

**13 March 2023**

**Agenda Item: 8**

## **REPORT OF THE CORPORATE DIRECTOR FOR ADULT SOCIAL CARE AND HEALTH**

### **THE BETTER CARE FUND (BCF) QUARTER 3 NATIONAL RETURN**

#### **Purpose of the Report**

1. To ratify the Nottinghamshire Better Care Fund (BCF) quarterly reporting template for October – December 2023 (quarter 3), which was submitted to NHS England (NHSE) on 09 February 2024.

#### **Information**

2. The Better Care Fund (BCF) was established in 2015 to pool budgets between the NHS and local authorities, aiming to reduce the barriers often created by separate funding streams. Through pooling budgets the BCF supports the commissioning of person-centred health and social care services which achieve improved patient and service user experiences and outcomes. The pooled budget is a combination of contributions from the following areas:
  - a) Minimum allocation from integrated care systems (ICSs)
  - b) Disabled facilities grant – local authority grant
  - c) Social care funding (improved BCF) – local authority grant
  - d) Winter pressures grant funding – local authority grant
3. Systems are required to submit annual BCF plans to NHSE in line with national deadlines, and the Better Care Fund Plan for Nottinghamshire was approved by the Health and Wellbeing Board on 13 September 2023. The annual plans require systems to demonstrate how they will use the BCF to meet the national objectives which are:
  - a) Enable people to stay well, safe, and independent at home for longer
  - b) Provide the right care in the right place at the right time.

4. The **BCF National Reporting Template Quarter 3** asks systems to update on performance against the national performance metrics (**Appendix 1, tab 4**). The 2023-25 national performance metrics are:
  - a. **Avoidable admissions:** Indirectly standardized rate of admissions per 100,000 population. An example of how the BCF locally is supporting this metric is the Urgent Community Response Service, which is provided by Nottinghamshire Healthcare Trust. The service accepts urgent referrals from any health or social care professional for citizens that need a same day response, assessing within two hours if required to avoid an unnecessary hospital or home care admission. An initial assessment is undertaken and they can then provide urgent equipment, short term care, signposting and onward referrals as required to prevent admission.
  - b. **Falls:** Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000. A collaborative workshop is being planned around Long Term Conditions, which will consider system-wide approaches to frailty and joined up prevention of falls. This includes reviewing the opportunity for better use of technology enabled care and early identification of clinical conditions linked to falls e.g. UTIs.
  - c. **Discharge to usual place of residence:** Percentage of people, resident in the Health and Wellbeing Board area, who are discharged from acute hospital to their normal place of residence. Transfer of Care Hubs are in place at all hospital trusts to manage a multi-disciplinary team approach to support patients who are medically safe for discharge to be able to return home with a package of care in place. Additional 'P1' reablement home care provision has been secured via the BCF Additional Discharge Fund.
  - d. **Residential admissions:** Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population. The number of people currently residing in long term residential care is reducing as more people are being supported to remain at home for longer. Across Nottinghamshire this is through an increased capacity within the homecare market.
  - e. **Reablement:** Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. This figure is increasing due to a greater focus on reablement across all service provision and increased capacity within the homecare market.
5. The template requires systems to identify where metrics are on/off track, highlight any achievements and identify any support needs. Two of the metrics are off track.
6. The **discharge to usual place of residence** metric is currently trending as slightly off-track to meet the locally set target. The template highlights that some delays for discharge to usual place of residence were due to lack of capacity in 'P1' reablement providers to support non-weight bearing patients. Overall, discharges to home are trending in line with demand and capacity plans. A multi-agency pre-Christmas event supported system partners in readiness for pressures over the holiday period.
7. The **residential admissions** metric continues to trend as off-track to meet the locally set target. Target for the year to quarter 3 is 399.5 per 100,000 and performance is at 403.8 per 100,000. In numbers this is 747 new admissions against a target of 739. Whilst admissions

are still above the monthly target, the total number of people overall in residential care is starting to reduce.

8. A South Notts Place Based Partnership Board development session included a deep dive into residents' stories of admission to residential care, taking a whole pathway and multi-agency reflective approach to review any opportunities for learning, early intervention and support to prevent or delay the need for admission.
9. The quarter 3 return required updated outputs and expenditure to be reported. No issues have been raised against plan and expenditure is reported as on track against plan.

## **Conclusion**

10. The quarterly reporting template was agreed for submission to NHSE by the BCF Planning and Oversight Group and submitted to NSHE subject to Nottinghamshire Health and Wellbeing Board approval.
11. Subsequently, the Nottinghamshire Health and Wellbeing Board are asked to ratify the Nottinghamshire BCF quarter 3 reporting template. The template is shown in full at **Appendix 1**. Prior to submission to NHSE the template was shared with the Chair of the Nottinghamshire Health and Wellbeing Board, Corporate Director of Adult Social Care and Health (Nottinghamshire County Council) and Programme Director for System Development (Nottingham and Nottinghamshire Integrated Care Board).

## **Other options considered**

12. There is an option to not consult the Health and Wellbeing Board on the BCF quarterly reporting template. This option was discounted as the BCF is one of the Board's statutory responsibilities.

## **Reason for Recommendation**

13. To ensure the Nottinghamshire Health and Wellbeing Board has oversight of the BCF and can discharge its national obligations.

## **Statutory and Policy Implications**

14. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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**

15. The 2023 - 2025 BCF pooled budget has been agreed as £115,432,831 in year 1 (2023/24) and £119,310,655 in year 2 (2024/25) after inflation.

## **Human Resources Implications**

16. There are no human resources implications contained within the contents of this report.

## **Legal Implications**

17. The Care Act facilitates the establishment of the BCF 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**

The Health and Wellbeing Board is asked:

1) To ratify the Nottinghamshire Better Care Fund (BCF) quarter 3 reporting template, which was submitted to NHS England (NHSE) on 09 February 2024.

**Melanie Williams**  
**Corporate Director, Adult Social Care & Health**  
**Nottinghamshire County Council**

**For any enquiries about this report please contact:**

Katy Dunne  
Senior Joint Commissioning Manager  
Nottingham and Nottinghamshire Integrated Care Board  
E: [katy.dunne@nhs.net](mailto:katy.dunne@nhs.net)

## **Constitutional Comments (CD 21/02/24)**

18. The report and recommendation proposed falls within the remit of the Health and Wellbeing Board Terms of Reference set out in the Constitution.

## **Financial Comments (OC 20/02/24)**

19. The Financial implications are detailed throughout this report and are summarised within paragraph 15.

## **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.

- None

## **Electoral Division(s) and Member(s) Affected**

- All