



Date of Meeting: 26/06/2019

Lead Member: Laura Miller – Lead Member for Adult Social Care and Health

Lead Officer: Mathew Kendall - Executive Director for People - Adults

Executive Summary:

The Better Care Fund (BCF) is the current national policy approach for integrating health and adult social care. It has been running since 2014/15. The BCF spans both the NHS and local government and seeks to join-up health and care services, so that people can manage their own health and wellbeing and live independently in their communities for as long as possible. The policy brings together resources from the NHS and local government and requires local plans to be produced and overseen by each Health and Wellbeing Board across England.

This report sets out the performance of the previous Dorset Health and Well-Being Area against the 2018/19 Better Care Fund (BCF) Plan. It also provides an update on planning for 19/20 whilst noting that the final detailed national policy requirements have not yet been published.

During 2018/19 significant progress was made against the plan including the development of a joint brokerage function, alignment of budgets, joint quality approaches, the successful implementation of 2 joint frameworks with circa £650m planned spend over 5 years, joint provider market management etc. We have also made further progress in our plans for an integrated approach to place shaping with several developments being actively worked on. There have been challenges in terms of progressing further integration of commissioning functions and the pooling of budgets however this remains a key strategic opportunity.

The Health and Well-Being Area has narrowly missed achieving the four national metrics but has made significant progress compared to last year and has put in place a number of system wide measures to continue to improve in these areas.

Government have confirmed the continuation of the BCF policy for 2019/20. The national timetable for quality assuring and agreeing the updated plan is unlikely to align with the current schedule of Health & Wellbeing Board meetings. Consequently this report seeks agreement for delegated authority to be given to the Chair of the Board and the Executive Director for People -Adults to ensure plans can be submitted in line with the national timetable.

Equalities Impact Assessment:

Equalities Impact Assessment (EqIA): N/A

Budget:

The 2018/19 aligned budget for each scheme was as follows and agreed by the CCG in conjunction with NHS providers prior to Better Care Fund Plan approval:

- | | |
|--|----------|
| 1) <i>Support for Carers</i> | £ 1.135m |
| 2) <i>Integrated Health and Social Care Pathways</i> | £18.713k |
| 3) <i>Maintaining Independence</i> | £14.532m |
| 4) <i>High Impact Changes</i> | £ 8.808m |
| 5) <i>LD Moving on from Hospital Living</i> | £ 5.398m |
| 6) <i>Strong and Sustainable Care Markets</i> | £91.202m |

BETTER CARE FUND POOLED BUDGET 2018/19											
Dorset Health & Wellbeing Board		Source of funding									
Scheme Description (Application of funds)	Scheme value	NHS Dorset CCG (Health) 2018/19						Dorset County Council (LA) 2018/19			
		Own contribution	Social Care Grant	Protecting Social Care	Care Act Monies	Carers	Total Health	Own contribution	Disabled Facilities Grant	Improved BCF (iBCF)	Total LA
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Carers	1,135		580			555	1,135				-
Integrated Health & Social Care Locality Teams	18,713	18,713	-	-	-	-	18,713	-	-		-
Maintaining Independence	14,532	2,891	3,203	71	1,113	-	7,278	1,329	3,925	2,000	7,254
High Impact Changes Implementation/Supported Hospitals	8,808	-	5,577	383	-	-	5,960	-	-	2,848	2,848
Moving on from Hospital Living	5,398	3,897					3,897	1,501			1,501
Strong and Sustainable Care Markets	91,202	27,102	-	54	-	-	27,156	59,126	-	4,920	64,046
Better Care Fund Total (Dorset HWB)	139,788	52,603	9,360	508	1,113	555	64,139	61,956	3,925	9,768	75,649

Summary	Total	CCG	LA
	£'000	£'000	£'000
Dorset County Council (LA) 2017/18	139,788	64,139	75,649

As part of the Unitary council preparation, agreement was reached between Dorset and BCP Councils about the value of the activity within the 18/19 plan that would need to be disaggregated for the Christchurch area (11.7%). The CCG have updated their preparatory modelling for 19/20 using the same figure. This gives a baseline for the new Dorset Health and Wellbeing Board's BCF plan for 2019/20 although the precise budget cannot be finalised until the national inflationary uplift is published.

