

Bury Health and Wellbeing Board

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| Title of the Report | Better Care Fund (BCF) Improved Better Care Fund (IBCF) 24/25 Quarter 2 Reporting Template |
| Date | |
| Contact Officer | Shirley Allen |
| HWB Lead(s) in this area | Will Blandamer Executive Director Health and Adult Care and Place Based lead Adrian Crook – Director Adult Social Care Lynne Ridsdale, Chief Executive |

| Executive Summary | | | |
|---|--|------------|---------------|
| Is this report for? | Information | Discussion | Decision Y |
| Why is this report being brought to the Board? | To seek Health and Wellbeing Board retrospective sign off for the Bury quarter 2 reporting template for the Better Care Fund 2024/2025. The deadline for submission to the NHSE Better Care fund team was 30 th October 2024 | | |
| Please detail which, if any, of the Joint Health and Wellbeing Strategy priorities the report relates to. (See attached Strategy) www.theburydirectory.co.uk/healthandwellbeingboard | The Better Care Fund primarily focuses upon: <ul style="list-style-type: none"> • Living Well with a Long-Term Condition • Reducing Length of Stay in hospitals • Improving and supporting Hospital Discharges • Prevention & Early Intervention | | |
| Please detail which, if any, of the Joint Strategic Needs Assessment priorities the report relates to. (See attached JSNA) http://jsna.theburydirectory.co.uk/kb5/bury/jsna/home.page | <ul style="list-style-type: none"> • Living Well with a Long-Term Condition • Reducing Length of Stay in hospitals • Improving and supporting Hospital | | |

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| | Discharges <ul style="list-style-type: none"> • Prevention & Early Intervention • Falls |
| Key Actions for the Health and Wellbeing Board to address – what action is needed from the Board and its members? Please state recommendations for action. | (1) Note the content of the report. (2) Agree the retrospective submission of the Quarter 2 reporting template to BCF 2024/2025 as per the attached full reporting submission |
| What requirement is there for internal or external communication around this area? | None |
| Assurance and tracking process – Has the report been considered at any other committee meeting of the Council/meeting of the CCG Board/other stakeholders....please provide details. | The Quarter 2 reporting template has been collaboratively populated by relevant colleagues from within Bury Council and NHS GM Bury ICB. |

Introduction / Background

1 Introduction and background

1.1 The final Better Care Fund (BCF) 2023/2025 Policy Framework and Planning

Guidance can be found at: BCF

<https://www.gov.uk/government/publications/bettercarefund-policy-framework-2023-to-2025>

This policy framework confirms the conditions and funding for the Better Care Fund (BCF) for 2023 to 2025.

1.2 Since 2015, the BCF has been crucial in supporting people to live healthy, independent, and dignified lives, through joining up health, social care, and housing services seamlessly around the person. This vision is underpinned by 2 core objectives, to:

- enable people to stay well, safe, and independent at home for longer
- provide people with the right care, at the right place, at the right time

1.3 The BCF achieves this by requiring Integrated Care Boards (ICBs) and local government

to agree a joint plan of how the funding will be spent to meet the core objectives. Indeed, 94% of local areas agreed that joint working had improved because of the BCF following a survey in 2022.

- 1.4 The plan is owned by the Health and Wellbeing Board (HWB) and governed by an agreement under section 75 of the NHS Act (2006). This continues to provide an important framework in bringing local NHS services and local government together to tackle pressures faced across the health and social care system and drive better outcomes for people.
- 1.5 The BCF programme underpins key priorities in the NHS Long Term Plan by joining up services in the community and the government's [plan for recovering urgent and emergency care \(UEC\) services](#), as well as supporting the delivery of [Next steps to put People at the Heart of Care](#). The BCF facilitates the smooth transition of people out of hospital, reduces the chances of re-admission, and supports people to avoid long term residential care. The BCF is also a vehicle for wider joining up of services across health and local government, such as support for unpaid carers, housing support and public health.
- 1.6 The delivery of the BCF will support 2 key priorities for the health and care system that align with the 2 existing BCF objectives:
 - improving overall quality of life for people, and reducing pressure on urgent and emergency care, the acute sector, and social care services through investing in preventative services
 - tackling delayed discharges from hospital and bringing about sustained improvements in discharge outcomes and wider system flow - these are set out in the 'BCF objectives and priorities for 2023 to 2025' section below
- 1.7 At the same time, NHS England and the LGA published the Planning Requirements for the BCF. These can be found at: BCF [planning requirements](#),
- 1.8 The framework and guidance establish the key conditions and requirements of the Better Care Fund in 2023/2025.

