

REPORT TO THE HEALTH & WELLBEING BOARD

2020/21 Better Care Fund Report

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1. Purpose of Report

- 1.1. To provide the Board with an update on the Better Care Fund Plan for 2021-22 and to ratify a number of Locality Commissioning Group (LCG) agreements.

2. Recommendations

- 2.1. Health & Wellbeing Board members are asked to:
- Note the contents of the report; and
 - Ratify the attached recommendation to repurpose some BCF funding from quarter one scheme underspend.
 - Ratify the LCG approved funding applications.

3. Background

- 3.1. The Health and Wellbeing Board act as the decision-making body for the Better Care Fund (BCF). BCF is a joint fund made of up of contributions from B&NES Council, Bath and North East Somerset, Swindon and Wiltshire Clinical Commissioning Group (BSW CCG) and from central government allocations.
- 3.2. There is national specific guidance about how these funds are to be used, distributed, managed and monitored
- 3.3. In March 2020, local areas were informed that publication of the Government's approach to the BCF in 2020-21 would be delayed allowing areas to better focus on responding to the COVID-19 pandemic but that minimal changes would be made for 2020-21. Advice was to prioritise business continuity and rollover plans / schemes where possible.
- 3.4. Given the ongoing pressures on systems, formal BCF plans will not have to be submitted for approval in 2020-21. However, local areas must ensure that use of the BCF funding has been agreed in writing and that the national conditions are met.
- 3.5. Local areas will be required to provide an end of year reconciliation to the Department and NHS England/ Improvement, confirming that the national conditions have been met, total spend from the mandatory funding sources and a breakdown of agreed spending on social care from the CCG minimum contribution.

4. 2021 to 2022 Better Care Fund policy framework

4.1. The 2021 to 2022 BCF policy framework was published by the Government on 19 August 2021. There continues to be four national conditions, these being:

- a jointly agreed plan between local health and social care commissioners, signed off by the HWB
- NHS contribution to adult social care to be maintained in line with the uplift to CCG minimum contribution
- invest in NHS-commissioned out-of-hospital services
- a plan for improving outcomes for people being discharged from hospital

4.2. While the 2022/23 BCF remains largely unchanged, the government recognises that upcoming changes may impact on longer term planning and may require local areas to consider their response to upcoming changes as part of their planning. Local areas are not required to outline this in their 2021/22 BCF plan but may wish to do so in preparation for greater integration and future BCF plans.

5. Bath & North East Somerset Councils 2021-22 BCF Plan

5.1. New BCF Funding Applications

A number of new funding applications have been received and have been provisionally approved by the Locality Commissioning Group and are pending formal ratification from Health and Wellbeing.

- ***Participation and Engagement - £62,000***

The project aims to set out a revitalised approach to co-production and engagement with communities to help review, develop and monitor adult social care and health activity.

The project is for 2 years starting with a review of current activity in Bath and North East Somerset Council and researching positive models in other areas. From this the aim would be to work with the community to bring together a range of options, some short and some long-term arrangements, to support the voice of those with lived experience of social and healthcare. This would also aim to draw in the voice of those not yet involved in health or social care but who may be in the future. Bath university are beginning a listening project in the autumn and this project would link in with both this work and underpin the transformation projects to ensure outcomes are experienced by our communities.

- ***Direct Payment (DP) and Personal Health Budget (PHB) Development Officer - £40,000***

The proposal is to establish one Direct Payment and Personal Health Budget Development Officer to improve the offer and increase the uptake of DPs and PHBs. Currently a very limited commissioning resource (1 day per week) is dedicated to this area of work in B&NES. The DP & PHB Development Officer will work across Adult (and potentially Children's) Social Care and Health to address the gaps, opportunities and areas for development that have been identified by the DP Touchpoint Project and support service review to date.

- ***Wellbeing Representatives (Third sector reablement representatives) - £216k***

Introduction of six wellbeing navigators for 3rd sector support into community teams. People leaving hospital or on admissions avoidance or contacting, but not needing full care act assessment, would be linked in with wellbeing navigators to ensure 3rd sector, strengths-based support, and re-integration into community to support people staying in their own homes. One per PCN to use for discharge and admissions avoidance. Strong link for primary care, social prescribing, and the wellbeing hub as part of the ICA's transformational goals to support community resilience.

- ***Occupational Therapy (OT) support to Disabled Facilities Grant (DFG) backlog - £60,000***

With Covid there have been very few adaptations made to properties via DFG. There is significant DFG to spend but not the OT assessment time to implement required changes. The project will give a year's boost to OT practice bringing in an additional OT to respond to the backlog and also support independence at home.

5.2. Following Locality Commissioning Group approval of these BCF funding applications, we are seeking formal ratification of these decisions from the Health and Wellbeing Board.

5.3. The BCF governance will draw these commitments into the wider strategic planning supporting people to live well at home and support the system to manage winter pressures.

6. Underspend in 2021/22

6.1. Following a review of the 2021/22 Quarter one spends across all schemes funded by BCF a number of schemes have either projected to underspend against their forecast spend or have not spent any of the BCF funding that they had been allocated. This data was

presented to the Locality Commissioning Group on September 2 2021 where it was agreed that where zero spend had been recorded against a Better Care Fund scheme, or the scheme had spent below their Quarter one projection, the funding should be made available for repurposing. This will allow £926,466 of BCF funding to become available to assist with new projects that meet the BCF objectives. In order to minimise the impact to these schemes, we propose that each scheme is extended in to 2022/23 without having to submit a new funding application/extension request. In addition, there remains a pot of uncommitted (iBCF) funds (£573,617), after commitments to the new schemes identified above. If ratified by HWB, a total of £1,500,083 will be available for repurposing.

