

HEALTH AND WELL-BEING BOARD 3 NOVEMBER 2015

BETTER CARE FUND UPDATE

Board Sponsor

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Relevance of Paper - Priorities

Older people and long term conditions
Mental health and well-being

Item for: Information and assurance

Recommendation

1. **The Health and Well-being Board (HWB) is asked to:**
 - a) **Note the contribution of the Better Care Fund in reducing emergency hospital admissions and facilitating acute hospital discharges as per the Q1 return to NHS England**
 - b) **Note that the current basis for Better Care Fund budget planning for 2016/17 is for no increase in BCF allocation.**

Background

2. The Better Care Fund (BCF) was announced in June 2013 with the overarching aim of facilitating integration of health and social care through creation of a single pooled budget. It is a key part of the five year strategy for health and care. The NHS Planning Framework ('Everyone Counts: Planning for Patients 2014/15 to 2018/19') asks CCGs to agree five year strategies, including a two year operational plan, and use of the BCF, through the Health and Wellbeing Board (HWB)
3. The BCF budget for 2015/16 totals £37.193m, which is included in the Worcestershire Section 75 agreement.
4. The Worcestershire 2015/16 BCF plan grouped schemes under three main headings - Admission Prevention, Facilitated Discharge, and Independent Living. The plan was agreed by the Health and Wellbeing Board in September 2014, and approved by NHS England without condition or support. The detailed list of each scheme within these group headings is available on line as Appendix A.

Budget Position of BCF 2015/16

5. The budgetary position of the Better Care Fund is reported monthly to the Integrated Commissioning Executive Officers Group (ICEOG), and quarterly to HWB. The forecast presented to HWB at the end of Quarter 1 was a £478k overspend, due to significant pressures on the schemes focusing on patient flow – Urgent and Unplanned Admissions beds (within the Admission Prevention group), and Plaster of Paris Placements and Pathway 3 Discharge to Assess beds (within the Facilitated Discharge group).
6. All stakeholder organisations are currently working together, meeting on a weekly basis, to reduce the pressures on those schemes and return the Better Care Fund to a within-budget position by the end of the financial year.
7. ICEOG have made it clear to operational managers and lead commissioners that the Better Care Fund cannot overspend during this financial year, and therefore if pressures cannot be sufficiently managed, alternative funding sources for the schemes must be identified, or the schemes will close. The link between the reductions in emergency admissions and the implementation of these schemes is however something that will need to continue to be reviewed.

Effectiveness of 2015/16 Better Care Fund

8. There are 6 National Conditions for access to the Better Care Fund. In the 2015/16 Quarter 1 return for the BCF, Worcestershire reported that it was currently meeting all six of these conditions. The return is available on line as Appendix B.
9. For the schemes which focus on patient flow, we have very clear figures on the number of purchased placements and average length of stay, cost etc. The summary data for these three schemes can be seen in the table below:

Scheme	Client Numbers Apr-Sept	Average days purchased per client	Average cost per client (£)
Urgent and Unplanned Placements	174	21	1,844
Plaster of Paris Placements	106	50	3,990
Pathway 3 (Discharge to Assess)	230	49	3,494

10. The data indicates that our Urgent and Unplanned Placements purchased has led to 174 emergency hospital admissions being avoided since April 2014, and that 336 patients have had facilitated discharge into either the Plaster of Paris Placements or Pathway 3 beds. A working group has been set up to reduce the length of stay and improve case management across all three of these schemes, thereby lowering the average cost per client, as part of the wider work in managing the BCF budget.

11. An important metric for the Better Care Fund is emergency hospital (non-elective) admissions. A return on this measure is submitted to NHS England (after approval by HWB) on a quarterly basis. The 2015/16 Quarter 1 return was submitted in August 2015 and is available on line as Appendix C. The data for non-elective admissions shows a figure of 12,402 admissions in Q1, compared to a planned figure of 12,951. This represents a decrease for the quarter of 4.95% against our baseline figure (baseline 13,048 down by 646 to 12,402). It is reasonable to conclude that integrated working in Worcestershire (of which the Better Care Fund is a key component) has helped contribute to a reduction in emergency admissions.

2016/17 Better Care Fund allocation

12. The Worcestershire Better Care Fund allocation for 2016/17 is not currently known, and we do not expect full detailed guidance until after the Comprehensive spending review in late November. The indication given by the Minister of State for Care and Support, the Parliamentary Under Secretary of State (Minister for Local Government), and the Better Care Fund Support team is that we should budget that the allocation will remain at the 2015/16 figure.

2016/17 Better Care Fund Priorities for expenditure

13. A number of the BCF projects involve a transfer of funding responsibility from County Council Adult Social Care budgets to the BCF. There are also a number of Better Care Fund schemes that are within the scope of the various Integrated Recovery projects. These projects are ongoing and involve the CCGs and WCC. The HWB receive regular updates on progress with implementation of these projects. The outcomes – chiefly whether those BCF schemes within scope should continue to be commissioned – may impact on the funding available for any new Better Care Fund schemes, or enhancements to existing schemes, for 2016/17. The scheme groupings in Appendix A denote which individual schemes are affected.

14. Aside from the Integrated Recovery projects, other schemes are currently ring-fenced within the overall BCF allocation. These include capital funds for Social Care, a revenue allocation for Care Act Implementation, and the Disabled Facilities Capital Grant which is Passported to District Councils. It is expected that the confirmation of the 2016/17 BCF allocation will include some guidance on amounts to be ring-fenced. It is also important to note that many BCF schemes have contracts with providers with notice periods that could not be ceased by April 2016.

15. Therefore the current amount in the 2015/16 BCF that is not part of an integrated recovery project or ring-fenced for a specific purpose is £8.579m. The amounts are highlighted in blue in the table below:

Grouping	Note	2015/16 Budget (£000)
Admission Prevention	Part of Integrated Recovery Project	6,541
Admission Prevention	Not recovery or ring-fenced	5,255
Total Admission Prevention		11,796
Facilitated	Part of Integrated	6,135

Discharge	Recovery Project	
Facilitated Discharge	Not recovery or ring-fenced	2,984
Total Facilitated Discharge		9,119
Independent Living	Carers	1,260
Independent Living	Implementation of Care Act (Revenue)	1,308
Independent Living	Social Care Capital and Care Act Implementation (Capital)	1,328
Independent Living	Disabled Facilities Capital Grant	2,358
Independent Living	Not recovery or ring-fenced	340
Total Independent Living		6,594
Held centrally against 3.5% reduction in admissions		9,684
Total Better Care Fund		37,193

16. Work is currently ongoing to agree funding priorities for the 2016/17 fund. This involves an analysis of all the schemes this year to evaluate effectiveness and value for money. A more detailed report will be presented in January to inform the HWB of the priorities proposed by ICEOG, and more information (if available) of the allocation and conditions of the 2016/17 Better Care Fund.

Contact Points

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Supporting Information – Available on-line

- Appendix A – Grouping of 2015/16 Better Care Fund schemes
- Appendix B – Copy of Worcestershire Q1 return for National Conditions
- Appendix C - Copy of Worcestershire Q1 return for Non-elective admissions data