

# Cabinet Meeting on Wednesday 20 February 2019 Staffordshire Better Care Fund 2019/20

# Cllr Alan White, Deputy Leader and Cabinet Member for Health, Care and Wellbeing said,

"Providing more joined up health and social care for people in their homes or in their local communities remains a key priority for both NHS partners and ourselves.

The Better Care Fund allows us to channel funding to support schemes which help us achieve this goal. In the long-run this is not only better for residents and more affordable for taxpayers, but actually reduces pressure on NHS hospitals.

We have made some tremendous progress in areas such as reducing delays in people returning home from hospital when they are well enough to do so and the challenge now is to build on this and replicate people's access to good community care across the whole county."

#### **Report Summary:**

- Staffordshire Better Care Fund (BCF) performance, 2017-19.
- BCF Guidance, 2019-20.
- Staffordshire BCF plan, 2019-20

#### Recommendations

I recommend that Cabinet:

- a. Considers the progress of the Staffordshire BCF during 2017-19.
- b. Agrees that the Staffordshire BCF Plan for 2019-20 extend the existing schemes as set out in paragraphs 16-24.
- c. Notes that the Staffordshire Health and Wellbeing Board will be asked to approve the Staffordshire BCF Plan for 2019-20 in principle and delegate final approval to the Chairs, including the Cabinet Member for Health, Care and Well-being.

#### Cabinet - Wednesday 20 February 2019

#### Staffordshire Better Care Fund 2019/20

# Recommendations of the Deputy Leader and Cabinet Member for Health, Care and Wellbeing

I recommend that Cabinet:

- a. Considers the progress of the Staffordshire BCF during 2017-19.
- b. Agrees that the Staffordshire BCF Plan for 2019-20 extend the existing schemes as set out in paragraphs 16-24.
- c. Notes that the Staffordshire Health and Wellbeing Board will be asked to approve the Staffordshire BCF Plan for 2019-20 in principle and delegate final approval to the Chairs, including the Cabinet Member for Health, Care and Well-being.

#### Report of the Director of Health and Care

#### Reasons for Recommendations:

#### Introduction

- 1. The Better Care Fund (BCF) was announced by Government in the 2013 spending round, to support integration of NHS and social care. The Comprehensive Spending Review stated that the BCF would exist for the life of the parliament (2015-2020). The Staffordshire BCF Plan for 2017-19 was approved by Cabinet in February 2017.
- 2. Due to strategic conversations at central government level around minimum contributions and DToC (delayed transfer of Care) ambitions the Regional BCF Lead for the West Midlands has advised Staffordshire County Council that the current schemes (in place for 2017-19) can be maintained without the need for substantive changes in BCF Plan for 2019-20.
- 3. At time of writing the BCF Planning Guidance for 2019/20 had not been published and the submission date for the Plan is unknown. It is anticipated, however that we will be required to submit our BCF Plan in late March or early April 2019. In order to comply with these timescales, it is recommended that Cabinet agree to extend the existing schemes, with approval in principle from the Health and Wellbeing Board for the BCF Plan in March 2019, and then final approval delegated to the Health and Well-being Board Chairs, including the Cabinet Member for Health, Care and Well-being. As has always been the case with BCF funding a central approval process will still need to be undertaken.

4. This report includes a summary of the BCF progress during 2017-19, reflecting on the. It also covers the policy framework for 2019-20 as well as the key aspects of the proposed BCF plan for 2019-20.

# **Background**

# BCF progress 2017-19

- 5. The Staffordshire BCF Plan 2017-19 included three schemes as follows:
  - a. **Admission Avoidance / Discharge to Assess:** The purpose of this scheme was to reduce emergency hospital admissions, facilitate timely discharge, and return people to full independence wherever possible.
  - b. **Ensuring the sustainability of adult social care:** The purpose of this scheme was to maintain and provide additional funding to support adult social care and ensure that services were sustainable over the 2017-19 planning period.
  - c. Enhanced Primary and Community Care: The purpose of this scheme was to improve the quality and efficiency of primary and community services and to continue to integrate community services.
- 6. The total funding for these three schemes can be seen in the table below:

Funding of Staffordshire BCF	2017-18	2018-19
Schemes	(£'000)	(£'000)
Scheme A	16,223	14,304
Scheme B	16,562	26,173
Scheme C	45,321	44,412
Sub-Total	78,106	84,888
Disabled Facilities Grant (DFG)	7,520	8,172
Total	85,626	93,060

### **Performance against BCF metrics**

7. The Staffordshire BCF Plan 2017-19 included four metrics as in the table below:

BCF Metric	Target/ Plan 18-19	Current delivery
Reduction in non-elective admissions (general and acute) Rate per 100,000	98,313	Except for Quarter 1 of 2018/19 where the number of non-elective admissions was marginally higher than the BCF target, the numbers have remained just within the target since the start of 2017/18. The most recent quarter's total was 1.3% lower than the target, and over the BCF period as a whole

		the total is around 6.6% lower than the target. Please see Appendix A.
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000	576.8	The aim was to hold the rate of admissions steady despite demographic pressures. Despite these pressures, the rate of admissions to residential care remains below our target, and below the rate in 2016/17 (604.5 per 100,000 population).
Proportion of older people (65+) still at home 91 days after discharge from hospital into reablement/rehabilitation services	85%	Staffordshire's actual success rate is close to 90%, which is higher than the national average.
Delayed transfers of care from hospital per 100,000 population	2,679*	Whilst Staffordshire has not quite met its DTOC target we have achieved impressive reductions in delays since the start of 2018. We have seen a 23% reduction in total monthly delayed days since the start of 2018, and almost a 40% reduction in social care and joint delays. This is a much greater improvement than the national average over the same period. Please see Appendix B.

<sup>\*</sup> September 2018 DTOC target

#### **National Conditions**

- 8. In addition to the BCF metrics above, the BCF Plan 2017-19 included a requirement to meet four national conditions, all of which were met:
  - a. Jointly Agreed Plan
  - b. NHS contribution to adult social care is maintained in line with inflation
  - c. Agreement to invest in NHS commissioned out of hospital services
  - d. Management of transfers of care.

# Policy framework for 2019-20

- 9. Currently, the Department of Health and Social Care (DHSC) and the Ministry of Housing, Communities and Local Government (MHCLG) are developing the Integration and BCF Policy Framework for 2019-20 as part of the wider BCF Review announced in July 2018.
- 10. The BCF Policy Framework for 2019-20 and the BCF Planning Requirements are expected to be published in early 2019. These should give an indication of the

- requirements for the 2019/20 BCF Plan along with submission timescales and approval requirements. At the time of writing planning, guidance had not been published and the deadline for submissions was unknown.
- 11. NHSE have confirmed that the 2019/20 will be a transitional year with minimal changes to BCF plans already in place. The aim is to keep the BCF structurally very similar with changes to the narrative only where required. NHSE continues to recommend a roll-over of existing schemes and an uplift of financials. It has also been confirmed that there will be a continued focus on DTOCs and that this will continue to be the main BCF metric.

# Planning for 2019-20: BCF Funding

12. In October 2018, the Joint Commissioning Board considered and approved a paper outlining the indicative cash contribution from the Staffordshire Clinical Commissioning Groups (CCGs) to SCC for the 2019/20 BCF. It also considered and approved the indicative expenditure allocated against this cash contribution. This paper assumed an inflation uplift of 2%. Subsequently NHSE confirmed the inflation figure to be used for planning purposes as 1.79%. Based on this inflation uplift, the proposed funding for the Staffordshire BCF for 2019/20 is as follows:

Better Care Funding 2019/20	£'000s
CCG RNF transfers to SCC for Adult Social Care (previously SCISH)	17,436
CCG cash transfers to SCC for carers	581
CCG directly commissioned	241
CCG cash transfer for ongoing costs of Care Act	2,012
TOTAL CCG cash transfer	20,271
TOTAL iBCF1	23,201
TOTAL iBCF2	5,003
CCG aligned funding	42,927
TOTAL excl DFG	91,402
Disabled Facilities Grant*	8,172
TOTAL BCF Fund	99,574

<sup>\*</sup>The funding for Disabled Facilities Grants is unknown at this stage, therefore the grant total for 2018/19 has been assumed.