Risk Assessment:

There are a number of risks attached to the BCF. These include the delay in publication of the national planning guidance and uncertainty about the 19/20 uplift and its affordability for the Clinical Commissioning Group.

All the commissioning partners involved in the BCF are under significant financial pressure in the face of growing demand and complexity of need. Having some agreed local planning assumptions has helped to structure discussions. Financial modelling is underway but not yet concluded, in particular for the Integrated Community Equipment service as part of the 'Maintaining Independence' scheme.

The top two risks previously reported within Dorset County Council's Corporate Risk Register were:

- Capacity, capability and financial pressures on partner organisations impact negatively on the delivery of the Better Care Fund objectives

<ul style="list-style-type: none">• Better Care Fund performance targets are not met placing funding at risk
<p><u>Other Implications:</u></p> <p>Performance associated with the Better Care Fund is a joint priority for health and social care and feed into the delivery of the aims of the Sustainability and Transformation Plan.</p>
<p><u>Recommendations:</u></p> <p>It is recommended that:</p> <ol style="list-style-type: none">1. Authority is delegated by the Health & Wellbeing Board to the Chair of the Board and the Executive Director for People - Adults to agree Dorset's 19/20 Better Care Fund plan update. This is in order to ensure plans can be submitted in line with the national timetable if the deadlines, once published, do not align with scheduled Health & Wellbeing Board meetings. <p>Members of the Health and Wellbeing Board will be briefed in between scheduled Board meetings if the delegation needs to be used.</p> <ol style="list-style-type: none">2. The work to update the 19/20 plan should include refreshing the associated risks in the new Dorset Council's corporate risk register.
<p><u>Reason for Recommendation:</u></p> <p>As above.</p>
<p><u>Appendices:</u></p> <p>Q4 BCF return to NHS England</p>
<p><u>Background Papers:</u></p>
<p><u>Officer Contact</u> Name: Johnny Pigott Tel: 01305 224227 Email: Jonathan.pigott@dorsetcouncil.gov.uk</p>

Better Care Fund – Report for Q4 2018/19 and Update on planning for 19/20

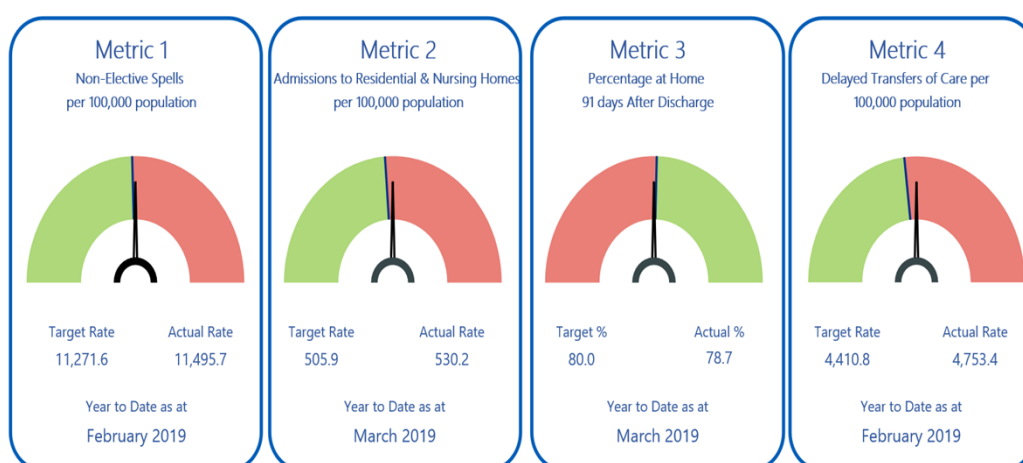
1. Introduction

- 1.1 The Better Care Fund (BCF) is the current national policy approach for integrating health and adult social care. The Better Care Fund (BCF) spans both the NHS and local government and seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible. The policy requires local plans to be produced and overseen by each Health and Wellbeing Board across England and has been running since 2014/15.

