

<b>HEALTH AND WELLBEING BOARD</b>			
Report Title	Better Care Fund (BCF) Plan 2021/22		
Contributors	Executive Director for Community Services, Director of Integrated Care and Commissioning for SELCCG (Lewisham), Director of System Transformation	Item No.	
Class	Part 1	Date:	15 December 2021
Strategic Context	Please see body of report		

## 1. Summary

- 1.1 Members of the Board received a report on 8 September 2021 which asked them to note the delay in the publication of the formal policy framework and planning guidance for the Better Care Fund 2021/22. The planning guidance was subsequently published on 30 September. This required the plan to be submitted to NHS England by 16 November 2021 and to seek formal approval of the plan by the Health and Wellbeing Board at the earliest opportunity.
- 1.2 This report provides members of the Health and Wellbeing Board with an overview of the Better Care Fund plan for 2021/22 (which includes the Improved Better Care Funding) which was submitted and recommends that the Board formally agree the plan which is attached at Annex A.
- 1.3 Following its submission, the BCF plan is now subject to a national assurance process. SEL CCG (Lewisham) and the Council await to be notified of the outcome of this process

## 2. Recommendations

- 2.1 Members of the Health and Wellbeing Board (HWB) are asked to:
- Formally approve the Better Care Fund Plan 2021/22 – see Annex A.
  - Delegate future approval of any BCF/IBCF quarterly returns to the S75 Agreement Management Group.
  - Agree to receive the quarterly returns for information at the next available Health and Wellbeing Board following submission.

### **3. Strategic Context**

- 3.1 The Health and Social Care Act 2012 requires Health and Wellbeing Boards to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area.
- 3.2 The Care Act 2014 amended the NHS Act 2006 to provide the legislative basis for the Better Care Fund. It allows for the mandate to NHS England to include specific requirements relating to the establishment and use of an integration fund.
- 3.3 The BCF is a joint health and social care integration fund managed by Lewisham Council and South East London Clinical Commissioning Group (Lewisham). The strategic framework is set out in the national BCF policy framework and planning guidance.

### **4. BCF Plan 2021/22**

- 4.1 On 19 August 2021, the Government published the Better Care Fund Policy Framework for 2021/22. The document set out the national conditions, metrics and funding arrangements for the BCF in 2021/22.
- 4.2 The Policy Framework stated that a full planning round would be undertaken in 2021/22 with areas required to formally agree BCF plans and fulfil national accountability requirements. The detailed 2021/22 BCF planning requirements were published on 30 September and set out further details of the national planning and assurance processes.
- 4.5 The BCF 2021/22 plan was developed by SEL CCG (Lewisham) and the Council. The BCF Plan 2021/22 covers one financial year and continues to fund activity in the following areas:
- Prevention and Early Action
  - Community based care and Neighbourhood Networks
  - Enhanced Care and Support
  - Population Health and IT

### **5. Funding Contributions**

- 5.1 In 2021/22 the financial contribution to the BCF from the CCG is £24,580,557. The financial contribution from the Council in 2021/22 is £773,989, in addition to the DFG contribution of £1,518,970. The IBCF grant to Lewisham Council has been pooled into the BCF and totals £14,502,373. The total BCF pooled budget for 2021/22 is £41,375,889.
- 5.2 The financial contributions to the BCF have been agreed by the CCG and Council and agreed through the CCG's and Council's formal budget setting processes.