13. Please note that until CCG allocations are published, it will not be possible to confirm the funding shown above.

### Planning for 2019-20: BCF Schemes

- 14. In line with NHS advice, there will be no substantial change to the BCF Schemes included in the BCF Plan for 2017-19. The proposed schemes for 2019-20 are therefore:
  - a. Admission Avoidance / Discharge to Assess

- b. Ensuring the Sustainability of Adult Social Care
- c. Enhanced Primary and Community Care

# Scheme A - Admission Avoidance / Discharge to Assess

- 15. In 2017/18 and 2018/19 Staffordshire NHS and local authority partners implemented the High Impact Change model and embedded a Discharge to Assess approach to acute hospital discharge processes. This model is now in place in the north of the county and joint proposals to address variation in the south of the county, along with the funding requirements, are currently being considered by CCG governing bodies. The impact of this scheme on the number of DTOCs can be seen in paragraph 7, above.
- 16. Cabinet is asked to agree to continue this scheme, specifically to ensure that the full roll out of discharge to assess is achieved. This will require investment in track and triage services in the south of the county, ensuring there is sufficient Home First capacity in place, as well as sufficient bed-based capacity for those who are deemed unsuitable for home-based reablement.
- 17. Proposed funding associated with this scheme is shown in the table below:

Service	Funding (£000)
Service	2019/20
Expansion of Track and Triage team	215
Home First reablement services for integrated prevention and discharge to assess (Living Independently Staffordshire)	10,289
Admission avoidance / discharge to beds	3,071
TOTAL Scheme A	£13,575

# Scheme B - Ensuring the Sustainability of Adult Social Care

- 18. This scheme has helped to ensure that adult social care has remained sustainable despite market fragility. Home care has been recommissioned to provide greater security to providers and to address recruitment and retention difficulties. Care home provision has been sustained through addressing cost pressures in the market and funding has been used to secure additional capacity where needed.
- 19. Cabinet is asked to agree to continue this scheme, to ensure that adequate capacity for home care packages and care home placements is available.
- 20. Proposed funding associated with this scheme is shown in the table below:

Services	Funding (£000)
Services	2019/20
Home care	28,133
Older people's residential and nursing care and day services	4,077
Learning disability and mental health placements	380
Safeguarding	431

Advocacy	235
Total	£33,256

# **Scheme C - Enhanced Primary and Community Care**

- 21. This scheme has helped to ensure the funding and improvement of a range of integrated community prevention and health services. Scheme funding has been used to improve working practices, promote independence, pilot an enhanced adult social care front door, sustain carers services and commission new arrangements for Disabled Facilities Grants. This scheme was also used to improve a range of health services, including dementia care and end-of-life care. Funding has also been used to improve outcomes for frail elderly people and to reduce the number of hospital admissions because of falls.
- 22. Cabinet is asked to agree to continue this scheme, so that continued improvements can be made to integrated community teams and to the quality of care for elderly people and those with dementia and receiving end-of-life care.
- 23. Proposed funding associated with this scheme is shown in the table below:

Services	Funding (£000)
	2019/20
Integrated community teams	5,209
Occupational therapy	1,820
Carers	1,416
Community equipment	5,304
Dementia care	4,131
Hospices	3,694
Continuing Health Care excluding FNC	10,389
Frailty	7,807
IAPT	4,801
Total	£44,571

# **Next Steps**

- 24. If Cabinet and the CCG Governing Bodies agree to extend the existing schemes, then approval in principle from the Health and Wellbeing Board for the BCF Plan will be sought in March 2019, with final approval delegated to the Health and Wellbeing Board Chairs, including the Cabinet Member for Health, Care and Wellbeing. The BCF Plan will then enter a national assurance process led by NHS England.
- 25. The £20m cash transfer to SCC from the CCGs could be at risk if the BCF Plan is not approved by the Health and Wellbeing Board or not assured by the national process. This is a low risk as SCC and the CCGs have already agreed an indicative cash contribution, and we are perceived nationally as an improving

health and care system, including good progress against our target for reducing DTOC.

# **List of Background Documents/Appendices:**

**Appendix A -** NEA Performance against trajectory **Appendix B -** DTOC Performance against trajectory

**Report Commissioner:** Jenny Pierpoint

Job Title: Strategic Lead: Staffordshire Better Care Fund

**Telephone No:** 07773 791371

**Email:** jenny.pierpoint@staffordshire.gov.uk