

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Glen Garrod, Executive Director of Adult Care and Community Wellbeing

Report to Lincolnshire Health and Wellbeing Board

Date: 11 December 2018

Subject: Better Care Fund Update

Summary:

This report provides the Lincolnshire Health and Wellbeing Board (HWB) with an update on Lincolnshire's BCF plan for 2017-2019. There is also a finance and performance update showing the current position

Actions Required:

Lincolnshire Health and Wellbeing Board are asked to note the BCF report update.

1. Background

The original plan submitted for 2017 - 2019 shows sums of £226m for 2017/18 and £235m for 2018/19. The values for 2018/19 have since been revised to £232.123m

Formal approval – without any conditions - to the original plan was given on 31 October 2017 with all relevant agreements put in place by 28 November 2017.

BCF 2017/18 and 2018/19

The BCF Narrative Plan and related Planning Template were submitted to NHSE on 11 September as required on 31 October 2017.

The key financial elements of the plan include:-

An overall BCF Plan now totalling £222m for 2017/18 and £232m for 2018/19

- Agreement that the 'Minimum Mandated Expenditure on Social Care from the CCG minimum' complies with national requirements for a 1.79% and then 1.9% increase, making the amount provided for the Protection of Adult Care Services £17.130m in 2017/18 and £17.465m in 2018/19.
- Over the three years of the overall iBCF funding to March 2020 the funding will be invested in:

	17/18 to 19/20
Meeting Adult Social Care Need	53%
Reducing Pressures on the NHS	22%
Stabilising the Social Care Market	24%

The key **performance** elements of the BCF Plan relate to:-

- Delayed Transfers of Care (DTOC) An increased focus has been placed on the DTOC metric, and increasingly the success of the BCF Plan is nationally seen to depend on being successful in reducing DTOC. The Lincolnshire plan assumes that both the local authority and the CCGs will achieve their respective – and collective - nationally set DTOC targets
- Non Elective Admissions (NEAs) the BCF Plan also assumes that the nationally set target for NEAs is also achieved.
- In both the above areas the plan is required to identify whether 'stretch targets' should be set. This challenge has been discussed within LCC and the 4 CCGS, at the SET and also at the Lincolnshire A&E Delivery Board. It has been agreed that we will not include a stretch target in either of these areas.

BCF Planning conditions allow for the current plan to be revised from time to time, to reflect changes in assumptions that may give rise to a change in the planning total.

2. General BCF Update

An updated BCF operating guidance was published on 18th July 2018, the purpose of which sets out:

- An updated accountability structure and funding flow diagrams reflecting recent changes to relevant government departments
- Funding conditions which have now reduced from eight to four
- Refreshed Metric Plans for 2018-19
- Confirmation of the combined quarterly reporting process for BCF and IBCF funds
- Updated support, intervention and escalation processes.

Lincolnshire County Council (LCC) and the Lincolnshire CCG's took the opportunity to review the Lincolnshire BCF plan which resulted in minor changes to BCF expenditure plans. These were agreed by the Lincolnshire Joint Executive Team (JET), and a letter issued to regional Better Care Support Team confirming the changes (BCST).

The changes described above will result in the overall value of Lincolnshire's BCF planning total increasing to £232.123m.

Monthly teleconferences are held by members of the BCST who provide day to day support to BCF leads within the East Midlands. BCST also provide regular updates on

the current developments both regionally and nationally, and at the most recent teleconference help on 9th November, the following updates were given.

- BCF 19/20 The process for the 19/20 BCF will be broadly the same as the 2017-19 planning guidance which suggests that 19/20 will simply be a roll-forward of existing plans.
- DTOC The BCST are still waiting for clarity over 19/20 DTOC targets. The
 regional view is that new targets should reflect progress made in particular areas
 (some well performing areas now have a "zero" target), however any fundamental
 change in targets are likely to take effect from April 2020 onwards.
- 19/20 Minimum Contributions There are still on-going debates at a national level regarding the value of minimum contributions via CCGs for 19/20. Discussions are centred on a choice between an increase in funding linked to inflation or a link to the level of increase in NHS revenue.
- NHS Long Term Plan due mid-November, with BCF requirements and policy framework together with the NHS Operating Plan in early December. The Green Paper looking at the future funding of Adult Social Care is now likely to be published early next year.
- BCF Review Departments are also working on a review of the BCF, the review will look into:
 - The purpose and role of the fund.
 - How funding flows can be managed in a way that is clearer and allows more focus on improving outcomes.
 - How the fund can be administered with fewer burdens to local systems.

There is still uncertainty about how local engagement will happen and plans are unlikely to be finalised until well into 2019.

3. Finance

The finance update is shown as Appendix A which describes the current outturn position against the current budgeted BCF for 2018/19 (£232m) and includes:-

- CCG funding for the Protection of Adult Care Services £17.465m
- iBCF funding announced in the November 2015 budget £14.249m
- iBCF Supplementary funding announced in the March 2017 budget £9.209m
- Disabled Facilities Grant (DFG) allocations to District Councils £5.698m
- Existing agreements included within the BCF as a whole £185.502m

Current analysis as at 31 October 2018 suggests that spend against the BCF will total £236.377m this financial year. This represents an overspend of £4.254m (2.13%) against the total allocation of £232.123m.

