

<b>Item No.</b> 10.	<b>Classification:</b> Open	<b>Date:</b> 21 November 2018	<b>Meeting Name:</b> Health and Wellbeing Board
<b>Report title:</b>		Better Care Fund – update on 2018/19 delivery and 2019/20 planning	
<b>Ward(s) or groups affected:</b>		All	
<b>From:</b>		Caroline Gilmartin, Director of Integrated Commissioning, NHS Southwark CCG  Genette Laws, Director of Commissioning, Southwark Council	

## RECOMMENDATION

1. That the Health and Wellbeing Board note this report including:
  - a. Progress made on delivering the Integration and Better Care Fund Plan agreed by the Health and Wellbeing Board on 11 Sept 2017 (see paragraph 3-10)
  - b. The letter from NHSE on 19 July 2018 introducing revised targets for delayed transfers of care from September 2018 (See paragraph 13)
  - c. An assessment of the risk of reductions in BCF funding as a result of the revised delayed transfers target not being met (as requested by the Council cabinet on 18<sup>th</sup> September 2018) (see paragraph 14 -16)
  - d. An update on planning arrangements for 2019/20 when the current BCF framework is due to come to an end (see paragraph 21)

## 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.

## KEY ISSUES FOR CONSIDERATION

3. The Health and Wellbeing Board agreed the current Integration and Better Care Fund Plan on 11 Sept 2017 and this plan passed through the national assurance process in October 2017. The funding profile for the two-year BCF for 2017/19 is as follows.

<b>BCF funding 2017/19</b>	<b>2017/18 Gross Contribution</b>	<b>2018/19 Gross Contribution</b>
Total CCG Contribution <sup>1</sup>	£21,049,603	£21,449,545
Council iBCF contribution <sup>2</sup>	£9,129,473	£12,584,184
Council non-iBCF contribution <sup>3</sup>	£1,263,268	£1,377,165
<b>Total BCF pooled budget</b>	<b>£31,442,343</b>	<b>£35,410,895</b>

Note (1) The CCG contribution is set at the minimum level required under BCF rules  
 Note (2) The Improved Better Care Fund is set at the level in the grant determination provided to the council by the DCLG.  
 Note (3) The Council non-IBCF contribution is set at the minimum level which is the Disabled Facilities Grant as determined by DCLG. This is ring-fenced for the provision of disabled facilities grants for householders.

4. The BCF funding has been applied to the following key themes:

Theme	Services included	Value
<b>Theme 1: Hospital Discharge</b> – I get the support I need to leave hospital and settle back at home	Hospital discharge teams, including weekend discharge team, reablement, intermediate care	<b>£5,501,963</b>
<b>Theme 2: Admissions avoidance</b> - I get support that reduces the need to be in hospital	Community Health Enhanced Rapid Response and @home services, enhanced out of hours primary care services, self-management, social prescribing	<b>£5,062,500</b>
<b>Theme 3: Community support and maintenance</b> - I am helped to live in my community	Home care services, dementia support, end of life care, disabled facilities grant	<b>£3,614,247</b>
<b>Theme 4: Prevention:</b> I can access resources in the community that help me and my carers	Voluntary sector services, carers services, telecare, equipment	<b>£3,105,000</b>
<b>Theme 5: Mental Health and Learning Disability</b> – I get the support I need to leave hospital and settle back at home	Range of community mental health services including reablement, and the funding of personal budgets	<b>£2,156,632</b>
<b>Protecting social care services – system sustainability</b>	Direct funding to protect social care budgets, Care Act costs etc	<b>£3,010,610</b>
<b>Service Development and change Management</b>	Funding for Partnership Commissioning Team and related initiatives	<b>£344,816</b>
<b>Grand total core BCF</b>		<b>£22,826,710</b>

<b>Improved Better Care Fund - all scheme 3</b>	<b>2018/19</b>
Home care	£9,959,850
Nursing home care	£2,374,334
Transformation fund	£250,000
<b>Total iBCF</b>	<b>£12,584,184</b>
<b>Grand Total BCF (core BCF and iBCF)</b>	<b>£35,410,895</b>

5. It is important to note that when the BCF was established in 2015/16 it was acknowledged that the funding was not new to the health and social care system. It was formed by consolidating a range of existing resources in the system including;
- Department of Health grants previously paid to local authorities for social care services of benefit to health
  - Reablement Grant paid to councils via the CCG
  - Carers grant

- CCG budgets previously funding acute and community health services
6. In the new arrangements these were consolidated into one sum in the CCG budget called the “BCF minimum contribution” ringfenced for approved BCF plans (approx. 95% of the total original BCF). The council’s disabled facilities grant was also incorporated into the BCF, although the use of this is strictly ringfenced for the provision of these grants to householders.
  7. In 2017/18 the government provided local authorities with a significant specific grant (Improved Better Care Fund, the iBCF) totalling £9.1m in Southwark growing to £12.6m in 2018/19. A condition of the grant was that it was pooled within the BCF plan and hence agreed with the CCG. The conditions made it clear that iBCF funding was intended to enable local authorities to quickly provide stability and extra capacity in local social care systems, addressing critical pressures that had been recognised by government. I
  8. In Southwark it was agreed that the BCF should be used to meet demand for Home Care and Nursing Home Care services for which there was previously insufficient budget, restoring financial stability to the system after a period of cuts.

