

Item No. 13.	Classification: Open	Date: 18 November 2019	Meeting Name: Health and Wellbeing Board
Report title:		Better Care Fund 2019/20	
Ward(s) or groups affected:		All	
From:		Sam Hepplewhite, Director of Integrated Commissioning, NHS Southwark CCG Genette Laws, Director of Commissioning, Southwark Council	

RECOMMENDATION

1. That the Health and Wellbeing Board
 - note the Better Care Fund template 2019/20 submitted to NHS England for assurance on 27 September.
 - note the performance on key BCF targets during 2019/20

BACKGROUND INFORMATION

2. The Better Care Fund (BCF) was first established in 2015/16 as a national policy initiative to drive forward the integration of health and social care services by requiring local councils and CCGs to agree a pooled budget and an associated BCF plan for community based health and care services.
3. The Better Care Fund Plan needs to be agreed by the council, the Southwark NHS Clinical Commissioning Group (CCG) and the Health and Wellbeing Board prior to national submission for approval by NHS England.
4. An update on the BCF planning process and approach to finalising the plan was reported to the Health and Wellbeing Board on June 26, noting the substantial delay by NHS England in issuing national planning requirements for 2019/20. To meet the compressed timescales the Board agreed that the approval of the plan for submission would be undertaken on a delegated basis by the chair on behalf of the board, following sign off by both the accountable officer of the CCG and the strategic director of the Council. It was agreed the plan would be circulated to Board members at the time and would then be reported to the next scheduled meeting.
5. Planning guidance was issued in July and the planning template was completed in line with the approach outlined in the June BCF report. The Chair of the Health and Wellbeing Board approved the BCF plan for submission on 27 September following agreement by the Council and CCG. The plan is currently undergoing national assurance with approval to the plan expected in mid-November, which will enable the formal pooled budget to be established.

KEY ISSUES FOR CONSIDERATION

BCF allocation and growth since 2018/19

6. The final BCF Plan template is attached in appendix 1.
7. The value of the 2019/20 BCF and funding sources, showing growth from 2018/29 is set out below:

BCF pooled budget total			
Funding Sources	18/19	19/20	growth
a) Disabled Facilities Grant	£1,377,165	£1,486,043	£108,878
b) Minimum CCG Contribution	£21,449,545	£22,654,606	£1,205,061
c) IBCF grant	£12,584,184	£15,751,933	£3,167,749
d) Winter Pressures Grant	£0	£1,570,648	£1,570,648
Total	£35,410,895	£41,463,230	£6,052,335

8. As set out in the June report to the Board, the agreed strategy had been to essentially roll forward 2018/19 budgets to provide stability for services given the delay in clarifying national BCF arrangements. Decisions on use of growth were based on joint agreement about priority areas, with a particular focus on investments that will improve performance on the key target to reduce delayed transfers of care, on which Southwark has experienced significant growth over the last year.
9. With the exception of the higher than expected inflation in the CCG minimum contribution (see b below), the growth had been anticipated in budget planning processes for 2019/20.

Notes on growth items:

- a) **Disabled Facilities Grant:** For the Disabled Facilities Grant (DFG) growth of £108k it has been agreed with Housing this is to be used on issuing home improvement grants in line with DFG requirements, and to increase the speed of assessments for housing adaptations through additional occupational therapy input.
- b) **CCG minimum contribution:** There is £1.2m uplift in the CCG minimum contribution, shared proportionally between Social Care and CCG commissioned services for which there are set minimum investment levels. This reflects an uplift of 5.7% in line with overall CCG budget growth. This was announced in July and is substantially more than the CCG planned for (on the basis of national planning advice) in the planning round in January 2019 (£380k) which was based on a 1.8% uplift. This initially created a funding gap which was recognised by NHSE. To obtain the additional funding for the full Social Care element of the additional uplift (£570k) the CCG applied for a grant from NHSE for which a condition is that it will be used to help deliver the social care related aspects of NHS Long Term Plan implementation. This grant has been approved. For the CCG additional funding uplift (£250k) no funding is available, and CCGs have been advised to bring existing budgets for relevant CCG commissioned community based health services into the BCF to meet the minimum requirement.

- c) **Improved Better Care Fund Grant:** £3.1m growth is in the council's Improved Better Care Fund grant which is ringfenced for council adult social services.
- d) **Winter Pressures Grant:** this £1.5m growth relates to the winter pressures council grant, also ring fenced for social care services. Last year this sum was paid directly to councils at short notice in November without a requirement for it to be pooled into the BCF. It is specifically used to fund services required to discharge people from hospital.