- 1.2 This report sets out the performance of the previous Dorset Health and Well-Being Board area against the 2018/19 Better Care Fund Plan, using the Q4 return for 2018/19 submitted to NHS England and the Ministry of Housing, Communities and Local Government (see appendix 1).
- 1.3 It also provides an update on planning for 19/20 for the Better Care Fund Plan for the new Dorset Health and Wellbeing Board area that is co-terminous with the catchment of the new Dorset Council..

2. Performance in 2018/19

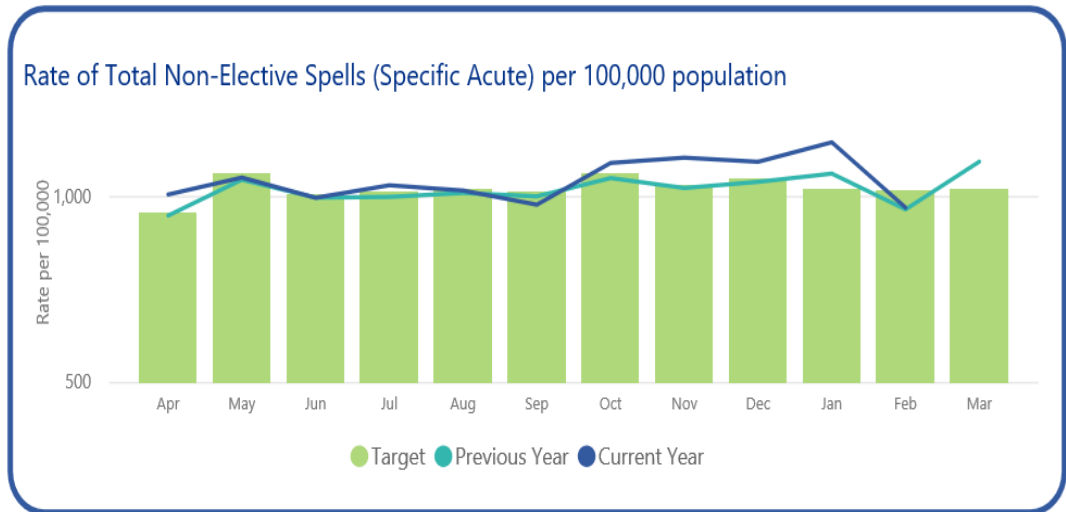
- 2.1 The National Delayed Transfers of Care (DToC) targets for 2018/19 were released in May 2018, dictating that both health and social care delays will need to be significantly reduced:
 - NHS – reduce by 30%;
 - Adult social care – reduce to 2.6 daily delays per 100,000 18+ population (9 sole delays per day).
- 2.2 It has been understood that both health and social care will work to achieve a decline in days over the months to achieve the target by September.
- 2.3 The targets for the remaining three metrics have not been changed from the 2017/19 plans.
- 2.4 The dashboard below summaries the year-to-date positions for the four metrics.



2.5 Metric One – Non-Elective Admissions

- **Metric:** Total non-elective spells (specific acute) per 100,000 population

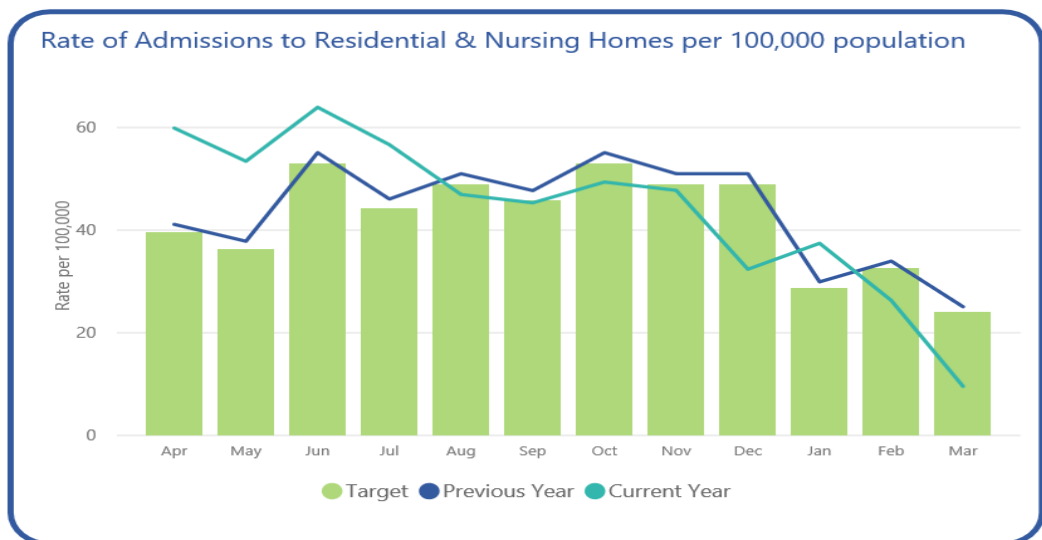
- **Outcome sought:** A reduction in the number of unplanned acute admissions to hospital



