

North Somerset Council

REPORT TO THE HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: 7 JUNE 2018

SUBJECT OF REPORT: IMPROVED BETTER CARE FUND

TOWN OR PARISH: ALL

**OFFICER/MEMBER PRESENTING: GERALD HUNT HEAD OF
COMMISIONING**

KEY DECISION: NO

RECOMMENDATIONS

To note the context and priorities for the use of the Improved Better Care Fund and endorse the continuation of the approach as outlined for use of the Grant that meet national conditions.

1. SUMMARY OF REPORT

The report outlines the priorities for the continued use of the Improved Better Care Fund as approved by Health and Wellbeing Board and NHS England for 2017/19.

2. POLICY

NHS England approval is required for the use of the Grant and its usage must meet the national conditions of the Improved Better Care Fund. North Somerset Better Care Fund Plan 2017/19 has been approved by NHS England.

3. DETAILS

The Better Care Fund (BCF) is the national programme through which local areas agree how to spend a local pooled budget in accordance with National requirements. The Improved Better Care Fund (ICBF) is a national grant first announced in 2015 but has been subsequently increased in recent Budgets as a response to the national funding pressures on adult social care. The IBCF is paid direct to the local authority but it is a requirement that the funds are incorporated into the Better Care Fund Section 75 agreement.

A recipient local authority must:

- a) pool the grant funding into the local Better Care Fund, unless an area has written Ministerial exemption;
- b) work with the relevant Clinical Commissioning Group and providers to meet national condition four (Managing Transfers of Care) in the Integration and Better Care Fund Policy Framework and Planning Requirements 2017-19;

c) provide quarterly reports as required by the Secretary of State.

Planning guidance for 2017/19 was released last year. According to the grant conditions, the funding grant can be spent on three purposes:

1. Meeting adult social care needs
2. Ensuring that the local social care provider market is supported.
3. Adult social care that supports the NHS deliver;
 - Avoidance of unnecessary admissions to hospital;
 - Improving patient flow after admission;
 - Ensuring prompt discharge from hospital either for further social care assessments or into a sustainable ongoing care setting (community, residential or nursing) when patients are medically optimised.

Meeting adult social care needs

As is the case in most councils, adult care budgets are under significant pressure. Within the MTFP for 2018/19 growth of £6.44m was provided to address the underlying funding deficit of £3.8m carried forward from 2017/18 and to address new growth commitments and increasing cost pressures. The IBCF has contributed to this rebalancing and the protection of adult care from the severest impacts of government grant reductions is one of the primary purposes of the IBCF.

Ensuring that the local social care provider market is supported

The adult care market is facing significant challenge with rising costs associated with National Living Wage and recruitment challenges leading to capacity restrictions. The IBCF will continue to be used to supplement contract inflation to ensure providers have the means to meet their contractual commitments. The IBCF has also been used to support initiatives such as Proud to Care, a campaign to support commencing careers in care and this campaign will continue.

Adult social care that supports the NHS

The IBCF will continue to be used to support the NHS through targeted investment on adult social care. Critical to the delivery of prompt discharges are sustainable ongoing care which the investment in our care provider capacity is essential to deliver. Hospital admission avoidance in the Better Care Plan include initiatives such as Extra Care and Assistive Technology and measures designed to improve patient flow, include developing common assessment procedures across the three authorities working with the BNSSG CCG, and capacity for assessments, brokerage and support to self-funders. North Somerset Delayed Transfer of Care data remains well below the national average for 2017/18 and the IBCF will ensure this performance is sustained.

4. CONSULTATION

The BCF Plan for 2017/19 involved local stakeholders, these included the Care Home Providers, local urgent Care Flow group, corporate management team, Executive members and North Somerset CCG and was finalised via the Joint Commissioning group and the Plan is subject to regular quarterly monitoring by NHS England and the IGA. These arrangements will need to be modified for the subsequent development of BNSSG,

however the council will wish to ensure that joint commissioning arrangements continue reflect local issues and needs.

5. FINANCIAL IMPLICATIONS

As referenced earlier, the existing plans as set out in Appendix 1 reflect the use of previously announced resources in the Spring budget of 2017; this anticipated that proposals for 2017/18 of £3,759,838, with resources in 2018/19 reducing to £2,618,460. The Spring budget of 2018 increased the 2018/19 resources to £4,917,880.

6. LEGAL POWERS AND IMPLICATIONS

The requirement to utilise a Section 75 agreement for the joint commissioning arrangements will require further amendments and a refresh to the annual contractual agreement. This document follows nationally prescribed formats.

7. RISK MANAGEMENT

There is an improved condition around Managing Transfers of Care (National Condition 4) which requires areas to implement the High Impact Change Model for Managing Transfers of Care.

Appendix A outlines the joint approach to funding implementing and monitoring the impact of these changes and the anticipated impact on reduced delayed transfers of care. This will support the target of reduction in total delayed transfers of care. Whilst current performance indicates that we are confident this will continue to be achieved, there is always an element of risk and uncertainty with regard to possible sanctions on the local authority receipt of the grant with regard to the assignment of joint responsibility for this performance.

8. EQUALITY IMPLICATIONS

An Equality Impact Assessment will be completed where appropriate on individual schemes within the IBCF.

9. CORPORATE IMPLICATIONS

The IBCF resources are significant and all three of the areas of usage in the nationally prescribed conditions will impact on the adult social care budget.

10. OPTIONS CONSIDERED

As contained within the report.

AUTHOR

Gerald Hunt Head of Commissioning
01934 6334803 - gerald.hunt@n-somerset.gov.uk

BACKGROUND PAPERS

Appendix A.