

JOINT STRATEGIC COMMISSIONING BOARD**8th DECEMBER 2022**

REPORT TITLE:	ADULT SOCIAL CARE DISCHARGE FUND
REPORT OF:	PLACE DIRECTOR (WIRRAL), NHS CHESHIRE AND MERSEYSIDE

REPORT SUMMARY

The Adult Social Care Discharge Fund is a national allocation of resources to local authorities and the NHS from His Majesty's Government. The Fund has specific resource allocations, criteria and management mechanisms that have been set by the Department of Health and Social Care (DHSC).

This paper sets out the purpose of the Adult Social Care Discharge Fund, how the resources have been allocated, the conditions attached to the funding and how this impacts on Wirral as a place.

The deadline for submission of the Wirral plans for the Adult Social Care Discharge Fund is 16th December 2022.

This matter affects all Wards within the Borough.

RECOMMENDATION/S

It is recommended that:

- The Joint Strategic Commissioning Board Sub-Committee is recommended to delegate the approval of the Wirral plan for the Adult Social Care Discharge Fund to the Director of Adult Social Care and Health, Wirral Council in consultation with the Place Director, NHS Cheshire and Merseyside.
- That a further update report on the submission be brought to the next meeting of the Joint Strategic Commissioning Board and Wirral Place Based Partnership Board.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 The Adult Social Care Discharge Fund is being released via two routes, one allocation into Local Authorities and the other via Integrated Care Boards. It is recommended that the money is pooled via Better Care Fund arrangements. This requires a decision between Wirral Council and NHS Cheshire and Merseyside, which needs to be exercised through a Joint Strategic Commissioning Board. Further work is required on the Wirral plans for this fund and given the timeline, it would not be possible to convene a Joint Strategic Commissioning Board to approve the submission. Delegated approval is therefore being sought in this paper.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 The Adult Social Care Discharge Fund is a national allocation of resources to local authorities and the NHS from His Majesty's Government. The Fund has specific resource allocations, criteria and management mechanisms that have been set by the Department of Health and Social Care (DHSC). There are therefore no other options for the Wirral system than to apply to utilise our allocations through the processes identified in the guidance. The timeline set by the DHSC are strict and do not allow for submissions after 16th December 2022.

3.0 BACKGROUND INFORMATION

- 3.1 On 22nd September 2022, the His Majesty's Government announced its *Plan for Patients*. This plan committed £500 million for the rest of the financial year 2022/23, to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The intention of this fund is to focus on, but not be limited to, a 'home first' approach and discharge to assess (D2A).
- 3.2 On 18th November 2022, the Government confirmed that the Adult Social Care Discharge Fund would be released through local authorities and integrated care boards (ICBs) to pool into local Better Care Fund (BCF) arrangements. In line with usual BCF requirements, the use of both elements of this funding should be agreed between local health and social care leaders.
- 3.3 The funding will be allocated to achieve the maximum reduction in delayed discharge:
- £200 million will be distributed to local authorities, based on the adult social care relative needs formula (RNF)
 - £300 million will be distributed to integrated care boards (ICBs), targeted at those areas experiencing the greatest discharge delays. This is based on a combination of both:
 - a fair-shares distribution based on 2022/23 ICB weighted populations (25% of ICB funding)
 - a discharge metric flexed to reflect the size of the ICB weighted population (75% of ICB funding)

The funding will be provided in 2 tranches – the first (40%) in December 2022, and the second (60%) by the end of January 2023 for areas that have provided a planned spending report and fortnightly activity data and have met the other conditions.