Spending against the first four principle funding areas of the BCF is projected to produce a small underspend of £0.379m against their respective allocations (£46.621m), This is linked to the an amount of iBCF funding totalling £0.379m that remains unallocated following the review of BCF schemes earlier in the year, however it has been proposed that this funding be allocated to CCGs to help fund the increasing cost of LD Continuing Health Care costs in 18/19.

The area of overspend is linked to existing agreements and is limited to the following areas:

- Learning Disability S75 Agreement is projected to produce an overspend of £3.499m against a budget of £70.329m. This has been reported to the LD Joint Delivery Board. This is reduced to £2.799m with the application of additional CHC funding via the iBCF totalling £0.700m
- Integrated Community Equipment Services (ICES) S75 Agreement is also projected to produce an overspend of £1.284m against a budget of £5.800m. This has been reported to the ICES Strategic Partnership Board.
- Mental Health S75 agreement between LCC and LPFT is projected to overspend by £0.550m in 2018/19

In each case any projected overspend will be dealt with via existing risk arrangements detailed in each of the relevant S75 agreements. The projected risk payments due are expected to be in the region of £2.487m for LCC and £2.145m for the four CCGs. An analysis of potential risk payments for each CCG is shown below.

CCG	Value
East	£719,375.34
West	£637,114.52
South	£435,056.96
South West	£353,202.17
Total	£2,144,749.00

Work is also on-going to develop a schedule of reviews for each of the BCF schemes over a twelve month period between October 2018 and September 2019. A working draft of the schedule has been produced and is included as Appendix B to this report.

The first review, into the Learning Disability S75 took place in October and also included a review of the existing Section 256 agreement for the provision of Crisis Housing for adults with a learning disability. A copy of the presentation given to the finance group can be found in Appendix C.

4. Performance

An expanded BCF performance report for Quarter 2 2018/19 is shown as Appendix D, a long term analysis of NEA and DTOCs including a comparison against the national picture can be seen in Appendix E. Highlights from the latest available ratified data include:

- Non-Elective Admissions A total of 20,738 admissions were made during the quarter, which is an average of 6,912 per month – this trend of admissions is higher than in 2017/18 (20,690) and has not met the target level.
- **Residential Admissions** there have been 460 older people (65+) admitted to permanent Residential care to date in 2018/19. This is 115 lower than the target trajectory for the year and some 151 admissions below the level at the same point last year.

• **Delayed Days** – There have been 6,848 delayed days in Quarter 2 2018/19. This exceeds the target level but is higher than in the same period of 2017/18 (6,539).

The average delayed beds per day was 78 at the end of Q2, this is higher than the expected target for Lincolnshire to be achieved by September, which was set at 58.7.

• **Reablement** - This measure is based on a 3 month window where older people discharged from hospital between October and December, are checked to see their status 91 days later. The confirmed performance for the most recent window in 2017/18 was 80.0% against a target of 80.5% for the BCF. This is an improvement on 16/17 where the outturn was 75.4%.

This has been assisted by improved volume and outcomes performance of the reablement providers in Lincolnshire. Although we will not be able to report this 91 day indicator on a quarterly basis, we will monitor reablement activity and performance to provide assurance for this key area.

- iBCF and Local Measures A number of local data measures have been added
 to the performance report for the BCF, some of which are used as part of the
 information that is provided to NHSE on a quarterly basis and others as a purely
 local measure to assess the impact of the additional investment in any particular
 area. The aim is to give a more thorough and granular picture of performance and
 activity funded by the BCF in Lincolnshire through the various schemes. Measure
 include:
 - Number of clients in receipt of Home Care
 - Total number of Care Home placements
 - Number of reablement hours delivered
 - Number of Weekend Hospital Discharges
 - Hospital Discharges with Social Care Involvement
 - Number of Carers supported by Adult Care
- The report is not yet complete and as such is subject to change, but data development activity will be on-going throughout the year to expand the suite of measures for additional schemes such as CAMHS, Co-responders and Trusted Assessors.

5. Conclusion

The Board is asked to note the information provided both in this report and the appendices attached

6. Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy

The Council and Clinical Commissioning Groups must have regard to the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.

7. Consultation

None required.

8. Appendices

These are listed below and attached at the back of the report		
Appendix A	BCF Finance Report 2018-19 - November 2018	
Appendix B	Draft BCF S75 Finance Review Work Plan 18/19	
Appendix C	LD S75 VFM Presentation – October 2018	
Appendix D	BCF Performance Report – Q2 2018-19	
Appendix E	ADASS DTOC Overview Slide September 2018	

9. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were use in the preparation of this report.

This report was written by Steven Houchin who can be contacted on (01522 554293) or (<u>Steven.Houchin@Lincolnshire.gov.uk</u>)