6.2. This does not mean that agreed projects will not continue, the table below outlines the key recommendations for each scheme. This repurposed funding will continue to meet BCF goals and the strategic direction of the CCG and the Council to support people to live well at home particularly tackling urgent and emerging winter pressures. Below is a summary of the key schemes where funds can be repurposed.

Table 1: Underspend in summary

Funding Source				
iBCF	BCF	Total	Uncommitted Funds (iBCF)	Overall Total
£884,195	£42,271	£926,466	£573,617	£1,500,083

Table 2: Underspend by scheme

Scheme Name	Scheme No.	BCF Funding 2021/22	Funding Source	Planned Spend (Apr-July)	Actual Spend (Apr-July)	Q1 Variance	Q1 Position	Potential Repurpose Value	Revised BCF Funding 2021/22
Reviewing of high cost cases	38	£180,000	iBCF	£60,000	£30,000	-£30,000	Underspend	£30,000	£150,000
Home Care Support to Hospital @ Home	40	£300,000	iBCF	£100,000	£0	-£100,000	Underspend	£300,000	£0
BCF support	12	£429,202	BCF	£143,067	£48,002	-£95,065	Underspend	£13,271	£415,931
DASS projects	41	£210,000	iBCF	£70,000	£0	-£70,000	Underspend	£210,000	£0
Support to Mental Health Strategy	43	£58,000	BCF	£19,333	£0	-£19,333	Underspend	£29,000	£29,000
Specialist Commissioning (Day Services)	47	£88,390	iBCF	£29,463	£0	-£29,463	Underspend	£44,195	£44,195
Block Care Home and home care Placements	35	£300,000	iBCF	£100,000	£0	-£100,000	Underspend	£300,000	£0
								£926,466	£639,126

The releases £926,466 to be repurposed and £639,126 to continue to support the existing schemes in this financial year.

6.3 Repurposing of underspend

As a result of a series of Gold¹ calls in mid-September, a number of measures have been put forward to support flow and to ensure that people are able, wherever possible, to leave acute services and be supported in their community. The Government has identified some new funding to support the second half of the financial year (known as H2 funding), this is committed to existing activity, new activity will need additional funding. The proposal, that we would look to HWB to ratify, would be to draw down unused and delayed use of BCF funding to support people living well in their community in the immediate future through the schemes identified below repurposing the projected underspend in BCF:

Table 3: New schemes utilising under spend to support winter pressures.

New scheme	Summary details	Estimated Costs	Impact
Recruitment	RUH to lead on recruitment, to expedite existing plans for locality in-house home care and Bank (funded in H2). Additional cost tbc.	Possible minimal cost to support HR team TBC	Facilitate recruitment across a number of projects
Care Hours	Following end of summer holiday period, exploring potential of a further block contract of up to 200 care hours/week – would not be in place until mid-October (3-6 weeks). Cost: £160,000	£160,000	200 extra hours of care
Live in care	Following learning from AginCare proposal due to go live October, now exploring /additional pilot around live-in care (3-6 weeks). Cost: £0-£160,000 plus rent at £15,000	£175,000	200 extra hours of care
Westin Care Home beds with RUH	Following re-opening from Covid, review of safeguarding concerns, and completion of staff recruitment in last 7 days, one care home has 8-17 beds (with additional recruitment tbc). These could be used as P1 D2A beds and intermediate care beds, through a combination of block and spot funding. Could go live immediately. Cost: £484,000/H2 (includes beds & therapy support). Potential to balance off against underspend from other D2A commitments.	£484,000	10 guaranteed intermediate beds
Third Sector Support	Reviewing existing Third Sector support to confirm whether additional capacity available	No additional cost attributed to this	Additional support to discharge
Complex Discharge & Health Assessment Support	Additional post to support assessments at discharge	£29,000	Additional support to discharge
Total		£848,000	

¹ Gold calls are emergency calls to review key pressures across the Health and care system

7. Financial Implications

7.1 The level of Bath and North East Somerset's BCF funding including the iBCF, Winter Pressures grant, and Disabled Facilities Grant (DFG) is shown in the income section of the planning template below.

Funding Source	Key	21/22 £
CCG Section 75 Transfer to Council	BCF	£9,611,270
CCG Commissioned Out of Hospital Services	OOH	£3,136,539
CCG Risk Share Contingency	NEA	£632,165
CCG Commissioned Community Services	VC	£27,707,494
Disabilities Facilities Grant Capital	DFG	£1,441,905
iBCF	iBCF	£4,758,864
Winter Pressures Grant	WP	£0
Other Local Authority Grants	Grant	£0
Council Revenue for Care Act	ACT	£1,390,250
Council and Public Health Commissioned Community Services	VC	£20,883,672
Total		£69,562,160

The budget remains balanced if the repurposing proposal outlined in section 5.2 and the new BCF funding applications detailed in section 6.1 are approved by HWB.

7.2 Records of spending against schemes funded through the BCF are required to be maintained to meet year end reporting requirements (of actual income and expenditure for the year). Each BCF funding stream is required to provide details of performance every quarter.

8. Conclusion/ Next Steps

8.1 The Board are asked to:

- Note the contents of this report
- Approve the new BCF funding applications that are outlined in section 5.
- Approve the recommendation to repurpose BCF funding from schemes that have underspent against their 2021/22 quarter 1 projections as in section 7.