Decisions on use of growth

10. The table below sets out the use of growth agreed at the September 16th Health and Social Care Partnership Board reflected in the BCF template attached in annex 1:

Area	Growth	Application	Amount	Note	
1. DFG	£108,878	1.1 Agreement to use to fund OT and additional DFG capital spend to increase timeliness of adaptations process	£108,878		
2 BCF minimum contribution on inflation	£1,205,061	a) Core growth 1.79% (£383,947):			
		2.1 Neuro-rehab growth (CCG):	£8,677	Agreed on transfer from council to CCG lead commissioner	
		2.2 Mental Health Discharge worker (council):	£50,000		
		2.3 Mental Health Social Worker Complex Cases (Council)	£60,000		
		2.4 Mental Health Placement Broker (Council)	£50,000		
		2.5 Housing worker for hospital discharge (council)	£50,000		
		2.6 Discharge to assess – cost pressure for social services (council). PART 1	£64,957	PART 2 funded from additional growth grant below. (2.8) Total £260,000	
		2.7 Discharge to assess cost pressure for CCG:	£100,313	CCG share of core inflation	
		Sub-total	£383,947		
		b) Additional growth to 5.7% (£821,114):			Nb. Treated separately as different conditions apply
		1. Use of grant for Social Services inflation uplift (£570,414):		CCG grant agreed	
		2.8) Discharge to assess PART 2 (part 1 in 2.6)	£195,043	Total £260,000 Part 1 and 2.	
		2.9) Staffing Pressures (Council staff)	£300,000	Additional funding for potential increase in costs for social work	

Area	Growth	Application	Amount	Note
				and OT staff
		2.10) Pooled budget for complex joint discharges	£75,371	Added to 5.2 gives total of £175,371
		2. CCG increase (£250,700)		Unfunded growth
		2.11). Enhanced Rapid Response and at home Community Health service	£250,700	Existing budget to be bought into BCF. Current spend on these services exceeds the BCF contribution.
		Sub-total	£821,114	
		<i>Total</i>	<i>£1,205,061</i>	
Area	Growth	Application	Amount	Note
3. IBCF (all council social services)	£3,167,749	Agreed:		
		3.1 Sustaining quality in home care by paying a fair price for care and complying with the SECC	£368,000	
		3.2 Rebuilding Southwark's nursing home market by investing in high quality and local nursing care homes and supporting social care providers generally	£1,800,000	
		3.3 Reablement and Intermediate care including bed based care model	£999,749	
		Total	£3,167,749	
4. Winter Pressures Grant (all council social services)	£1,570,648	4.1-Winter Pressure grant plan: Provider Cost Pressures (approx. 5%): 4.1.a OP Residential – £400,000 4.1b OP Nursing – £300,000 4.1c OP Homecare £870,648	£1,570,648	
Total	£6,052,335		£6,052,335	

Redirected funding from reduction in current schemes:

11. In addition to the above growth in the BCF, a sum of £264,000 was released by adjustments to existing budgets:

Area	Growth	Application	Amount	Note
redirected funding	£264,000 (joint)	To be agreed		
		5.1 joint contingency for potential growth in community equipment costs	£164,000	
		5.2 Pooled budget for joint S117 discharges	£100,000	Combined with 2.1 gives £175k
		Total	£264,000	

Application of funding: revised BCF budgets 2019/20:

The full 2019/20 BCF budget after growth is set out below.

