







DATE OF MEETING: 7TH OCTOBER 2022

REPORT TITLE: Better Care Fund 2022/23 Plan and Narrative

REPORT AUTHOR: BEV NICHOLSON TEL: 07812 461464

JOB TITLE: INTEGRATION E-MAIL: Beverley.nicholson@reading.gov.uk

PROGRAMME MANAGER

ORGANISATION: READING BOROUGH COUNCIL

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report outlines the Better Care Fund (BCF) 2022/23 Plan submission for Reading Borough Council. The planning guidance¹ was released late, in mid-July 2022, for this financial year, however whilst this was awaited the BCF funded schemes have continued and are planned to continue for the remainder of this financial year.
- 1.2 The report sets out the National Conditions, as set in the BCF Planning Guidance and our plan to provide assurance in how we will meet the conditions. Our BCF Plan and Narrative are required to be submitted to NHS England by 26th September and this will be completed using the delegation granted to the Executive Director of Adult Social Care, Seona Douglas in consultation with Lead Councillor, Ruth McEwan (Chair of the Reading Health and Wellbeing Board). The plan will also be ratified at the Health & Wellbeing Board.
- 1.3 The Reading BCF 2022-23 Plan, BCF Narrative and BCF Demand and Capacity Template are attached as Appendices 1, 2 and 3.
- 1.4 The Section 75 Framework Partnership Agreement, to pool funds from the Integrated Care Board (ICB) and the Council will be drafted for submission in line with the BCF timeline, once approval of our plans have been received. This document is required to meet the National Conditions as set out in the Better Care Fund Policy and Guidance for 2022/23.

2. RECOMMENDED ACTION

- 2.1 For the Health & Wellbeing Board to note the contents of the Better Care Fund (BCF) Plan and Narrative for 2022/23, including the National Conditions and Metrics against which the BCF performance will be measured.
- 2.2 The Health & Wellbeing Board to note the final BCF Plan and Narrative for 2022/23 has been formally submitted by the due date of 26th September 2022 to NHS England utilising delegated authority of the Executive Director for Adult Social Care in consultation with the Lead Member for Public Health in order to comply with national deadlines outside of the Board meeting cycle.

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3. POLICY CONTEXT

- 3.1 The Better Care Fund (BCF) acts as a vehicle to facilitate system integration of health and social care by providing targeted funding to promote joint working to achieving shared outcomes. It requires Integrated Care Boards, ICBs (formerly Clinical Commissioning Groups-CCG's) and Local Authorities (LA's) to pool budgets, under a Section 75 Framework Partnership Agreement, and to agree an integrated spending plan for how they will use their Better Care Fund allocation to promote/deliver on integration ambitions. The objectives of the Better Care Fund for 2022/23 are:
 - Enable people to stay well, safe and independent at home for longer
 - · Provide the right care in the right place at the right time

4. THE PROPOSAL

4.1 Requirements for submission

- BCF Plan Template (2022/23)
- BCF Narrative
- Capacity & Demand Plan Template (which does not form part of the NHSE Assurance process)

4.2 Timetable for submission

The timeline for the submission of BCF Plans and Assurance are set out below:

BCF planning requirements published	19 th July 2022
Optional draft BCF planning submission submitted to regional Better Care Manager (BCM)	By 18th August 2022
Review and feedback to areas from BCMs	By 1 st September 2022
Internal scrutiny and review (Local Authority [LA] and Integrated Care Board [ICB])	Between 1 st September and 14 th September
BCF planning submission from local HWB areas (agreed by ICBs and local government). All submissions will need to be sent to the local BCM, and copied to england.bettercarefundteam@nhs.net Note: Delegated Authority from Health & Wellbeing Board to sign off the final BCF Plan and Narrative.	By 26 th September 2022
Scrutiny of BCF plans by regional assurers, assurance panel meetings and regional moderation	26 th September to 24 th October 2022
Regionally moderated assurance outcomes sent to BCF team	24 th October 2022
Cross-regional calibration	1 st November 2022
Approval letters issued giving formal permission to spend (CCG minimum)	30 th November 2022
All section 75 agreements to be signed and in place	31st December 2022

4.3 National Conditions

The Better Care Fund (BCF) National conditions are an assurance framework to ensure the Better Care Fund is managed appropriately.