#### **Arrangements for the monitoring and evaluation of the Better Care Fund**

9. There has been close monitoring of the BCF plan 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.
10. In December 2017 the BCF Planning Group (a Director level sub-group of the Health and Social Care Partnership Board) reviewed the range of services funded to inform decisions on any changes for 2018/19. Service performance data was reviewed, and service leads were questioned about their services and how they contribute to BCF objectives.
11. The overall conclusion of this process was that the existing investments were in the right areas and delivering key services, and the BCF plan was rolled forward with relatively minor changes. However, it was recognised that the broader challenge for the system was to ensure these services are well integrated to form a coherent whole, in line with Southwark Community Based Care and the Bridges to Health and Wellbeing approach to commissioning.

#### **Delivery on key BCF targets**

12. There are 4 key targets associated with the BCF:
  - Reducing delayed transfers of care
  - Non-elective admissions to hospital
  - Admissions to care homes
  - Effectiveness of reablement services
13. **Delayed transfers of care – original BCF targets:** Of the above targets, delayed transfers of care is considered the main target by NHSE and is subject to detailed central monitoring. Southwark has succeeded in meeting its overall targets as set out in the agreed BCF plan and has particularly strong performance on delays attributable to social care. There are sub-targets for NHS and social care attributable delays, and whilst the NHS target has generally been

missed this has been compensated for by the low number of social care delays. This reflects well on the high level of investment agreed on council hospital discharge services. In comparative terms Southwark is nationally recognised as a strong performer, consistently meeting its target each month.

Days delayed	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
BCF Target *	445	440	434	449	449	405	449	434	449	434	449	449	434
Actual	254	287	353	376	347	274	327	310	367	279	341	283	369

14. **Delayed transfers of care – new targets proposed by NHSE July 2018:** NHSE has imposed stricter targets from September 2018 which undoubtedly will be more challenging over the winter (see letter from NHSE in Enclosure. 1). At 11 delayed days per day in Southwark the new target for September amounts to 333 days, which was missed by 36 days in September. Within this the NHS delays target was missed by 83 days, the social care target was hit with 62 days to spare and the joint delays target was missed by 15 days. Further details of the September delays are set out in the table below.

September						
Provider	Acute Or	Reason For Delay	NHS days	Social Car	Both days	Total
GSTT (127)	Acute	I Housing	83	0	0	83
	Non Acute	C Further Non Acute Nhs	22	0	0	22
	Acute	G Patient Family Choice	13	0	0	13
	Acute	Dii Nursing Home	7	0	0	7
	Acute	A Completion Assessment	2	3	0	5
	Acute	E Care Package In Home	0	1	0	1
KCH (60)	Acute	C Further Non Acute Nhs	26	0	0	26
	Acute	G Patient Family Choice	16	0	0	16
	Acute	E Care Package In Home	0	15	0	15
	Acute	I Housing	14	0	0	14
	Acute	Dii Nursing Home	4	5	0	9
SLAM (47)	Non-Acute	B Public Funding	0	0	27	27
	Non-Acute	Dii Nursing Home	27	0	0	27
	Non-Acute	I Housing	12	0	0	12
	Non-Acute	Di Residential Home	6	7	0	13
	Non-Acute	C Further Non Acute Nhs	2	0	0	2
Lewisham & Greenwich	Non-Acute	I Housing	30	0	0	30
Buckinghamshire (30)	Non-Acute	Di Residential Home	30	0	0	30
Imperial College (17)	Non Acute	C Further Non Acute Nhs	17	0	0	17
<b>Total</b>			<b>311</b>	<b>31</b>	<b>27</b>	<b>369</b>
BCF target - original			209	196	30	434
variance			102	-165	-3	-65
NHSE new target			228	93	12	333
variance			83	-62	15	36

15. **Implications of not hitting the revised delayed transfers of care target:** there were initially widespread concerns that failure to meet the new targets set by NHSE could lead to financial implications in the form of a penalty against either the BCF core funding or the Improved Better Care Fund. This concern

relates in part to a previous statement in 2017/18 by the secretary of state for health that iBCF funding could be linked to performance.

