

HEALTH AND WELLBEING BOARD 18 JULY 2024

REPORT TITLE:	BETTER CARE FUND (BCF) PLAN 2024/25	
REPORT OF:	DIRECTOR OF ADULTS, HEALTH AND STRATEGIC	
	COMMISSIONING	

REPORT SUMMARY

This BCF plan for 2023/25 was approved by the Health and Wellbeing Board on 21 September 2023. The submission of a 2024/25 plan to the NHS England (NHSE) is mandatory to provide reassurance that our capacity and demand assumptions were accurate and any adjustments to the two-year plan have been reported. This report provides a summary of the proposed content of the Better Care Fund (BCF) Plan for 2024/25 and asks the Health and Wellbeing Board to approve the plan. It sets out the detail of the budget areas to be pooled in 2024/25 as part of the mandatory Section 75 agreement with the Integrated Care Board.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to:

- 1. Approve the content of the mandatory BCF Plan for 2024/25.
- 2. Note continued compliance with the requirements of the BCF fund and that (NHSE) outcomes for 2023/25 continue to be met.
- 3. Note there are no changes to the capacity and demand assumptions included in the 2023/25 BCF plan.
- 4. Note the information provided will enable the Health and Wellbeing Board to influence the deployment of BCF services within the lifespan of this plan (2023/25) and plans.
- 5. Note that the current position does not pose a risk to the Section 75 Agreement.
- 6. Note the detail of the budget areas to be pooled in 2023/24 as part of the mandatory Section 75 agreement with the Integrated Care Board.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 In 2023 there was a mandatory requirement to develop a BCF Plan which set out how the Council and NHS Cheshire and Merseyside Integrated Care Board (ICB) would deploy BCF funding to achieve the government's priorities and BCF outcomes. The plan was approved by the Health and Wellbeing Board on 21 September 2023.
- 1.2 There is a further requirement to submit a 2024/25 plan setting out the rationale for any changes made to the original plan.
- 1.3 Pressures within 23/24 budget must also be reported and whilst there has been a pressure of (151k) this has been partly mitigated by underspends in other contracts and the S75 agreement 50/50 risk share arrangements between the Local Authority (LA) and the ICB.
- 1.4 The report provides evidence that the demand assumptions, as set out in the 2023/25 plan were correct and the deployment of the BCF created the anticipated capacity and will continue to do so in 2024/25.
- 1.5 One of the core objectives of the BCF is to improve the integration of health, social care and housing. The governance arrangements and the content of the plan demonstrate this.
- 1.6 The BCF funds and the governance arrangements demonstrate the provision of person-centred care, sustainable services and better outcomes for people and carers with health and social care needs.

2.0 OTHER OPTIONS CONSIDERED

2.1 The BCF plan and pooled fund arrangements are contributing to ensuring people and carers remain as independent as possible for as long as possible and people are discharged from hospital to the right place at the right time. In the absence of a plan and a Section 75 agreement the Council and the ICB will be unable to draw down funding and would be in breach of NHSE requirements. There have been significant pressures within the health system and the care market, the services within the BCF plan have mitigated some of these pressures and should the plan not be approved these pressures would be likely to increase. It is therefore recommended that the BCF Plan for 2023/25 is approved. The plan and the Section 75 arrangements do not expose the Council to increased financial risk.

3.0 BACKGROUND INFORMATION

- 3.1 The BCF was established in 2013 (Care Act 2014) to support integrated working across health and social care, housing and the community, voluntary and faith sector to support person-centred care, sustainable services, and better outcomes for people. The Better Care Fund (BCF) represents a collaboration between:
 - Department of Health and Social Care (DHSC)

- NHS England
- Department for Levelling Up, Housing and Communities (DLUHC)
- The Local Government Association (LGA)
- 3.2 The Better Care Fund (BCF) Policy Framework sets out the Government's priorities for 2023-25. These include improving discharge, reducing the pressure on urgent and emergency care and social care, supporting intermediate care, unpaid carers and housing adaptations. It will:
 - Enable people to stay well, safe, and independent at home for longer.
 - Ensure the provision of care and support at the right time and in the right place.
- 3.3 The vision for the BCF over 2023-25:
 - Is delivering the Right Care in the Right Place at the Right Time.
 - Manages demand and reduces the cost of care.
 - Has clear accountability and governance arrangements.
 - Has resilience and flexibility to emerging issues in service delivery.

CURRENT POSITION

- 3.4 Wirral now reports a much-improved No Criteria To Reside (NCTR) people medically fit for discharge) position with less than 10% of beds occupied by people who fall into this category compared to 23/24 when they occupied over 30% of beds.
- 3.5 Capacity and demand analysis of the last 12 months suggests that whilst capacity across place has increased, more work is needed to ensure there is sufficient capacity within the system to ensure more people are discharged from hospital and assessed at home (this is referred to as Pathway 1 (P1).
- 3.6 Some examples of achievements against plan in 2023/24 that the BCF would continue to fund are set out below.
- 3.7 In 2023, a 71 ward-based intermediate care service was put in place (for people who have no clinical need to remain in hospital but do require therapy and reablement) at Clatterbridge Intermediate Care Centre (CICC) has ensured people return home when their skills are optimised, and the right care is in place when they do so.
- 3.8 The Transfer of Care Hub, based at Wirral University Teaching Hospital is a multidisciplinary team, including social workers, nurses, and therapists, and has enabled swift discharges onto the right pathway for people reducing length of stay.
- 3.9 The Home First service (community based), a multi-disciplinary team, including social workers, nurses, therapists and health care assistants, has enabled people to be discharged, to receive therapy and be assessed at home when they no longer have criteria to remain in hospital. To support this approach a hybrid model has developed enabling people to be discharged with therapy and domiciliary care support.
- 3.10 Urgent Crisis Response service (community based) has prevented hospital admissions both in the community and via the hospital 'front door'.

