

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 June 2019
Subject:	Better Care Fund 18/19 Quarter 4 Update

Summary:

This report provides the Lincolnshire Health and Wellbeing Board with an update on Lincolnshire's BCF plan for 2017-2019. There is also a finance and performance update showing the current position and an update in relation to 19/20 BCF arrangements

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 by the government – 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 contribution' 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 (DTC) - An increased focus has been placed on the DTC metric, and increasingly the success of the BCF Plan has been to-date nationally seen by some (notably NHSE), to depend on being successful in reducing DTC. The Lincolnshire plan assumes that both the local authority and the CCGs will achieve their respective – and collective - nationally set DTC 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

April saw the publication of a number of documents in readiness of the requirement for local BCF systems to agree plans for the final year of the BCF in 2019/20, these are enclosed for your information and include:-

- Better Care Fund 2019-20 Policy Framework (Appendix A)
- iBCF Reporting Requirements 2019-20 (Appendix B)
- iBCF 2019-20 S31 Grant Determination (Appendix C)
- ASC Winter Pressures S31 Grant Determination (Appendix D)
- Disabled Facilities Grant Capital (DFG) Grant Determination 2019-20 (Appendix E)

Lincolnshire County Council are currently making arrangements to pass the 2019/20 funding which totals £6.149m to Districts as per the terms of the grant determination and a letter (Appendix F) was issued to all Districts on 16th May informing them of the process.

A recent teleconference of regional BCF leads chaired by the regional Better Care Support Team provided a number of updates in relation to the BCF in 2019/20:-

- The national ambition for managing Delayed Transfers of Care (DToC) will continue, ie., to reduce DToCs to less than 4,000 daily delays. Local expectations will continue to be set through the BCF and this will be confirmed in the Planning Requirements due to be published early in the summer.
- There is an expectation that the CCG minimum contribution to the BCF will increase to £3.84 billion nationally in 2019-20, in line with average NHS revenue growth. As such revised allocations at a CCG and H&WB level will be made available shortly, however the approach to allocating the increase is being finalised, and it is not expected to result in a uniform increase across the country.
- The BCF planning requirements for 2019-20 will be collected via a single template with reduced, targeted, input rather than a separate narrative plan as was required for the 2017-19 plans.
- 2019/20 Winter Pressures funding will be included as part of the overall iBCF and as such winter plans will need to be reflected within the overall submission
- The assurance process will be similar to before, that is regional panels but there will be no "Approved with Conditions" category there is a need to ensure all plans get through first time where possible.
- The estimated timescale for completion of the planning process are estimated to be 6 to 7 weeks following the publication of planning requirements and submission, therefore a deadline around late July or early August 2019.

3. Finance

The final 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

The final outturn for the period to 31 March 2019 against the BCF was £236.151m, representing an overspend of £4.029m (1.74%) against the total allocation of £232.123m.

Spending against the first four principle funding areas of the BCF were balanced against respective allocations (£46.621m).

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

- Learning Disability S75 Agreement is projected to overspend by £2.680m against a budget of £70.329m. This has been reported to the LD Joint Delivery Board and includes the application of additional CHC funding via the iBCF totalling £0.700m. The level of CCG overspend against Continuing Healthcare budgets was £2.156m and Lincolnshire County Council overspend totalled £0.525m
- Integrated Community Equipment Services (ICES) S75 Agreement also produced an overspend of £0.746m against a budget of £5.800m. This has been reported to the ICES Strategic Partnership Board. The level of CCG overspend against their share of the service was £0.096m and Lincolnshire County Council overspend totalled £0.650m
- Mental Health S75 agreement between LCC and LPFT overspent by £0.601m in 2018/19

In each case the final overspend has been dealt with via existing risk arrangements detailed in each of the relevant S75 agreements. The final risk payments incurred by Lincolnshire County Council totalled £1.777m and the four CCG's overspend totalled £2.251m. An analysis of potential risk payments for each CCG is shown below.

East	£755,189
West	£668,833
South	£456,716
South West	£370,786
Total	£2,251,524

4. Performance

An expanded BCF performance report for Quarter 4 2018/19 is shown as Appendix G.

The report shows continued excellent progress towards achieving the main outcomes of the Better Care Fund (BCF), with the majority of target being successfully achieved. In particular support put in place to keep people independent in the community and various activities designed to speed up and facilitate hospital discharges have contributed to the good performance.

There is strong evidence that hospital delays have been reduced over the last 12 months, with a 15% reduction in total delayed days compared to 2017/18. The impact of the BCF on the demand for hospital beds is less clear and the ambitious non-elective admissions target for 2018/19 was not achieved, however demand for hospital beds did not change significantly from the previous year, which shows that performance has been stabilised. Combined with improved discharges, this has helped to reduce the pressure on the acute sector.

Some highlights from the BCF performance report are listed below:

- **Non-Elective Admissions** – The total number of non-elective admissions in 2018/19 was 84,600, similar to the 2017/18 figure despite an increasing local population. The target is ambitious and the system would have needed to avoid almost 10,000 further non-elective admissions in the year to achieve it.

- **Residential Admissions** – There have been less than 1,000 permanent placements to care homes for older people (65+) during the year, representing a 3% reduction on the already low level of permanent placements in 2017/18, and successfully exceeding target by more than 150 placements.
- **Delayed Days** – There were a total of 23,000 delayed days in 2018/19 across the system, representing a 15% reduction on 2017/18. Since an amended delayed days per day target was introduced in October 2018, Lincolnshire has achieved the 58.7 days target in 4 of the last 6 months, including the most recent month of March where there were an average of 48.5 delayed days per day.
- **Reablement** – For a sample 3-month period over winter, the situation of older people discharged from hospital into a community rehab or reablement service is determined at 91 days to indicate the medium term impact of support. Almost 9 out of 10 people (88%) discharged into reablement are at home 91 days after being discharged from hospital, a further improvement on last year's figure of 81%.
- **iBCF and Local Measures** - A number of local measures have been provided, some of which form part of information provided to NHSE on a quarterly basis and some locally developed to provide further understanding of performance and activity linked to BCF funding in Lincolnshire. Highlights for these measures include:
 - An increase in the number of adults supported with a home care service, where needs have been met with slightly reduced hours.
 - Almost 1,500 patients discharged from hospital into social care services at the weekend as a result of 7-day working, saving unnecessary delays in hospital.
 - Over 10,000 carers supported by the Local Authority in the last 12 months, to recognise, support and sustain valuable caring roles in the community

Work continues to further expand reporting across all areas of BCF spend and activity to provide a fuller understanding of impact, aligned with common programme aims. This will start to become available in future quarters for comment and review.

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	Better Care Fund 2019-20 Policy Framework
Appendix B	iBCF Reporting Requirements 2019-20
Appendix C	iBCF 2019-20 S31 Grant Determination
Appendix D	ASC Winter Pressures S31 Grant Determination
Appendix E	Disabled Facilities Grant Capital (DFG) Grant Determination 2019-20
Appendix F	2019-20 DFG Letter to District Councils – May 2019
Appendix G	BCF Performance Report - Q4 2018.19

9. Background Papers

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

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