3.4 Ministers have set specific conditions governing the use of this additional funding:

- local authorities and ICB funding allocation should be pooled into local BCF section 75 agreements with plans for spend agreed by LA and ICB chief executives and signed off by the relevant Health and Wellbeing Board (HWB).
- funding allocated to ICBs should be pooled into HWB level BCF section 75 agreements. ICBs should agree the distribution of this funding with LAs in their area and confirm the agreed distribution to the BCF team (via the planning template).
- funding should only be used on permitted activities that reduce flow pressure on hospitals, including in mental health inpatient settings, by enabling more people to be discharged to an appropriate setting, with adequate and timely health and social care support as required.
- funding should prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing the bed days lost within the funding available, including from mental health inpatient settings. D2A and provision of homecare is recognised as an effective option for discharging more people in a safe and timely manner. Residential care to meet complex health and care needs may be more appropriate for people who have been waiting to be discharged for a long time.
- ICBs should ensure that support from the NHS for discharges into social care is available throughout the week, including at weekends.
- the Department for Health and Social Care (DHSC) and NHS England (NHSE) may follow up with local areas to understand and/or challenge the planning approach - this may happen:
 - if plans do not clearly demonstrate prioritising activity to free up the maximum number of hospital beds, and reduce the bed days lost;
 - where it is evident that spending plans are in breach of other funding conditions
 - where data shows that delayed discharges are significantly higher or increasing at a greater rate than national averages.
- a progress review across all areas will take place in January 2023. Local areas will be expected to engage fully in this process.
- a completed spending template should be submitted 4 weeks after fund details are published (by 16th December 2022), confirming planned use of the additional funding and that the use of the funding has been agreed by the ICB and local authority. Spend against the first tranche of money can commence as soon as plans are agreed locally. Allocation of the second tranche of funding will be

contingent on having submitted the completed spending template and meeting of the funding conditions.

- local areas should also submit fortnightly reports setting out what activities have been delivered in line with commitments in the spending plan.
- ICBs, hospital trusts and local authorities should work together to improve all existing NHSE and local authority discharge data collections including related situation reporting data and discharge data submitted as part of the commissioning data set.
- as a minimum social care providers must keep the required capacity tracker data updated in line with the Adult Social Care Provider Provisions statutory guidance, however it is acknowledged that more frequent updates to bed vacancy data is essential for operational purposes. The DHSC recommends updating bed vacancy data daily, where possible, as this information can be used by local discharge and brokerage teams when planning patient discharges. Keeping this data up to date is imperative for ensuring that patients are discharged to the right place for their specific care needs. It also assists with keeping both staff and residents as safe as possible by ensuring providers can accept admission of residents whose specific care needs can be met.

3.5 The impact the additional funding is having will be tracked by the following metrics:

- the number of people discharged to their usual place of residence (existing BCF metric).
- the absolute number of people 'not meeting criteria to reside' (and who have not been discharged).
- the number of 'Bed days lost' to delayed discharge by trust (from the weekly acute sitrep).
- the proportion (%) of the bed based occupied by patients who do not meet the criteria to reside, by trust.
- the number of care packages purchased for care homes, domiciliary care and intermediate care (to be collected through a new template).

3.6 NHS England and the DHSC will monitor continued compliance against the funding conditions set out above, through interactions with local areas and scrutiny of the spending reports and the discharge related metrics. Where there are higher or increasing delayed discharges (beyond the national average) or where there are significant challenges, local areas will be offered a package of support to encourage improvement. In these cases, the expectation will be that ICBs (including relevant trusts) and local authorities will implement the recommendations provided by the support programme teams.

3.7 A progress review across all areas will take place in January 2023. Where there are persistent challenges or non-compliance with funding conditions, or if funds are not being spent in accordance with the agreed plan, NHS England and DHSC, in collaboration with the National Discharge Taskforce, will follow up with local areas to challenge the planning approach and provide additional scrutiny of spending. All local partners are expected to engage fully with this process where necessary.