- 3.11 The community based domiciliary care service provides reablement and can meet current demand. The mobile night service, as an example, has enabled people with higher acuity needs to return home and provide support to family carers. The market sustainability Plan suggests capacity in the market will be sustained and provides assurance that the local community care market is equipped with services that support business continuity and resilience during periods of high pressure.
- 3.12 Demand on mental health beds remains high and the investment in the Wirral Mind floating support service has avoided circa 868 admissions since June 2023.
- 3.13 BCF funding has contributed to the development of a new Direct Payment model which will complement the 3 Conversations strength-based approach to assessment enabling people to consider options other than commissioned support.
- 3.14 Ongoing investment into enabling technology and home adaptations, has seen people in receipt of this service to rise to 5160.

FUTURE AMBITIONS

- 3.15 A delirium pathway is under development, including input from the Council, the Integrated Care Board, the community care market and NHS Trust representatives. The objective is to reduce the numbers of people with delirium but NCTR remaining in beds or being discharged on the wrong bed-based pathway (P2 and P3)). The pathway will ensure people return home (P1) with the right support (enhanced domiciliary care) with a Care Act assessment taking place when the delirium has subsided. This pathway would also prevent unnecessary admissions to hospital.
- 3.16 The Wirral place forward plan has also initially focused on frailty at the front door (supporting older people who present in emergency department), virtual wards (hospital at home avoiding the need for admission) and the Older Persons Rapid Assessment Unit based at Wirral University Teaching Hospital (WUTH).
- 3.17 The governance of the BCF currently sits within the jurisdiction of the Joint Health and Care Commissioning Executive Board (JHCCEG). Wirral's Place Director and the Director of Adult Care and Health seek local stakeholder endorsement of the Plan via the Wirral Place Based Partnership Board (WPBPB). It is validated by the Health and Wellbeing Board, and overall approval of the plan will be via NHS Cheshire and Merseyside ICB Executive Committee.
- 3.18 All service reviews are completed jointly with the ICB and the Council as equal partners. A single template is used to identify the return on investment delivered and future commissioning recommendations. All assessments have at their core, an equality impact assessment, to ensure the communities in Wirral experiencing health and wellbeing inequalities have equal access to funded services.
- 3.19 Recommendations following reviews of smaller services are approved at the Joint Health and Care Commissioning Executive Group (JHCCEG).

- 3.20 The Health and Wellbeing Board are advised of any adjustments via the quarterly and end of year reports and assured that the realisation of the BCF 2023/25 plan objectives have not been compromised.
- 3.21 The Section 75 financial arrangements are ratified by the Adult Social Care and Public Health Committee.
- 3.22 The Adult Social Care Discharge Fund was introduced in November 2022 (Adult Social Care Discharge Fund Guidance 19 November 2022) and has been extended into 2023/24. This is a national allocation of resources to Local Authorities and the NHS from the Government to support places to improve discharges from hospital. The funding was pooled into the BCF. The allocations are set out in section 9.2 of this report and the BCF plan sets out how the funding will be deployed to achieve this.

4.0 FINANCIAL IMPLICATIONS

4.1 The table below sets out the contributions from the ICB and Wirral Council. The additional ICB funding does not expose the Council to increased financial risk. The current risk share arrangements remain the same and Individual services will be reviewed to ensure National Conditions are met and value for money outcomes against cost assessments were demonstrated.

Better Care Fund	2023/24 Budget	2024/25 Budget
Integrated Services	£28.1	£30.1
Adult Social Care Services	£23.9	£23.9
ICB Services	£2.1	£2.3
DFG	£5.1	£5.1
Other	£0.6	£0.6
Total BCF	£59.9	£62.1

4.2 The additional contribution from the government to support hospital discharge is set out below.

Discharge Fund	2023/24 Budget	2024/25 Budget
Wirral Council	£2.5	£4.5
ICB - Wirral Place	£2.7	£3.3
Total BCF	£5.2	£7.8

Total	£65.1	£69.9

5.0 LEGAL IMPLICATIONS

5.1 There is a mandatory requirement to develop a BCF Plan which sets out how the Council and the ICB will deploy BCF funding to achieve the government's priorities for 2023/25 and a Section 75 agreement must be in place to draw down the elements of the pool relating to the BCF.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no new resource implications because of this proposal, as it is a continuation of current arrangements.

7.0 RELEVANT RISKS

7.1 In the absence of a plan and a Section 75 agreement the Council and the Integrated Care Board will be unable to draw down funding and would be in breach of NHSE requirements. There have been significant pressures within the health system and the care market, the BCF has mitigated some of these pressures and should the plan not be approved these pressures would be likely to increase. The plan and the Section 75 arrangements do not expose the Council to increased financial risk as the risk share arrangements remain the same.

8.0 ENGAGEMENT/CONSULTATION

8.1 A range of engagement and consultation processes related to the integration of services and commissioning functions have been undertaken in previous years. Wirral Place in 2023/25 will be building on the current governance arrangements and placing a greater emphasis on collegiate commissioning and listening to service providers and people with lived experience.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 Most BCF funded schemes are delivered by local providers, the emphasis is on providing support in the right place and avoiding the need for extensive out of area travel.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Most BCF funded schemes are delivered by local providers creating employment opportunities for Wirral citizens.

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APPENDICES

N/A

BACKGROUND PAPERS

The BCF 2023/25 Plan. The BCF 2024/25 Plan

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board	21 Sept 2023
Joint Strategic Commissioning Board	22 June 2023
Health and Wellbeing Board	23 March 2023
Health and Wellbeing Board	9 February 2022