5.3 As set out in the plan, the table below shows the areas of expenditure within the BCF and IBCF plan for 2021/22.

<b>Schemes</b>	<b>Areas of Expenditure</b>	<b>2021/22</b>
Integrated Care Planning	Telephone Triage, Single Point of Access, Transition planning, additional Winter Capacity for care planning	£5,247,028
Community Based Schemes	Extended primary care and urgent care access, Medicine Optimisation and Enablement	£11,071,754
Assistive Technologies	Equipment and Telecare	£996,082
Prevention and Early Intervention	Community Falls Service Sail Connections Self-Management support Social Prescribing	£1,151,529
DFG	Adaptations to the home	£1,518,970
Residential placements	Extra Care Provision Transition support Maintaining level of mental health provision	£4,082,162
Personalised Care at Home	Neighbourhood Community Teams	£4,188,174
High Impact Change Model for Managing Transfer of Care	Social Care Delivery Hospital Discharge Provision Continuing Health Care Assessments Home First and D2A Trusted assessors	£4,402,507
Enablers for integration	Population Health System Connect Care Integration programme and Alliance resource	£1,194,306
Carers services	Advice, information and support	£558,456
Contingency (BCF/IBCF) - Housing Related	To meet activity above plan Learning disability supported accommodation	£502,972 £164,000
Home Care or Domiciliary care	Demographic growth Protection of current level of packages of care Local Care Market Stability	£5,397,949
Care Act Implementation	Deprivation of Liberty Safeguards support	£900,000
<b>Total BCF/IBCF</b>		<b>£41,375,889</b>

## 6. National Conditions and Metrics

6.1 The BCF plan is required to demonstrate that the following national conditions have been met:

- National condition 1: a jointly agreed plan between local health and social care commissioners and signed off by the HWB
- National condition 2: NHS contribution to adult social care to be maintained in line with the uplift to CCG minimum contribution
- National condition 3: invest in NHS commissioned out-of-hospital services.
- National condition 4: plan for improving outcomes for people being discharged from hospital.

The BCF plan also reports on two new metrics:

1. 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
2. improving the proportion of people discharged home using data on discharge to their usual place of residence

In addition, the BCF plan reports against previous metrics for admission avoidance, residential admissions and re-enablement.

## **7. Governance**

7.1 The BCF arrangements are underpinned by pooled funding arrangements with a section 75 agreement. A section 75 agreement is an agreement made under section 75 of the National Health Services Act 2006 between a local authority and an NHS body in England. It can include arrangements for pooling resources and delegating certain NHS and local authority health related functions to the other partner.

7.2 The Section 75 Agreement Management Group (Adults) continues to oversee the 2021/22 BCF plan and expenditure.

## **8. Financial Implications**

8.1 There are no financial implications arising from this report. Monitoring of the activity supported by the Better Care Funding continues to be undertaken by the Section 75 Agreement Management Group (Adults).

## **9. Legal implications**

9.1 As part of their statutory functions, members are required to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area, and to encourage persons who arrange for the provision of health-related services in its area to work closely with the Health and Wellbeing Board.

9.2 Where there is an integration of services and/or joint funding, then this is dealt with under an agreement under Section 75 of the NHS Act 2006 which sets out the governance arrangements for the delivery of services, and where relevant any delegation of functions from one party to another and the respective budget contributions of the local authority and the CCG in relation to the services.

## **10. Crime and Disorder Implications**

10.1 There are no specific crime and disorder implications arising from this report or its recommendations.

## **11. Equalities Implications**

- 11.1 Tackling inequalities in health is one of the overarching purposes of integration. Each new or existing service funded by the BCF has regard to the need to reduce inequalities in access to care and outcomes of care. An equalities assessment/analysis is undertaken as part of the development of any new proposals to assess the impact of the new services on different communities and groups.

## **12. Environmental Implications**

- 12.1 There are no specific environmental implications arising from this report or its recommendations.

## **13. Conclusion**

- 13.1 This report provides an overview of the development of the Better Care Fund 2021/22 plan and seeks formal agreement from Members on the plan which has been submitted to NHS England. Members are asked to note the contents and agree the recommendations set out in the report.
- 13.2 If you have problems opening or printing any embedded links in this document, please contact [mark.burnnell@lewisham.gov.uk](mailto:mark.burnnell@lewisham.gov.uk).
- 13.3 If there are any queries on this report please contact [sarah.wainer@nhs.net](mailto:sarah.wainer@nhs.net).