ref	Scheme	Budget holder	2019/20
	Theme 1: Hospital Discharge – I get the support I need to leave hospital and settle back at home		
1	Hospital discharge	LA	£1,790,453
2	Reablement	LA	£1,936,738
3	Neuro rehab team	CCG	£197,886
4	Shared budget for complex joint discharge	LA/CCG	£176,120
5	Discharge to Assess – council costs	LA	£260,000
6	Discharge to Assess – CCG costs	CCG	£100,313
7	Night Owls - overnight intensive homecare	LA	£224,000
8	Housing worker – discharge team	LA	£50,000
9	Contingency – council staff	LA	£300,000
10	Intermediate Care	LA	£1,137,563
	Sub-total – hospital discharge		£6,173,073
	Theme 2: Admissions avoidance - I get support that reduces the need to be in hospital		
11	Community Health Enhanced Rapid Response /@home	CCG	£4,216,105
12	Care home pharmacist	CCG	£47,095
13	Enhanced Primary Care Access - 7 day services	CCG	£743,000
14	Self-management for long terms conditions	CCG	£307,000
	Sub-total		£5,313,200
	Theme 3: Community support and maintenance - I am helped to live in my community		
15	Home care quality improvement	LA	£1,900,000
16	Dementia - Enhanced neighbourhood support	LA	£184,177
17	End of life care	LA	£152,905
18	Disabled Facilities Grant	LA	£1,486,043
19	Protect Adult Social Care - Residential Care	LA	£2,010,619
	Sub-total		£5,733,735
	Theme 4: Prevention: I can access resources in the community that help me and my carers		
20	Voluntary sector preventative services	LA	£1,248,251
21	Voluntary sector carers work	LA	£400,000
22	Carers strategy	LA	£450,000
23	Telecare	LA	£566,000
24	Community equipment: council cost	LA	£400,000
25	Community equipment: joint contingency for 19/20	LA/CCG	£164,000
	Sub-total		£3,228,251
	Theme 5: Mental Health and Learning Disability – I get the support I need to leave hospital and settle back at home		
26	Mental Health Reablement	LA	£151,632
27	Community mental health services	LA	£655,000
28	Mental Health discharge worker	LA	£50,000
29	Mental Health Broker	LA	£50,000
30	Mental Health Complex Cases worker	LA	£60,000
31	Psychiatric Liaison (AMHPs and reablement)	LA	£300,000
32	Mental Health – personal budgets	LA	£600,000
33	Learning Disabilities – personal budgets	LA	£211,000
34	Enhanced Psychological Support for those with LD (£29k	CCG	£239,000

	Local Authority, £210k CCG)	/LA	
	Sub-total		£2,316,632
	Care Act funding and Service Development and change Management		
35	Care Act Funding	LA	£1,000,000
36	Service development and change management	CCG/LA	£375,758
	Sub-total		£1,375,758
	Total (Core BCF)		£24,140,649
	Improved Better Care Fund grant (iBCF)		
37	Sustaining quality in home care	LA	£10,327,850
38	Re-ablement and intermediate care including step down accommodation	LA	£999,749
39	Improving and Investing in local nursing care	LA	£4,174,334
40	Transformation fund	LA	£250,000
	Sub-Total iBCF		£15,751,933
	Winter Pressures Grant		
41	Residential care for older people	LA	£400,000
42	Nursing care for older People	LA	£300,000
43	Home care for older people	LA	£870,648
	Sub-total Winter Pressures Grant		£1,570,648
	Grand Total BCF		£41,632,230

Balance of spend from CCG minimum contribution

12. The balance of spending from the CCG contribution minimum to the pooled budget between Council services and CCG commissioned community health schemes is in line with the required ring fenced minimum for each type of spend. For Southwark this is as follows.

Required Spend from CCG contribution	Minimum Required Spend	Planned Spend
NHS Commissioned Out of Hospital spend from the minimum CCG allocation	£6,437,797	£6,633,466
Adult Social Care services spend from the minimum CCG allocations	£15,730,051	£16,616,328

13. All spend from Council contribution is ringfenced for Council adults social care or Housing Disabled Facilities Grant related spend.

The Better Care Fund framework in 2020/21

14. As reported to the Board in June, it was originally advised that a new framework replacing the BCF would be produced for 2020/21. However, it has been confirmed that the BCF will continue into 2020/21 with the CCG contribution inflated in real terms by 3.4% (£770k) and that iBCF grant funding will be continuing at current levels. This assurance is useful for high level planning purposes, but to enable detailed planning the BCF policy framework and planning guidance for 2020/21 is required.

Delivery on key BCF targets 2019/20

15. Close monitoring of the BCF is undertaken through national quarterly monitoring returns and internal monitoring which is overseen by the Health and Social Care

Partnership Board on behalf of the Health and Wellbeing Board. There are 4 key targets associated with the BCF discussed below:

16. **Delayed transfers of care:** The BCF funds a range of services that promote safe and timely discharge from hospital. Until 9 months ago Southwark maintained strong performance on this target. However, since then performance has declined and has not met the target NHSE set for Southwark.