16. At the Council's Cabinet meeting on 18 September, they asked officers to provide *"... a report to the health and wellbeing board regarding possible punitive reductions in the council's Better Care Fund (BCF), as a result of the local NHS missing their targets be produced."*
17. Clarification has been sought from the NHSE Better Care support team on this matter. They have confirmed that there will be no link with 2018/19 BCF funding and performance. The NHSE has no power to dictate the terms of the Improved Better Care Fund grant as this is provided to local authorities from the Ministry of Housing Communities and Local Government.
18. However, as regards 2019/20 and beyond, as the new framework has not been released (see paragraph 23 below) it is not yet possible to provide assurance on this issue. The Board will receive a report on the new arrangements, including an update on this risk, when they are released.
19. The BCF framework currently allows for a process of escalation in those cases where NHSE identifies that BCF conditions are not being met. After several stages of escalation this can ultimately lead to intervention in how core BCF funding provided by the CCG is spent. Southwark meets the BCF conditions and is not at any risk of escalation.
20. Note: NHSE have not asked for revised BCF plans to be submitted incorporating new delayed transfers of care targets, although the letter indicates that they expect local systems to work towards them.
21. **Non-elective admissions:** The target for non-elective admissions to hospital is being missed by 7%. The growth in this activity is a major concern, particularly as the needs levels and average costs of admissions is also increasing. This measure is seen as a whole system target which cannot simply be attributed to BCF services.
22. **Admissions to care homes:** A key objective of BCF funded services is to support people to live safely and independently in their own home. Although the longer-term trend has been downwards, reflecting the increased effectiveness of community based care options, the target was missed by 10% last year, and in Q1 there were 44 admissions to care homes as against our target of 31. Of the 44 admissions 22 were for nursing homes and 22 were for residential care. The impact of discharge to assess initiatives potentially increasing admissions to care homes has been examined and additional controls have been agreed to ensure there are no unintended consequences of this initiative. Demographic pressures including growth in the numbers of older people with dementia needing a care home placement is also a key factor.
23. **Reablement:** Latest quarterly figures show that 166 out of 184 people discharged from hospital with a reablement service were still at home in 91 days without having been readmitted to hospital or a care home. The target is 88% and in 2017/18 outturn was 86% which was in line with benchmark performance.

### **Replacement of the Better Care Fund framework in 2019/20**

24. The national policy framework governing the BCF is due to be replaced from 2019/20. However, it has been indicated that details of the new arrangements will not be provided until December 2018. It has been advised by the national Better Care Fund Team that for 2019/20 the arrangements will be very similar to the existing requirements, with more radical changes planned for 2020/21.
25. When planning guidance is issued for the new arrangements it will be scrutinised for implications and a report will be brought to the Board.

### **Policy Implications**

26. The document “2017 - 2019 Integration and Better Care Fund Policy Framework” published by the Department of Health and Department of Communities and Local Government on 31<sup>st</sup> March 2017 sets out the purpose of the BCF in terms of driving forward the national integration agenda which aims to achieve further integration between health and social care by 2020. 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**

27. 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, in particular services provided for older people, and people with disabilities and mental health problems. The iBCF funding is also to be 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.
28. Other beneficiaries of this investment are the homecare workforce who have been paid the London living wage since April 2018. This workforce is mainly made up of women and those from the black and minority ethnic communities.

### **SUPPLEMENTARY ADVICE FROM OFFICERS**

#### **Strategic Director of Finance and Governance**

29. The Strategic Director of Finance and Governance notes the contents of this report, and in particular the risks within paragraphs 14 and 23. Based on the assurances received from NHSE it is clear that the risk of financial penalties arising as a result of health partners struggling to meet DTOC targets is negligible for 2018-19. The future is less clear, both in terms of the potential for punitive reductions in grant for perceived underperformance and more widely in terms of the overall direction and quantum of the BCF. With respect to the former risk it is clear that, in the unlikely event that penalties are applied, Adult Social Care colleagues will need to re-direct remaining resources to ensure that there is no detriment to social care services.

## BACKGROUND DOCUMENTS

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

## APPENDICES

No.	Title
Appendix 1	Letter from NHS England on revised targets

## AUDIT TRAIL

<b>Lead Officers</b>	Caroline Gilmartin, Director of Integrated Commissioning, NHS Southwark CCG Genette Laws, Director of Commissioning, Southwark Council		
<b>Report Author</b>	Adrian Ward, Partnership Commissioning Team		
<b>Version</b>	Final		
<b>Dated</b>	13 Nov 2018		
<b>Key Decision?</b>	No		
<b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b>			
<b>Officer Title</b>	<b>Comments Sought</b>	<b>Comments Included</b>	
Director of Law and Democracy	No	No	
Strategic Director of Finance and Governance	Yes	Yes	
<b>Cabinet Member</b>	No	No	
<b>Date final report sent to Constitutional Team</b>		14 November 2018	