



HEALTH & WELLBEING BOARD

Subject Heading:

Better care Fund End of Year Submission 22-23
Better Care Fund Planning template 2023-25

Board Lead:

Barbara Nicholls
Director Adult Social Care

Report Author and contact details:

Laura Neilson
Acting AD Joint Commissioning
Laura.Neilson@haverling.gov.uk

The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

<input type="checkbox"/>	The wider determinants of health <ul style="list-style-type: none">• Increase employment of people with health problems or disabilities• Develop the Council and NHS Trusts as anchor institutions that consciously seek to maximise the health and wellbeing benefit to residents of everything they do.• Prevent homelessness and minimise the harm caused to those affected, particularly rough sleepers and consequent impacts on the health and social care system.										
<input type="checkbox"/>	Lifestyles and behaviours <ul style="list-style-type: none">• The prevention of obesity• Further reduce the prevalence of smoking across the borough and particularly in disadvantaged communities and by vulnerable groups• Strengthen early years providers, schools and colleges as health improving settings										
<input checked="" type="checkbox"/>	The communities and places we live in <ul style="list-style-type: none">• Realising the benefits of regeneration for the health of local residents and the health and social care services available to them• Targeted multidisciplinary working with people who, because of their life experiences, currently make frequent contact with a range of statutory services that are unable to fully resolve their underlying problem.										
<input checked="" type="checkbox"/>	Local health and social care services <ul style="list-style-type: none">• Development of integrated health, housing and social care services at locality level.										
<input type="checkbox"/>	BHR Integrated Care Partnership Board Transformation Board <table border="0"><tbody><tr><td>• Older people and frailty and end of life</td><td>Cancer</td></tr><tr><td>• Long term conditions</td><td>Primary Care</td></tr><tr><td>• Children and young people</td><td>Accident and Emergency Delivery Board</td></tr><tr><td>• Mental health</td><td>Transforming Care Programme Board</td></tr><tr><td>• Planned Care</td><td></td></tr></tbody></table>	• Older people and frailty and end of life	Cancer	• Long term conditions	Primary Care	• Children and young people	Accident and Emergency Delivery Board	• Mental health	Transforming Care Programme Board	• Planned Care	
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• Planned Care											



SUMMARY

The purpose of this report is to brief the HWBB on the 23-25 BCF plan and seek approval.

In addition, the End of Year Report for 22-23 is submitted for the HWBB to note following the submission in May 2023.

The BCF is a national programme to pool resources and budgets between LAs and the NHS and to support the integration of health and social care.

The two core BCF objectives are:

1. Enabling people to stay well, safe and independent at home for longer
2. Providing the right care in the right place at the right time.

To achieve these objectives each HWBB is required to develop a joint BCF plan setting out how the BCF funds will be spent and this is governed by a S.75 agreement.

The BCF consists of:

- A narrative plan written or influenced by local partners
- A template that includes
 - Budget and projected spend
 - A set of KPIs
 - A demand and capacity plan

RECOMMENDATIONS

1. HWBB to note the BCF End of Year template 2022-23 submitted to NHSE in May 2023
2. HWBB to approve the submission of the BCF Narrative and Expenditure Templates for 2023-25

REPORT DETAIL

1. Background

BCF 2022-23: There is a requirement to submit an End of Year template to demonstrate how the BCF has been effective in delivering its schemes. This covers performance metrics, income and spend, and successes and challenges. This template also includes the Adult Discharge Fund spend.

BCF 2023-25: The vision for the BCF over 2023-25 is to support people to live healthy, and independent lives through joining up health, social care and housing services seamlessly around the person. This is underpinned by the two core BCF objectives:

1. Enable people to stay well, safe and independent at home for longer
2. Provide the right care in the right place at the right time

Each HWBB is required to develop a joint BCF Plan setting out how BCF funds will be spent, and this is governed by an agreement under section 75 of the NHS Act (2006).

2. Finance:

Total allocation for 23/24 is £35.8m as outlined below.

	23/24 Allocation
Disabled Facilities Grant	£2,056,802
Improved Better Care Fund	£6,824,956
NHS Minimum Fund	£22,771,397
NHS Additional Funding	£572,000
LA Additional Funding	£873,730
Local Authority Discharge Fund	£956,848
ICB Discharge Funding	£1,762,000

Total	£35,817,734
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3. Metrics:

The following metrics and targets have been agreed as part of the planning process

Metric	Target 23/24
Admissions avoidance	Have a maximum of 689 admissions for known conditions
Emergency Hospital admissions due to falls	To reduce falls presentations by 2%.
Discharge to usual place of residence	Maintain 90.4% performance.
Residential Admissions	550 per 100,000 pop.
Reablement - those still at home 91 days post discharge	88%

The metric relating to emergency admissions due to falls is new for 23-25

4. Demand and Capacity:

The demand and capacity template requires submission of expected capacity and demand for services across discharge, intermediate care and the community.

The areas covered in the demand and capacity template include

1. Urgent Care response
2. Rehab in the community
3. Rehab in a bedded setting



4. Reablement at home
5. Reablement in a bedded setting
6. Social care VCS - Home and Settle

5. The narrative:

The narrative plan includes detail around the key schemes that will be implemented / further developed in 2023 – 25 which meet the requirements of the following National Conditions

National Condition 1	A jointly agreed plan between local health and social care commissioners, signed off by the HWB
National Condition 2	Implementing BCF Policy Objective 1: Enabling people to stay well, safe and independent at home for longer
National Condition 3	Implementing BCF Policy Objective 2: Providing the right care, at the right place, at the right time
National Condition 4	Maintaining the NHS's contribution to adult social care (in line with the uplift to the NHS minimum contribution to the BCF), and investment in NHS commissioned out of hospital services

Key local schemes for 23-25:

In addition to the BHR wide schemes described in the narrative plan particularly around discharge, there are also a number of Havering Place level schemes which will be implemented / further developed in 2023-25, these include:

- Community reablement
- Ward Led Enablement
- Local Area Coordination
- Residential Discharge to Assess

6. Management of the BCF:

The BCF is managed through the BHR wide BCF Executive group which reports into the Joint Commissioning Board

Section 75 Agreement:

The current S.75 agreement is at BHR level and will be disaggregated during 23-24 for a Havering Place agreement to be in place for April 2024

7. Timeline for sign off

Plans are to be submitted by **28 June 2023**, and will be assured and moderated regionally, as well as calibrated across regions. Following this, plans will be put forward for approval by NHSE, in consultation with DHSC and DLUHC, with approval letters issued (giving formal permission to spend the NHS minimum) by **8 September 2023**.



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IMPLICATIONS AND RISKS
<p>Key risks relating to the BCF plan 23-25 are outline in the risk log in Appendix 1 of the narrative plan. These will be monitored and managed via the BCF Executive group.</p> <p>There are no specific legal or staffing implications arising from the End of Year submission or the BCF Plan 23-25.</p>
BACKGROUND PAPERS
<p>BCF End of Year submission 2023-24 BCF Planning template 23-25 BCF Planning narrative template</p>