

7 September 2022

Agenda Item: 9

REPORT OF THE CORPORATE DIRECTOR FOR ADULT SOCIAL CARE & HEALTH

BETTER CARE FUND (BCF) – SUBMISSION OF YEAR END REPORTING TEMPLATE

Purpose of the Report

1. To endorse the Nottinghamshire 2021-22 Better Care Fund Year End reporting template that was submitted to NHS England on 27 May 2022.
2. To update the Nottinghamshire Health and Wellbeing Board on the development of a Collaborative Commissioning approach.
3. To approve the use of Better Care Fund reserves to progress Social Care Reform until 31st March 2023.

Information

The 2021-22 Better Care Fund Year-end reporting template

4. The 2021-22 Better Care Fund Year-end reporting template (**Appendix 1**) confirms the status of continued compliance against the requirements of the fund, including the final end of year spending position and provides information about challenges, achievements and support needs in progressing delivery.
5. **Metrics (tab 4):** The 2021-22 Better Care Fund planning requirement included three new performance metrics and the Year-end reporting template reinstated monitoring against these. The metrics are:
 - unplanned hospitalisation for chronic ambulatory care sensitive conditions.
 - reducing length of stay in hospital, measured through the percentage of hospital inpatients who have been in hospital for longer than 14 and 21 days.
 - improving the proportion of people discharged home using data on discharge to their usual place of residence.
 - rate of permanent admissions to residential care.
 - proportion of older people who were still at home 91 days after discharge from hospital into reablement/rehabilitation.
6. The 2021-22 Better Care Fund Year-end reporting template requires assessment against

progress for each of these metrics and to highlight challenges, support needs and achievements. It has been reported 'on track to meet target' for each metric, except 'residential admissions' where it has been reported 'not on track to meet target'. A reference to the following has been included to address this; system having several plans in place including the Prevention Strategy and Carers Strategy to improve the ability for people to remain independent in their own homes and plans to improve the range of supported living options.

7. The following system challenges in meeting the metric targets for 2021-22 have been highlighted:
 - A slight increase in admissions relating to COVID-19 and/or conditions that deteriorated over lockdown periods.
 - COVID-19 related sickness absence impacted the ability to provide sufficient homecare provision.
8. The report noted that demand avoidance schemes such as 2 hour community response services and Same Day Emergency Care (SDEC) pathways have helped keep the admission growth to a minimum. There was also success in focused work to recruited more permanent homecare staff.
9. **Year End Feedback (tab 6):**The 2021-22 Better Care Fund Year-end template requires us to highlight success and challenges in driving the enablers of integration. Successes highlighted included establishing a senior partnership governance and oversight for plans to improve market management of home care support, recruitment and training. Also, in developing integration to sharing information for patients being discharged from hospital with additional social complexity (health, care, substance misuse and housing).
10. Challenges in the recruitment and retention across social care and health workforce was highlighted. This has been exacerbated by the ongoing impact from COVID on staffing levels (including adhering to advisory 5 day self-isolation period). Significant recruitment challenges are noted in the adult social care and home care market.

National conditions declaration and additional requirements: The 2021-22 Better Care Fund Year-end template includes the following additional tabs:

- Tab 3: National Conditions, which are:
 - Agree plan and section 75 pooled fund
 - Clinical Commissioning Group (CCG) minimum contribution to social care is in line with BCF policy
 - Agreed investment in NHS commissioned out of hospital services
 - Plan for improving outcomes for people being discharged from hospital
 - Tab 5: I&E Actual – income and expenditure: confirming the BCF allocation has been invested according to the BCF planning template
 - Tab 7: Adult Social Care fee rates: Detail of payment to external social care providers
11. The 2021-22 Better Care Fund Planning requirements included a narrative template, which describes the Nottingham and Nottinghamshire Integrated Care System (ICS) approach to reviewing the Better Care Fund Programme as an integral part of wider work to produce a Collaborative Commissioning and Planning Framework and to support the developing approach to integrated delivery of health and care.

Collaborative Commissioning Framework Update

12. A “Joint commissioning for Integrated Care” workstream with representatives from Nottingham City Council, Nottinghamshire County Council and Bassetlaw and Nottingham and Nottinghamshire CCGs has been providing leadership to develop the role of Collaborative Commissioning as an enabler to deliver integrated care within the Integrated Care System (ICS). A framework has been agreed which sets out the principles for collaborative commissioning, based on an assessment of current ways of working, learning from other systems in England, and reflections from key policy documents. **Appendix 2** includes the Nottingham and Nottinghamshire Collaborative Commissioning Framework.
13. The principles are now being confirmed through a number of test pieces in a “learning laboratory approach” that applies a consistent methodology to identify success factors for, and barriers to, successful collaborative commissioning. This learning will form the basis for scaling up our approach to collaborative commissioning.
14. A “Collaborative Commissioning Oversight Group” is being established to provide ongoing leadership for new ways of commissioning, this will include exploring the opportunity for BCF to drive integration. As well as providing leadership for specific areas of collaborative commissioning, the group will inform the System Development Oversight Group which is being developed to ensure all aspects of system development in the ICS are coordinated and managed.