2 BCF 2023/2025 Vision and Objectives

- 2.1 The Better Care Fund (BCF) Policy Framework sets out the Government's priorities for 2023-25, including improving discharge, reducing the pressure on Urgent and Emergency Care and social care, supporting intermediate care, unpaid carers and housing adaptations. The vision for the BCF over 2023-25 is to support people to live healthy, independent and dignified lives, through joining up health, social care and housing services seamlessly around the person. This vision is underpinned by the two core BCF objectives:
- 2.2 The objectives, priorities and performance targets and what data we have to collect to report on are defined very clearly in the guidance: <https://www.gov.uk/government/publications/better-care-fund-policy-framework-2023-to-2025>.

2.3 Objective 1: to enable people to stay well, safe and independent at home for longer

The priorities for health and social care are to improve quality of life and reduce pressure on urgent emergency hospital care, other acute care in the hospitals and vcvcadult social care services. This has to be achieved by everybody in the health and care system working together. including: collaborative working with the voluntary, housing and independent provider sectors and by investment in a range of preventative, community health and housing services and by supporting unpaid carers

2.4 Objective 2: to provide people with the right care, at the right place, at the right time.

The priorities for health and social care are to tackle immediate pressures in delayed discharges and demand for hospital attendances and admissions, bringing about sustained improvements in outcomes for people discharged from hospital, and wider system flow. This will be achieved by embedding strong joint working between the NHS, local government and the voluntary, housing and independent provider sectors

2.5 BCF metrics for 2024 to 2025

2.6 The four metrics to be reported on are:

Avoidable Admissions
 Discharge to Normal Place of Residence
 Falls
 Residential Admissions

| Metric | Definition | Actual Performance | Assessment of Progress | Challenges | Variance from Plan |
|--|--|--------------------|-----------------------------|--|---|
| Avoidable Admissions | Unplanned Hospitalisation | 262.3 | Not on track to meet target | Challenges on data collection as data is released late by NHSE | Variance from plan is -39.7. There have been more more than predicted NEI admissions |
| Discharge to Normal Place of Residence | Discharged from acute hospital to normal residence | 90.76% | Not on track to meet target | Challenges on data collection as data is released late by NHSE | Variance from plan is less than 1% at 0.74%. It is thought that variance from plan is related to other acute site discharges mainly |

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| | | | | | NMGH |
| Falls | Emergency hospital admissions due to falls in people aged 65 and over | 468.2 | On track to meet target | No challenges | No variance from plan |
| Residential Admissions | Rates of permanent admissions to residential care | Measured annually | On track to meet target | No challenges | No variance from plan |

3.0 Quarter 2 Finance and Output Report

3.1

| Scheme Type | Planned Expenditure Annual £ | Actual Expenditure Year to Date £ | Planned Outputs Annual | Actual Outputs Year to Date. | Provider and Funding Stream |
|--------------------------------|------------------------------|-----------------------------------|------------------------|------------------------------|------------------------------------|
| Reablement Service | 3,716,984 | 1,858,492 | 840 | 420 | LA via minimum NHS contribution |
| Staying Well Programme | 88,100 | 44,050 | 0 | 0 | LA via minimum NHS contribution |
| Programme Management | 135,000 | 67,500 | 0 | 0 | LA via minimum NHS contribution |
| Intermediate Tier | 530,647 | 265,324 | 9 | 9 | LA via additional NHS contribution |
| Rapid Response | 910,500 | 455,250 | 0 | 0 | LA via additional NHS contribution |
| Integrated Neighbourhood Teams | 509,753 | 254,877 | 0 | 0 | LA via additional NHS contribution |
| Domiciliary Care Packages | 950,317 | 475,159 | 36,311 | 18,155.50 | Private sector via minimum NHS |

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|---|-----------|-----------|--------|------|--|
| | | | | | contribution |
| Residential Placements | 950,317 | 475,159 | 21.4 | 11 | Private sector via minimum NHS contribution |
| Nursing Home Placements | 950,317 | 475,159 | 20.3 | 10 | Private sector via minimum NHS contribution |
| Supported Living Placements | 950,317 | 475,159 | 14.5 | 7 | Private sector via minimum NHS contribution |
| Carelink | 75,700 | 37,850 | 2300 | 1150 | LA via additional NHS contribution |
| Domiciliary Care Packages | 5,781,385 | 2,890,693 | 10,350 | 5175 | LA via IBCF |
| Assessment Teams | 313,846 | 156,923 | 0 | 0 | LA via IBCF |
| Prevention/Early Intervention case management | 1,533,217 | 766,609 | 0 | 0 | LA via IBCF |
| Disabled Facilities Grant | 2,265,064 | 1,132,532 | 170 | 85 | LA via DFG |
| Primary Care Support | 475,464 | 0 | 0 | 0 | Private Sector via ICB discharge funding – goes live in September 24 |
| GP Support to Intermediate Tier | 50,000 | 42,250 | 0 | 0 | Private Sector via ICB discharge funding |
| Home from Hospital | 105,660 | 44,000 | 0 | 0 | Voluntary Sector via ICB Discharge |