- 3.8 The announcement on 18th November 2022 confirmed that the total allocation to Wirral Council is £1.5m and the allocation to NHS Cheshire and Merseyside, our local ICB, is £19.2m. NHS Cheshire and Merseyside's Executive Team has agreed to initially release 75% of this funding to places whilst retaining 25% as a contingency for deployment at a later stage, meaning that the initial sum distributed will be £14.419m.
- 3.9 NHS Cheshire and Merseyside has used the methodology employed to distribute funding from national levels to ICBs in terms of providing an allocation to places. This means that 75% of funding has been based upon the key discharge metric of "no Criteria to Reside" and 25% based upon a population basis. The outcome of this approach has meant that Wirral has received an increased allocation compared with an expected "fair share" distribution, with £2.110m being made available through the initial release of funding.
- 3.10 The Minister for Social Care, in their letter of 18th November 2022, made it clear that it is crucial that health and care systems and providers work together across health and social care to meet the care needs of people and make best use of available resources. This includes coming together as joint teams involving NHS organisations, local authorities and social care provider representatives, for instance under the umbrella of integrated care partnerships. The DHSC expects to work with NHSE and local authorities to support the sharing of good practice and assess the impact of the discharge fund.
- 3.11 NHS Cheshire and Merseyside, Wirral Council and our main NHS providers are already working together on a range of measures that seek to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The reduction in the number of people not meeting the criteria to reside in Wirral University Teaching Hospitals NHS Foundation Trust, or who are experiencing long lengths of stay has been an area of focus for our system for some months. We are also equally concerned about people in similar situations who are under the care of mental health providers, such as Cheshire and Wirral Partnership NHS Foundation Trust. We are therefore working together to agree a submission for the deadline of 16th December 2022 that would enhance our existing service offering and meet the criteria set out in the Adult Social Care Discharge Fund.
- 3.11 The Wirral place plans for the Adult Social Care Discharge Fund remain work in progress. Decisions on the allocation of resources through the Better Care Fund are within the remit of the Joint Strategic Commissioning Board. The Adult Social Care Discharge Fund is being managed through the Better Care Fund and therefore requires a decision of this Board, between elected members and NHS Cheshire and Merseyside. Given the timelines set by the DHSC, this will not be possible at this meeting. It is therefore recommended that the Joint Strategic Commissioning Board Sub-Committee:
- Delegates the approval of the Wirral plan for the Adult Social Care Discharge Fund to the Director of Adult Social Care and Health, Wirral Council in consultation with the Place Director, NHS Cheshire and Merseyside.

- That a further update report on the submission be brought to the next meeting of the Joint Strategic Commissioning Board and Wirral Place Based Partnership Board.

4.0 FINANCIAL IMPLICATIONS

4.1 The total Adult Social Care Discharge Fund allocation to Wirral Council is £1.5m, the allocation to NHS Cheshire and Merseyside is £19.2m. NHS Cheshire and Merseyside's Executive Team has agreed to initially release 75% of the NHS funding to places whilst retaining 25% as a contingency for deployment at a later stage, meaning that the initial sum distributed will be £14.419m. Wirral has received an increased allocation, compared with an expected "fair share" distribution, of £2.110m from this initial allocation.

5.0 LEGAL IMPLICATIONS

5.1 The funding is subject to specific conditions set by the DHSC as set out in paragraph 3.4 of the report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 The guidance that supports the Adult Social Care Discharge Fund is very clear in specifying that the resources should be used to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The intention of this fund is to focus on, but not be limited to, a 'home first' approach and discharge to assess (D2A). It is hoped that the resources will support additional workforce in these areas.

7.0 RELEVANT RISKS

7.1 There is a risk that the second tranche of the Adult Social Care Discharge Fund will not be allocated to Wirral without clear plans and evidence of improvement. The monitoring mechanisms for the Adult Social Care Discharge Fund and associated deliverables will support the system in mitigating this risk.

8.0 ENGAGEMENT/CONSULTATION

8.1 NHS Cheshire and Merseyside, Wirral Council and our main NHS providers are already working together on a range of measures that seek to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. The Wirral response to the Adult Social Care Discharge Fund is being developed through existing engagement mechanisms across these partners.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council and NHS Cheshire and Merseyside have a legal requirement to make sure their policies, and the way they carry out their work, do not discriminate against anyone. The business of these groups will be conducted with an awareness of the general duty requirements and place equality considerations. No Equality Impact Assessment is required for this report.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 Wirral Council and NHS Cheshire and Merseyside are committed to carrying out their work in an environmentally responsible manner.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Community Wealth Building in Wirral focusses on partnerships and collaboration. These partnerships are led by Wirral Council with external partners and stakeholders, including residents. NHS Cheshire and Merseyside will support the Council in community wealth building by ensuring health and care organisations in the borough have a focus on reducing health inequalities and contribute to the development of a resilient and inclusive economy for Wirral.

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APPENDICES

There are no appendices to this paper.

BACKGROUND PAPERS

Our Plan for Patients, Department of Health and Social Care, 22nd September 2022, [Our plan for patients - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Adult Social Care Discharge Fund, Department of Health and Social Care, 18th November 2022, [Adult Social Care Discharge Fund - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

SUBJECT HISTORY (last 3 years)

Council Meeting	Date