The Better Care Fund (BCF) National Conditions for 2022-23 are as follows:

- a) A jointly agreed plan between local health and social care commissioners and signed off by the health and wellbeing board.
 (For 2022/23 this consists of a BCF Plan for metrics and finance, a supporting BCF Narrative and a Capacity & Demand Plan)
- b) NHS contribution to adult social care to be maintained in line with the uplift to NHS minimum contribution.
 - (For 2022/23 the uplift was 5.66%)
 Invest in NHS commissioned out-of-hospital
- c) Invest in NHS commissioned out-of-hospital services. (Incl. Discharge to Assess and Intermediate Care)
- d) Implementing the BCF policy objectives.
 - Enable people to stay well, safe and independent at home for longer.
 - Provide the right care in the right place at the right time.

The BCF Plan and Narrative provide confirmation of how these conditions are being met and will continue to be met for the period covered by the fund (April 2022 to March 2023).

4.4 Better Care Fund Metrics

The BCF Policy Framework sets national metrics that must be included in BCF plans in 2022-23. The ambitions for each area and how to meet the metrics are agreed between the Local Authority and the Integrated Care Board (ICB) and other local system partners who influence the outcomes (e.g. Royal Berkshire Foundation Trust in respect of hospital discharge targets)

The BCF Metrics for 2022/23 are as follows:

- 4.4.1 The framework retains four metrics from the previous years (listed below in the order they appear on the BCF Planning Template, Metrics page, see Appendix 1):
 - **Metric 1: Admission Avoidance** Unplanned hospitalisation per 100,000 population. **Note:** NHS England have changed the method of measuring metric in 2022/23 to using the "Indirectly Standardised Rate (ISR) of Admissions, as opposed to the previous method used in 2021/22 of "Unplanned hospitalisation for chronic ambulatory care sensitive conditions".
 - **Metric 2: Discharge to usual place of residence** Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence
 - **Metric 3: Residential Admissions** Long term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population
 - **Metric 4: Reablement** Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services

These national metrics are aligned with local targets which have been reached based on previous performance, and in agreement with system partners across Berkshire West.

Whilst not a metric for 2022/23, Systems have been asked to continue to monitor Length of Stay, in an acute hospital bed, over 14 days and 21 days. This metric was introduced as a new metric in 2021/22 but has not been included in the plan for 2022/23.









4.4.2 The agreed targets for 2022/23 are set out below, together with an outline of the initiatives to meet them. More detail can be found in Appendices 1 and 2:

Metric 1: Admission Avoidance

The overall annual target is 810 (per 100k population), broken down by each quarter in this table.

2022-	2022-23	2022-23	2022-23		
23 Q1	Q2	Q3	Q4		
Plan	Plan	Plan	Plan	Local plan to meet ambition	
206	200	206	198	The overall annual target is 810 (per 100k population). Multi-Disciplinary Team (MDT) reviews at Primary Care Network (PCN) level to ensure people with long term conditions are supported to manage their conditions effectively. Intermediate Care and Rapid Response teams to support people in the community. Support to the Health Checks programme and in particular, a focus on communities where there is deprivation, using a Population Health Management (PHM) approach).	

(Per 100,000 population)

Metric 2: Discharge to usual place of residence

2022-23 Q4 Plan	Local plan to meet ambition
92.0%	We have continued to adopt a "Home First" approach as outlined in the Hospital Discharge Service Policy and the High Impact Change Model for transfers of care, which has been successful. We also work closely with the Voluntary Care Sector to enable support to be in place, where needed, and included in the discharge plan. In the small number of cases where a person cannot return directly home, there is a plan to support them to get back home, wherever possible, as quickly as possible, through our D2A Stepdown therapy led service. Our Priority for introducing a "Self-Neglect Pathway" will support us to get more people home quickly but the first phase for hoarding will likely not show an impact until the first quarter of 2023/24. There is a Berkshire West wide review of reablement and intermediate care services to support timely discharge and support at home where needed. The use of Technology Enabled Care (TEC) has been very successful in Reading, and work in this area to further develop the TEC available to people is underway. Numbers of people using TEC has increased significantly and we expect this to be a key factor in enabling people to return home and remain safe in that environment.

(As a percentage of the number of people discharged from Acute hospital)

Metric 3: Residential Admissions

2022-23 Plan	Local plan to meet ambition
469	Implementation of the use of Technology Enabled Care and continued collaboration with system partners providing community rapid response and intermediate care to avoid admission to care homes where possible.