| | | | | | Funding |
|--|-----------|-----------|--------|-------|---|
| Hospice | 352,143 | 147,000 | 0 | 0 | Voluntary Sector via ICB Discharge Funding |
| Additional IMC beds | 416,733 | 207,000 | 160 | 80 | Private Sector via ICB discharge funding |
| Core 24 hour liaison support for vulnerable adults | 711,109 | 355,555 | 0 | 0 | NHS Mental Health via minimum NHS contribution |
| Crisis Response Community | 1,784,192 | 892,096 | 4200 | 2100 | NHS community provider via minimum NHS contribution |
| Intermediate tier / NHS | 2,267,401 | 1,133,701 | 0 | 0 | NHS community provider via minimum NHS contribution |
| Integrated Neighbourhood Teams / NHS | 571,312 | 285,656 | 0 | 0 | NHS community provider via minimum NHS contribution |
| Falls Prevention | 226,272 | 113,136 | 0 | 0 | NHS community provider via minimum NHS contribution |
| Bury LCO | 937,225 | 468,613 | 0 | 0 | NHS community provider via minimum NHS contribution |
| Domiciliary Care Packages | 274,912 | 137,456 | 10,446 | 5,223 | Private Sector LA discharge funding |

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|---------------------------------------|-----------|---------|-----|-----|--|
| Residential Placements | 274,912 | 137,456 | 6.2 | 3 | Private Sector LA discharge funding |
| Nursing Home Placements | 274,912 | 137,456 | 5.9 | 3 | Private Sector LA discharge funding |
| Supported Living | 274,912 | 137,456 | 4.2 | 2 | Private Sector LA discharge funding |
| Reablement at Home | 682,846 | 341,423 | 0 | 0 | LA and LA Discharge Funding |
| Nursing Home Training | 20,091 | 10,046 | 0 | 0 | Private sector via minimum NHS contribution |
| Alzheimer's; Society | 82,765 | 41,383 | 0 | 0 | Voluntary sector via Minimum NHS contribution |
| Nursing home Training | 49,077 | 24,359 | 0 | 0 | Private Sector via additional NHS contribution |
| Stroke Association | 60,000 | 30,000 | 0 | 0 | Voluntary Sector via additional NHS contribution |
| VCSE Housing Support | 40,000 | 20,000 | 0 | 0 | NHS Mental Health Provider via ICB Discharge funding |
| Same Day Emergency Care/ Frailty Ward | 342,000 | 171,000 | 0 | 0 | NHS Acute Provider via ICB Discharge Funding |
| Integrated Intermediate Tier | 1,826,409 | 913,202 | 540 | 270 | LA via minimum NHS contribution |
| Integrated Neighbourhood Teams / case | 1,353,747 | 676,874 | | | LA via minimum |

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| management | | | | | NHS contribution |
|------------|--|--|--|--|------------------|

4.0 Reporting and checkpoints

4.1 It is expected that performance on spend and the outputs aligned to the main BCF programme will be reported on a quarterly basis. The reporting requirements have now been finalised for quarter 2 and have been submitted to NHSE Better Care fund Team.

5. Links to the Bury Locality Plan

5.1 The Better Care Fund proposals should not be read in isolation but should be seen as a constituent part of the Bury Locality Plan and "Let's Do It' 2030 Bury Strategy which sets out the entirety of the local approach to Health and Social Care transformation.

Recommendations for action

- That the Health and Wellbeing Board note the content of the quarter 2 reporting submission
- That the Bury Health and Wellbeing Board retrospectively approve the attached Better Care Fund 2024/2025 quarter 2 reporting submission and ratify the decision to submit to the national Better Care Fund team for assessment.

Financial and legal implications (if any)

- These proposals relate to the use of financial resources
- These proposals have been developed in partnership with the Bury Council s.151 Officer and the Bury Director of Finance.

Equality/Diversity Implications. Please attach the completed Equality and Analysis Form if required.

- None

CONTACT DETAILS:

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Date: 06 January 2025



Bury HWB BCF Q2
Reporting Template.xl

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