2.6 Non-Elective activity continues to increase, when compared to the previous year, this together with increased levels of frailty and acuity is challenging for all health and social care providers. The year to date position shows that the Health an Well-Board area will narrowly miss the target.

2.7 Metric 2 – Admissions to Residential & Nursing Homes

- **Metric:** Long term support of older people (aged 65 or over) met by admission to residential and nursing homes per 100,000 population.
- **Outcome sought:** Reducing inappropriate admissions of older people into residential care

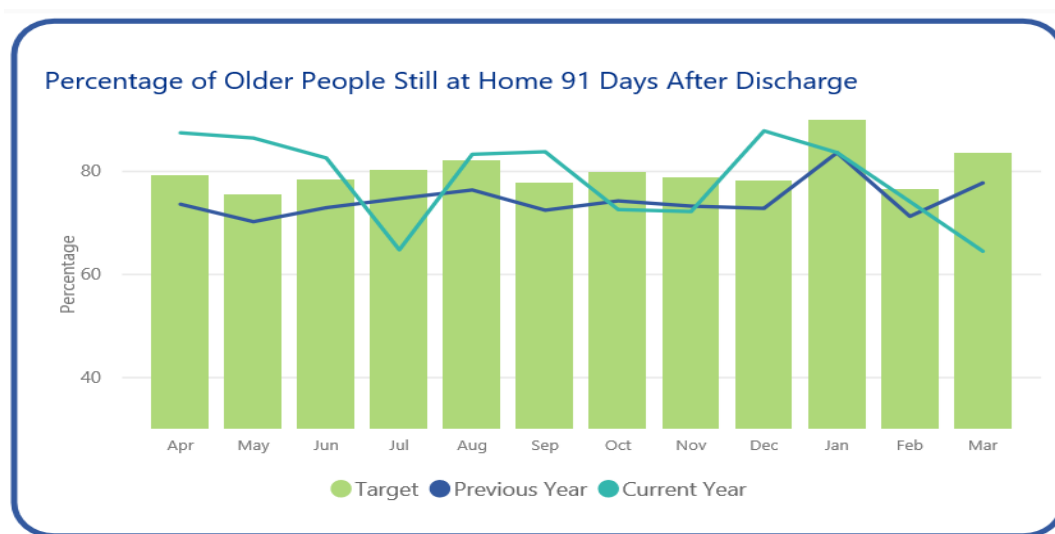


2.8 Whilst this target was narrowly missed for 2018/19 there has been a downward trend throughout the year. A number of system improvements have been put in

place to case management system for 2019/20 that will allow even more timely and accurate reporting of data.

2.9 Metric 3 – Proportion of Older People Still at Home 91 days after discharge from Hospital in to Reablement/Rehabilitation Service