(Per 100,000 population)









Metric 4: Reablement

2022-23 Plan	Local plan to meet ambition
85.0%	We are in the process of a local (Reading) review of our Reablement services and are also involved in a review of Intermediate Care service delivery at Berkshire West "Place" level. We believe the target is realistic based on previous performance and is a stretch, in consideration of the likely impact of the winter Flu season and cost of living. Public Health are predicting an increase in death rates 3 to 5 times worse than in previous years, due to the impact of 'cost of living' increases, potentially leading to neglect, cutting back and leaving elderly frail people susceptible and less resilient. We continue to work closely with our voluntary care sector partners to support people who are vulnerable, and we are currently in the process of commissioning a "Home from Hospital" service, that will complement our reablement and intermediate care services in Reading.

(As a percentage of the number of people discharged from hospital into reablement)

5. CONTRIBUTION TO STRATEGIC AIMS

- 5.1 The Better Care Fund is utilised by Reading Borough Council and the Integrated Care Board for Buckinghamshire, Oxfordshire and Berkshire West (BOB) to support a variety of Health and Social Care schemes that are aligned with both the Reading Health and Wellbeing Board strategic priorities and those of the Integrated Care Partnership (ICP) for Berkshire West.
- 5.2 The Better Care Fund schemes contribute to the Corporate Plan Priorities as follows:

Healthy environment - supporting people on hospital discharge pathways, ensuring that they have the appropriate equipment (where necessary) and that they are able to return to their normal place of residence as quickly as possible.

Thriving Communities - BCF funded schemes such as Carers Funding - Grants, Voluntary Sector, Information and Advice, Community Reablement services and many more, aimed at supporting members of our community to remain healthy and active, and avoid unplanned hospital admissions.

Inclusive economy - The integration programme of work for Reading has a focus on reducing health inequalities in the borough through a range of projects. Some of the schemes supported by the BCF such as Street Triage and the Carer's schemes aim to address issues that impact on people who may be vulnerable or disadvantaged.

6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

6.1 This report summarises the Better Care Fund plan for 2022/23. No new services are being proposed or implemented that would impact on the climate or environment.

7. COMMUNITY ENGAGEMENT AND INFORMATION

7.1 The Better Care Fund Plan for 2022/23 will be submitted to the Reading Integration Board (RIB). Voluntary Care Sector services are represented at RIB, along with representatives from a range of health service providers, who have had opportunity to









view, comment and contribute to the plan. Healthwatch Reading are also system partners, represented at RIB, and they bring the service users' voice when considering projects and initiatives.

8. EQUALITY IMPACT ASSESSMENT

8.1 There are no new proposals or decisions recommended / requested that will or could have a differential impact on: racial groups, gender, age, sexual orientation, religious belief or people with disabilities and therefore an Equality Impact Assessment is not required for this report.

9. LEGAL IMPLICATIONS

- 9.1 Compliance with BCF 2022/23 National Conditions: The report sets out in sections 4.3 and 4.4 how the Better Care Fund plans to meet the National Conditions. If we do not meet these conditions, we may forfeit some of the funding and our risk pool and contingency funding is a mandatory component of the BCF Plan in relation to delivery against these conditions and the metrics. If we meet our agreed metrics and the National Conditions then, in agreement with the Integrated Care Board (ICB), we will be able to access the risk pool (£522k) and contingency funding (£129k) to support further initiatives. Appendix 1 provides more detail in relation to meeting these conditions.
- 9.2 Section 75 Framework Partnership Agreement: An agreement will be drawn up between the Integrated Care Board (ICB) and Reading Borough Council (RBC) for the pooled funds, as required under Better Care Fund Policy and Guidance for 2022/23 and is subject to scrutiny and formal sign-off.

10. FINANCIAL IMPLICATIONS

Table 1 below provides a summary of Better Care Fund budget for 2022/23:

Running Balances	Income	Planned Expenditure
DFG	£1,197,341	£1,197,341
Minimum NHS Contribution	£11,781,757	£11,781,757
iBCF	£2,692,624	£2,692,624
Additional LA Contribution	£270,400	£270,400
Additional NHS Contribution	£0	£0
Total	£15,942,122	£15,942,122

11. BACKGROUND PAPERS

11.1 Appendices:

Appendix 1- Reading BCF Narrative (2022/23)

Appendix 2- Reading BCF 2022-23 Plan (PDF Version)

Appendix 3- Reading HWB - Capacity & Demand BCF (2022-23) (PDF Version)

Note: The Capacity and Demand template is required with our formal submission of the BCF but will not be considered during the Assurance and Approval process for the 2022/23 plans.