Days delayed	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug
BCF Target	449	449	434	449	434	449	449	405	449	333	344	333	344	344
Actual	341	283	369	403	525	410	571	737	766	577	608	736	558	653

17. Performance on this measure is subject to close monitoring. An analysis of the reasons for the growth in delays has been undertaken informing an action plan to address the growth and restore good performance. A range of key issues have been identified including;

- Delays relating to shortage of capacity in the nursing care home market are the main reason for recent growth. Steps are being taken to increase local supply but the impact of this is likely to be medium to long term only. Enhanced intermediate care step down beds are being commissioned to help address the pressure in the short term.
- Residential care home delays are the second biggest cause of delays. Extra investment in home care, residential care and intermediate care care, including step down flats is intended to reduce this pressure.
- Delays caused by patient choice in hospital are the third highest reason for the growth. This is being tackled by working with the trusts to ensure full implementation of the revised patient choice policy.

18. It should be noted that the majority of delays relate to NHS issues rather than social care. e.g. 512 NHS delayed days in August, as compared to 141 council delays.

19. The BCF Plan sets out in more detail the actions being taken to address the growth in delays.

20. **Non-elective admissions:** The target for non-elective admissions to hospital was exceeded by 7.4% in 2018/19 and 2019/20 targets have been uplifted in agreement with NHS England to reflect expected demand. Targets are currently being met for 2019/20.

21. **Admissions to care homes:** A key objective of BCF funded services is to support people to live safely and independently in their own home, and there are a range of investments in home care and other community support services to help deliver that outcomes. Targets have been uplifted reflecting the increase in demand experienced during 2018/19. The target is being met in 2019/20 to date with 76 admissions against a target of 86.

22. **Reablement:** The BCF funds reablement services that aim to restore people's independence. Latest quarterly figures show that 157 out of 184 (85%) people discharged from hospital with a reablement service during Q2 were still at home

in 91 days without having been readmitted to hospital or a care home. This is in line with the target.

Policy Implications

23. The document “2019-20 Better Care Fund: Policy Framework” published by the Department of Health and Department of Communities and Local Government on 11 April 2017 sets out the purpose of the BCF in terms of driving forward the national integration agenda. The BCF plan reflects local policy on integration as set out in the Southwark Five Year Forward View and is consistent with the national framework.

Community Impact Statement

24. The BCF plan protects current services funded through the core BCF which provide essential support for people with health and social care needs. This has benefit to all people with protected characteristics, particularly services provided for older people, and people with disabilities and mental health problems. The BCF also funds a range of voluntary sector services promoting community resilience. The iBCF funding is also used to protect current levels of home care and nursing care funded through the council general fund but for which current budgets are insufficient to meet current activity levels.
25. Other beneficiaries of this investment are the homecare workforce who have been paid the London living wage since April 2018 under Southwark’s ethical care charter. This workforce has a high proportion of women and those from the black and minority ethnic communities.

SUPPLEMENTARY ADVICE FROM OFFICERS

Southwark Council

Strategic Director of Finance and Governance (44TJ201920)

26. This report recommends the approval of the Better Care Fund plan for 2019-20. The plan includes the rollover of the majority of pre-existing schemes, plus the addition of growth monies for 2019-20 totalling approximately £6m.
27. These income streams (BCF, iBCF & Winter Pressures) now fund in excess of £30m of the Council’s Adult Social Care budgets, including a mixture of ‘traditional’ social care provision such as nursing care and home care and joint projects with the CCG to reduce delayed transfers of care. Given that the council and CCG have been jointly incurring expenditure in relation to these schemes since 1st April 2019 it is disappointing that central government delays mean that plans for the year are only submitted in late September. The recent Spending Round has confirmed that existing social care funding will continue into 2020-21, including a proposed 3.4% uplift in the BCF. Whilst this is a welcome development, longer term certainty is required if councils and CCGs are to be expected to develop and sustain meaningful transformation.
28. The proposals contained within this report can be fully funded within existing resources in 2019-20, however health and social care colleagues must continue to make plans that meet the needs of the borough whilst recognizing the continuing uncertainty of these funding streams.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Better Care Fund documentation	160 Tooley Street SE1 2QH	Adrian Ward Programme Manager Partnership Commissioning Team, Southwark Council and CCG 020 7525 3345

APPENDICES

No.	Title
Appendix A	Better Care Fund Plan template 2019/20

AUDIT TRAIL

Lead Officers	Sam Hepplewhite, Director of Integrated Commissioning, NHS Southwark CCG Genette Laws, Director of Commissioning, Southwark Council	
Report Author	Adrian Ward, Partnership Commissioning Team	
Version	Final	
Dated	8 November 2019	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Director of Law and Democracy	Yes	No (not required)
Strategic Director of Finance and Governance	Yes	Yes
Cabinet Member	No	No
Date final report sent to Constitutional Team	8 November 2019	