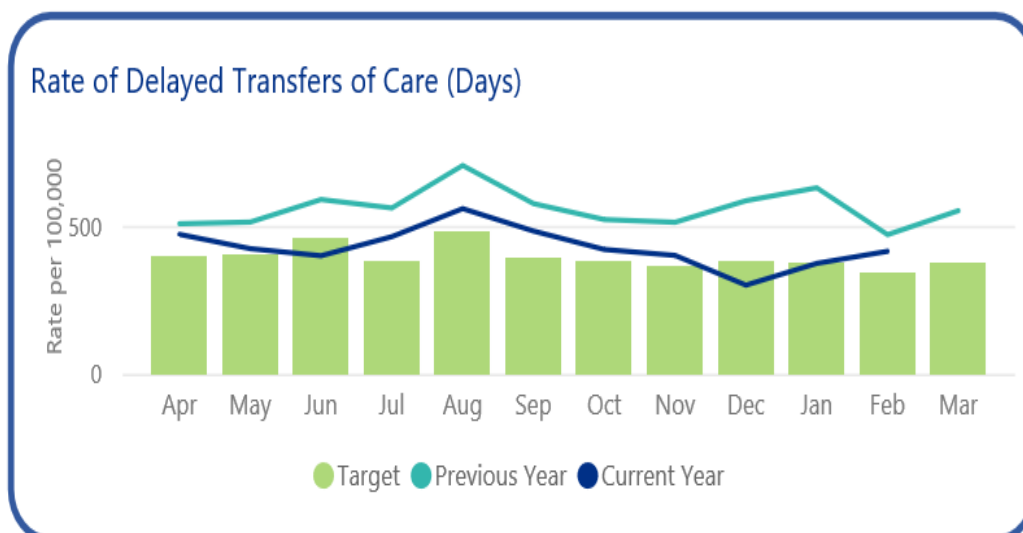
- **Metric:** Proportion of older people who were still at home 91 days after discharge from hospital into reablement or rehabilitation services.
- **Outcome sought:** Increase in effectiveness of these services whilst ensuring that those offered the service does not decrease.



2.10 The HWB have almost achieved the target for this metric only missing the target by 1.3%. (Due to data lag, we expect our official ASCOF score for this indicator to end up better than target for 2018/19).

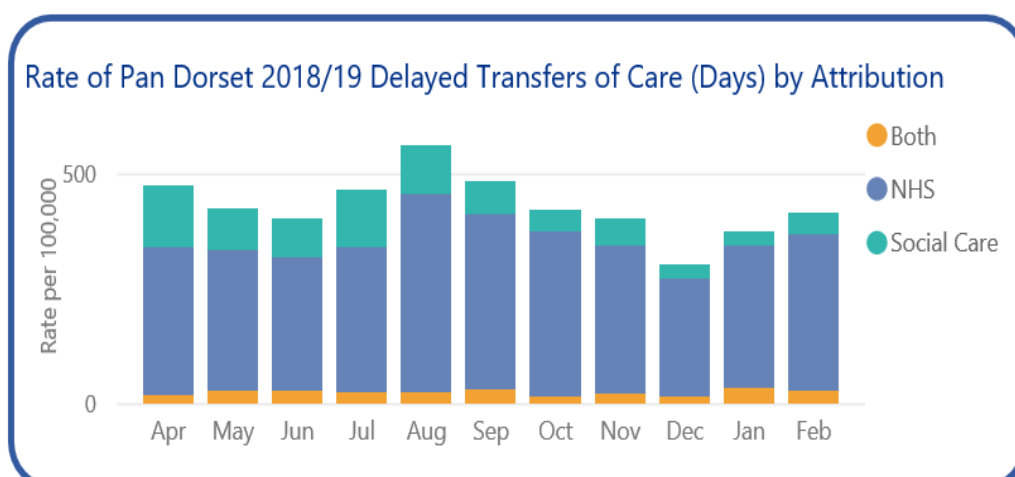
2.11 Metric 4 – Delayed Transfers of Care

- **Metric:** Delayed Transfers of Care from hospital per 100,000 population
- **Outcome sought:** Effective joint working of hospital services (acute, mental health and non-acute) and community-based care in facilitating timely and appropriate transfers from all hospitals for all adults.



2.12 The total number of delayed days is almost 5,000 less in 2018/19 compared to 2017/18. Social Care delays have decreased considerably compared to previous years. Performance has been far better than target (the target is 9 delays per day) in nearly every month since September 2018.

2.13 In addition to the above, the following graph highlights the reason for DTOC and the reduction in year to date, particular for social care attribution. A number of approaches are still being adopted to further reduce delays.



3. Scheme Activity

3.1 The BCF Highlight Report has been included as Appendix 1, to outline the current activity within the Better Care Fund schemes.

3.2 Overall the vast majority of BCF schemes were implemented as planned during 2018/19 through the system working collaboratively together, which has improved joint working between health and social care. The only exception is the work to

further integrate commissioning functions and pooled budgets, although these remain a key strategic opportunity for 2019/20.

