as £4,892,680 for 2021-22
- This is **the same as** 2020-21



3. Disabled Facilities Grant (DFG)

- Confirmed as £4,065,961 for 2021-22
- This is **the same as** 2020-21
- Due to the move to unitary council status, this is no longer passported to District Councils



Schemes funded through the BCF

- **CCG Minimum – Fully Funded**
 - BC Hospital Discharge Teams supporting delivery of D2A
 - BC Home Independence Team
 - BC Short Term Intervention Team
 - British Red Cross Home from Hospital Service
 - Assistive Technology Service
 - Alzheimer’s Society Memory Support Service
 - BHT Falls pathway
 - Advocacy (POWHER) and DOLS services
- **CCG Minimum – Part Funded/Contribution**
 - Integrated Commissioning functions for delivery of quality care
 - Carers Bucks Integrated Carers Service (Not children’s element)
 - BHT Integrated Community Health Services
 - LA additional placement pressures from D2A (non-HDP funded)

Schemes funded through the BCF

- **iBCF**

- Brokerage to support self-funders
- Healthwatch community engagement contract
- Contribution to 65+ placements for residential and nursing care, respite, step up/step down and supported living to support pressures
- Contribution to Direct Payments

- **DFG**

- Mandatory capital funding of home adaptations
- Schemes linked to enabling discharge/admission avoidance including:
 - Deep cleans supporting homeowners that self-neglect
 - Healthy Homes on Prescription Grant – essential works to address health and safety hazards in the home

Locally – What's changed for 2021-22?

- System BCF working group set up as part of local BCF review
- BCF Action plan put in place to support BCF review
- Reviewed and re-mapped BCF expenditure
 - Realigned to reflect changes post ASC Ops restructure
 - New schemes added which contribute to BCF outcomes
 - Split out expenditure related to Care Act Pressures to enable clearer and more measurable reporting
 - Identified services/schemes for review for 2022

Nationally – What’s changed for 2021-22?

- National condition 4 amended to reflect changes to hospital discharge pathways:
 - Now: ***“Plan for improving outcomes for people being discharged from hospital”***
 - Changed from: *“a clear plan on managing transfers of care including implementation of the High Impact Change Model for Managing Transfers of Care....adopt the centrally-set expectation for reducing or maintaining rates of delayed transfers of care...”*
- Metrics revised (see slide 11)
- Reviewing further support for the COVID-19 response and recovery, including funding for the hospital discharge policy
- BCF spending plans for Q3 & Q4 to take into account future funding decisions relating to this

Meeting National Condition 4

- Demand and capacity modelling taking place to facilitate more effective and strategic commissioning
- Home First pathway being reviewed to create a more simplified and streamlined pathway
- Setting up of an Integrated Hub to facilitate greater MDT working
- Understanding the impact of CHC and complex case delays on LOS
- Developing clarity around pathways to ensure appropriate people go through D2A
- High Impact Change Model – continue to use this support tool to enable successful delivery and implementation of the discharge policy

Metrics and Reporting

- Delayed transfers of care (DToC) suspended March 2020 – metric to be replaced with **discharge indicators**.
- For 2021-22, as an interim measure, this data will be collected from hospital systems through NHS Secondary Uses Service
- Focuses on improvements in
 - Length of stay (% of inpatients longer than 14 and 21 days)
 - Proportion of people discharged home to their usual place of residence
- Non-elective admissions replaced with **avoidable admissions**
 - Better reflects joint health and social care work to support independent living and prevent avoidable stays in hospital
- Targets to be set from Q3 of 2021-22

Metrics and Reporting

- **Effectiveness of reablement** metric remains
 - 2020-21's outturn for the 91-day reablement measure was 87.9% against a target of 75%.
 - This is a significant increase on the 2019-20 performance of 77%.

Data Summary - 20-21

	Yes	No	Unknown	Total	% at home
At home at 91 days - RRIC	75	6	6	87	86.2%
At home at 91 days - ASC	187	22	2	211	88.6%
	262	28	8	298	87.9%

- Target to be set as 77% in line with BC corporate target for this indicator as impact of covid on last year's performance unclear at this point. This is in line with SE regional performance of 76.9% (ASCOF 2020)

Metrics and Reporting

- **Long term admissions to care homes** remains
 - Due to the transfer of data from AIS to LAS, reporting on this metric for 2021-22 will be available from October/November
- The 2020-21 care home admission metric **was met**, with a rate of 329 against a pro-rated target of 350 for admissions to 16th February 2021
- The target for 2021-22 is to be set as 526.5 admissions per 100,000 population per year in line with the BC corporate indicator. This is equal to SE Regional performance in 2019-20 and remains lower than the England average of 584 (ASCOF 2020).

Assurance

- Planning template completed
- Sign off through BC and BCCG governance including HWB
- Draft plan submitted and reviewed
- Final plan submitted
- Regional assurance and moderation
- Formal approval of plan received

Future of BCF - Nationally

- The BCF review, committed as part of the NHS long term plan, concluded:
 - A fund should continue, dismantling it would be a backward step
 - The NHS contribution to Social Care should be maintained
 - More clarity around BCF policy and aims is required
- Positive changes resulting from Covid-19 need to be built upon
- Areas are in different stages towards better joint working
- Proposals set out in the Health and Care Bill will impact longer term system thinking and planning – future BCF arrangements will support these proposals
- Government will explore options to introduce incentives linked to improved discharge outcomes

Future of BCF - Locally

- Continue to deliver against the BCF action plan including:
 - Further review of expenditure for 2022 onwards
 - Strategic planning in response to upcoming changes to enable greater integration
 - Review and develop internal reporting on performance and outcomes
 - Review and update the S75 pooled budget agreement
 - Share best practice across the ICS and other HWB areas
 - Align to other national initiatives such as the Ageing Well Programme
- When there is clarity around future hospital discharge funding, ensuring future plans support delivery of improving outcomes for those discharged from hospital
- Incorporate changes to CCGs and ICS's ensuring a place-based commissioning model remains to support integration within Buckinghamshire
- Utilise opportunities for support from the national BCF team to embed this

Recommendations for the Board

- **To note** the Better Care Fund budget for 2021-22 and schemes to be funded
- **To delegate** authority for the allocation of expenditure for 2021-22 to lead officers for BC Integrated Commissioning and Buckinghamshire CCG
- **To delegate** authority for final approval of the 2021-22 plan, including locally set metrics, to lead officers for BC Integrated Commissioning and Buckinghamshire CCG. This will include final oversight by the Corporate Director – Adults and Health, on behalf of CMT and HWB.
- **To approve** that the Integrated Commissioning Team continue to service all requirements of the BCF, including reporting via the Integrated Commissioning Executive Team on performance and bi-annual updates to Health and Wellbeing Board.