Use of Better Care Fund Reserves

15. There are key areas of Social Care Reform such as charging reform and CQC quality assurance, that require immediate resources to progress and implement Department of Health and Social Care requirements, it is therefore proposed (pending receipt of government implementation funding) that the Better Care Fund reserves of £862,000 aligned to Protecting Social Care are used to establish new posts and extend existing posts to progress Social Care Reform. For further information around Social Care Reform, a plan on a page is provided as background information in **Appendix 3**.
16. The posts described in paragraph 15 are outlined in a report entitled “Adult Social Care Reform and Quality Assurance Resource” which is available as a background paper.

Conclusion

17. The report template was agreed for submission to NHSE by the following:
 - Cllr John Doddy, Chair of the Nottinghamshire Health & Wellbeing Board
 - Melanie Brooks, Corporate Director: Adult Social Care & Health, Nottinghamshire County Council
 - Lucy Dudge, Chief Commissioning Officer, NHS Nottingham and Nottinghamshire Integrated Care Board
18. Subsequently, the Nottinghamshire Health and Wellbeing Board are asked to endorse the submission of the Nottinghamshire 2021-22 Better Care Fund End of Year reporting template as shown in full at **Appendix 1**.

Other options considered

19. None.

Reasons for Recommendation

20. To ensure the Nottinghamshire Health and Wellbeing Board has oversight of the Better Care Fund and can discharge its national obligations.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

22. The 2021-22 Better Care Fund pooled budget has been agreed as £99,267,060 after inflation and is summarised in **Appendix 1**.

23. The Better Care Fund reserve has an uncommitted balance of £862,000 this is requested to fund the Social Care Reform. The anticipated cost of the posts required to March 2023 is £740,198. A breakdown of this figure is available as a background paper.

Funding Stream	Available Funding	Anticipated cost
Better Care Fund Reserve	£862,000	£740,198

Human Resources Implications

24. There are no Human Resources implications contained within the content of this report.

Legal Implications

25. The Care Act facilitates the establishment of the Better Care Fund by providing a mechanism to make the sharing of NHS funding with local authorities mandatory. The wider powers to use Health Act flexibilities to pool funds, share information and staff are unaffected.

RECOMMENDATION(S)

The Health and Wellbeing Board is asked:

- 1) To endorse the Nottinghamshire 2020-21 Better Care Fund End of Year reporting template that was submitted to NHS England on 27 May 2022.
- 2) To approve the use of Better Care Fund reserves to progress Social Care Reform until 31st March 2023.

Melanie Brooks
Corporate Director: Adult Social Care & Health
Nottinghamshire County Council

For any enquiries about this report please contact:

Naomi Robinson
Senior Joint Commissioning Manager
Nottingham and Nottinghamshire Clinical Commissioning Group
E: Naomi.Robinson2@nhs.net

Clare Gilbert
Group Manager, Strategic Commissioning
Nottinghamshire County Council
T: 0115 8045527
E: clare.gilbert@nottsc.gov.uk

Louise Hemment
Interim Group Manager, Service Improvement Quality and Practice
T: 01159772645
E: louise.hemment@nottsc.gov.uk

Constitutional Comments (LW 30/08/2022)

26. The Health and Wellbeing Board is the appropriate body to consider the content of the report.

Financial Comments (OC 24/08/2022)

27. The Financial implications are detailed throughout this report and are summarized within paragraphs 22 and 23 of this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- 2018-19 Progress Update and Approval for the Use of the BCF Care Act Allocation (Recurrent and Reserve), the Improved BCF, and the Winter Pressures Grant 2019-20, Report to Health & Wellbeing Board (6 March 2019)
- 2019-20 Better Care Fund Policy Framework, Department of Health & Social Care, 10 April 2019
- Quarterly reporting from Local Authorities to the Department of Health & Social Care in relation to the Better Care Fund, Quarter 4 Return – 18 April 2019
- 2018-19 Better Care Fund Performance, Report to Health & Wellbeing Board (5 June 2019)
- Better Care Fund Planning Requirements for 2019-20, Department of Health & Social Care, Ministry of Housing, Communities & Local Government, and NHS England, 18 July 2019

- 2019-20 First Quarter Better Care Fund Performance and Programme Update, Report to Health & Wellbeing Board (4 September 2019)
- Nottinghamshire 2019-20 Better Care Fund Planning Template
- Nottinghamshire 2019-20 Q4 Better Care Fund Reporting Template
- 2020-2021 End of Year Template, Report to Health and Wellbeing Board (9 June 2021)
- [Adult Social Care Reform Impact and Risks, Report to Cabinet \(14 July 2022\)](#)
- Adult Social Care Reform and Quality Assurance Resource Report, Officer Delegated Decision Report (9 August 2022)

Electoral Division(s) and Member(s) Affected

- All.