- 3.3 All of the High Impact Schemes are now established and supporting the system in progress against the four key metrics.
- 3.4 Homefirst and Discharge To Assess (D2A) is embedded in daily practice and the use of the winter money has enabled homefirst / D2A to have a good responsiveness. The LAs have in place services that are accessed for discharge in line with the principles of homefirst and these are now up and running and these once again are linked to the LAs' winter plans. The final Place Based Evaluation Report is due in May and health and social care stakeholders have been fully involved with this work. The evaluation will inform focus for 2019/20
- 3.5 Since the Dorset Care Framework went live in December 2017, supply relationships have improved with a number of key results; for example, in December 18, with winter pressures schemes, nearly 90% of commissioned Home and Community Support was being met through the framework, including new contracts which were issued for extra care housing. From May 19, registered care short breaks for carers go through the framework, with further lots for Live-in care and complex care to be tendered through segment 1 led by the CCG.
- 3.6 In the last quarter a joint specification has been agreed so that Dorset Council as lead commissioner can procure a Carers Lead Organisation as a social value proposition. This will help to support greater prevention and timely advice and support for carers of all ages. The new strategic provider will be appointed following a procurement from the joint Dorset Commissioning Framework in June 2019.
- 3.7 Dorset Council's promoting independence project is working with health colleagues to redesign the pathway around aids, adaptation and assistive technologies. A business case setting out the independent living pathway and supporting services will go through approval during July to begin the procurement of services for April 2020.

4. Better Care Fund Plan 2019/20

- 4.1 The BCF policy framework was published 10th April 2019¹, which sets out that there will be minimal changes to the BCF.
- 4.2 The plan will retain the same four National Conditions as 2017-19, in line with its vision for integrate care:
 - a) Plan jointly agreed
 - b) NHS contribution to ASC to be maintained in line with uplift to CCG minimum contribution
 - c) Agreement to invest in NHS commissioned out of hospital services
 - d) managing transfers of care

¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/795314/Better_Care_Fund_2019-20_Policy_Framework.pdf

- 4.3 The four metrics will also remain the same: non-elective admissions, admissions to residential and care homes, effectiveness of reablement and delay transfers of care.
- 4.4 The policy framework does not contain any specific planning requirements including uplifts and CCG minimum contributions by Health and Well-Being area, these are still to be published along with the detailed timetable for submitting plans to the national quality assurance and agreement process.
- 4.5 As part of the Unitary council preparation, agreement was reached between Dorset and BCP Councils about the value of the activity within the 18/19 Dorset BCF plan that would need to be disaggregated for the Christchurch area (11.7%). The CCG have updated their financial modelling for 19/20 using the same figure.
- 4.6 In anticipation of receiving the planning guidance, Dorset Council and CCG have been working to agree some planning assumptions for the BCF. These include a focus on building upon the strong and sustainable care market work, adding a new brokerage agreement as part of progressing joint commissioning, and improving the budget arrangements around learning disability commissioning.
- 4.7 All the commissioning partners who work together through the Better Care Fund are under significant financial pressure in the face of growing demand and complexity of need. Having the local planning assumptions has helped to structure discussions. Financial modelling is underway but not yet concluded, in particular for the Integrated Community Equipment service as part of the 'Maintaining Independence' scheme. There is a concern for the Clinical Commissioning group about the affordability of the nationally set uplift it is required to make to the BCF. NHS England guidance for all CCGs was to set their budgets for 19/20 using a 1.79% uplift figure for the BCF. It is anticipated that once the detailed national guidance is published the figure required may well be higher.

5. Conclusion

- 5.1 Members of the Health and Wellbeing board are asked to consider the performance that has been achieved, the Q4 submission and BCF Highlight Report and advise on where future improvement could be sought. They are also asked to consider the recommendations in the report to aid 19/20 planning.
- 5.2 In addition, it would be beneficial for members to discuss and advise upon where greater connectivity could be achieved with partners to allow Dorset to achieve the ambitions of the BCF.

Mathew Kendall; Executive Director of People - Adults, Dorset Council
Sally Sandcraft; Director for Primary and Community Care, Dorset CCG

June 2019